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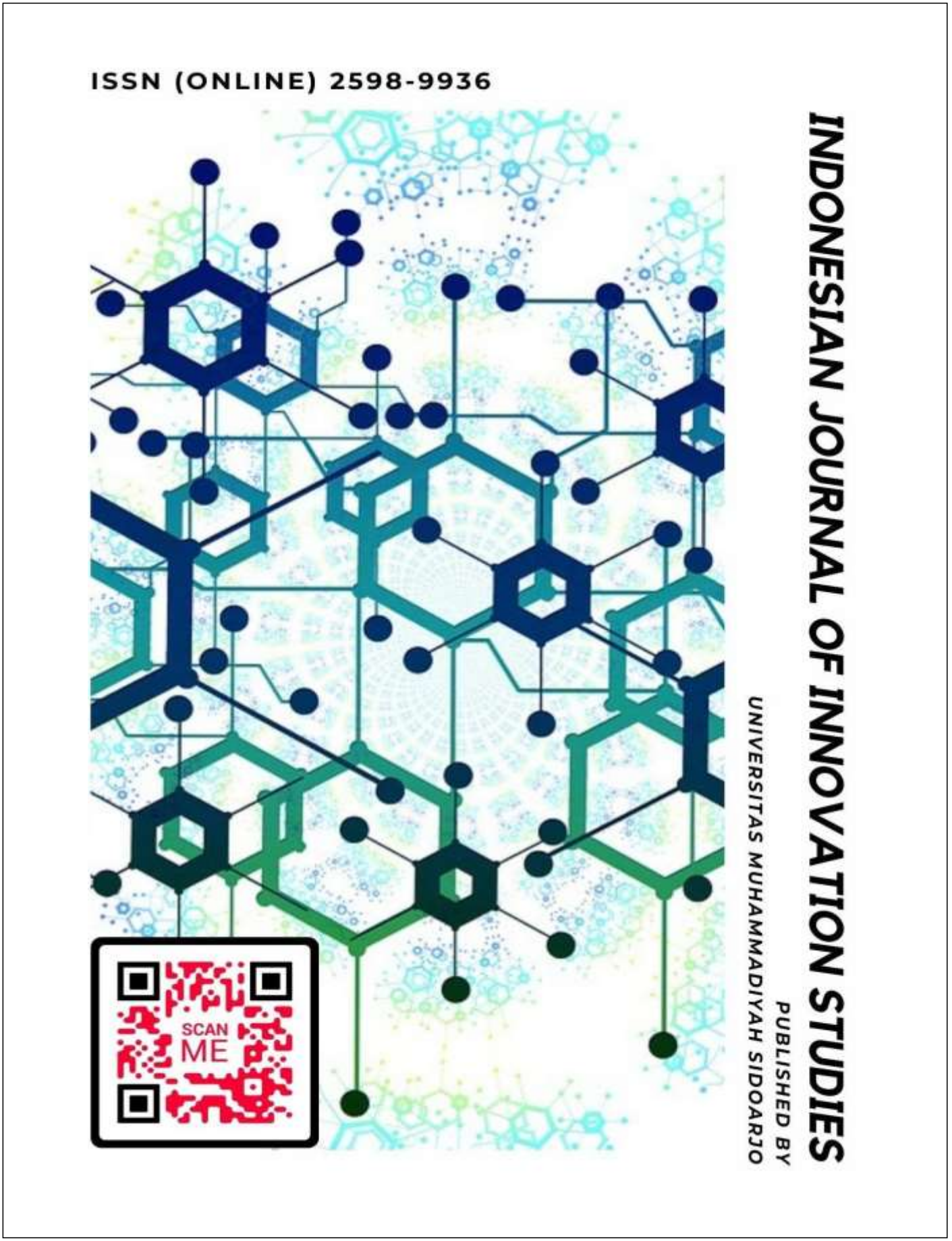


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# CHANGES IN VENTILATION PARAMETERS FOR VARIOUS TYPES OF PREVMANIA

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**Abstract**. To study the importance of functional abnormalities of thyroid status in patients with community-acquired pneumonia, to recognize their clinical significance while choosing treatment tactics.

**Keywords**; VP- community-acquired pneumonia, tuberculosis, bronchiectatic disease, bronchial asthma, respiratory function.

Patients and methods. During the period from 2020 to 2022, 89 patients with community-acquired pneumonia were examined. Hospitalized () The group was formed by random sampling – as patients were admitted to the hospital. During the 15 years community-acquired pneumonia and respiratory functions have been studied in patients but the only problem remains to a greater extent due to the lack of their use necessary for the initial diagnosis of community-acquired pneumonia. In modern methods of studying the function of external respiration, there is a complete functional display of both macrotax and microscopic changes, since they are present in the lungs with community-acquired pneumonia, a functional component of the diagnosis to allow assessing the general condition of the patient and the therapy being carried out. It is rare that patients with community-acquired pneumonia often have significant violations of the ventilation function of the lungs. Patients often require diagnostic tests with community-acquired pneumonia. Patients with nosocomial pneumonia differential diagnosis of acute respiratory diseases hospitalized in serious condition is quite diverse and requires such excluded non– infectious conditions as adult respiratory distress syndrome, congestive heart failure, atelectasis, toxic lung damage with oxygen and drugs. Of these, it is difficult to distinguish on radiographs from pneumonia. The main group consisted of 89 patients with community-acquired pneumonia, selected taking into account the following criteria. The age of patients is from 18 to 70 years, the average age is 26+38 years. A patient with respiratory pathology rather than pneumonia (tuberculosis, bronchiectatic disease, lung cancer, bronchial asthma). Pneumonia in people with immunodeficiency is not a characteristic picture, because it is caused by various pathogens and they are associated only with severe conditions that caused immunodeficiency. The design of the research consisted of several stages. 1) Clinical and laboratory indicators, MSCT .

2) Comprehensive assessment of thyroid status with community-acquired pneumonia 3) To study the thyroid status in 65 patients with community-acquired pneumonia of various etiologies and severity in dynamics. Against the backdrop of treatment 4) Serological diagnostics 5) Static analysis 6) RCT – X-ray computed tomography 7) Sputum examination 8) Study of the gas composition of blood using the Bayer Diagnostics 348 gas analyzer (Germany) . 9) Spirography research 10) Pneumotachography research RCT is not a routine method in the diagnosis of pneumonia. X-ray computed tomography is indicated in case of doubts about the diagnosis, it is necessary to exclude cavities of bronchiectasis, changes in the mediastinum. Results: in the patient's anamnesis, severe community-acquired pneumonia in hospitalized patients occurs among women and men over the age of 55 who abuse alcohol or seek treatment late. MSCT characteristics of community-acquired pneumonia: lobular, polysegmental infiltration, tendency to abscess. Distribution of patients by the nature of thyroid status depending on gender and age; Thyroid status Male (n=43) Female (n=40) Validity of differences Norm P+m% 60,1+6,4(26) 58,7=6,0(33) -\- Clinical and

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laboratory parameters in patients with VP depending on SEP (SEP-1 and without SEP) revealed that patients have higher levels of leukocytes in peripheral blood ($p<0.01$), urea ($p<0.05$), cortisol, aminotransferases, heart rate, number of breaths in 1 min compared with patients without SEP-1. The conducted studies have shown that complete clinical and radiological resolution of communityacquired pneumonia is not always accompanied by normalization of lung function. Sputum examination seems to be the cornerstone in the diagnosis of bacterial pneumonia, but the coughed-up material is often seen to be contaminated with opportunistic bacteria. In a laboratory by an experienced pathologist of a sputum smear stained according to Romanovsky – Giemse, the sensitivity of sputum examination increases with the use of monoclonal atelectasis ( AT) to pneumocysts. The blood gas composition was studied in 51 patients with communityacquired pneumonia in the first weeks or first 10 days of admission to the hospital using a Bayer Diagnostics 348 gas analyzer (Germany). The gas composition of the blood is determined by PaCO2, PaO2, pH.

The research in patients with hypoxemia in combination with hypercapnia (PaCO2 more than 45 mmHg) and sharply in patients with hypoxemia (HbO2 less than 70%), in practice this indication is combined with normocapnia or hypocapnia. The gas analyzer studied the indicators of lung ventilation was carried out on the basis of the department of pulmonology using the product device in Germany. The research was conducted in the morning before eating on an empty stomach in conditions of relative rest in an orthostatic position by the patient, patients with bronchoactive drugs were not used, so that they would be in a state without food and medicine. The research of spirography and pneumotachography in 89 patients with community-acquired pneumonia was determined by adopting the following ventilation parameters: spirographically, a record was made for observation and diagnosis of DO, BH, MOD, ZHEL, FZHEL and FEV1, the best of 3 maneuvers were taken for practice. The pneumotachography study included a record for observation in 38 patients to diagnose flow– volume curves of exhalation with the calculation of PIC, MOS25, MOS50, MOS75. We made the remaining 51 patients in practice using bodyplethysmography and determined the intra-thoracic volume of gas ( VGO) at the level of functional residual lung capacity and air flow velocity at the mouth , these indicators of which were expressed in absolute numbers and as a percentage of the proper values in accordance with the standard norms laid down in the device. In pathology, community-acquired pneumonia, violation of the ventilation function of the lungs was assessed in relation to FEV1, FEV, FZHEL to the proper values, if the total ratio was 80% or more, then these indicators are normal, a decrease in FEV, FEV1, FZHEL, by more than 10% -15% relative to the proper value, in practice we consider pathological. According to the tables of the degree of reduction of ventilation indicators, the definition is as follows: 1 degree - a decrease of 15-30%; 2 – a degree of 35-50%, 3 degree – more than 50% of the required value. The cases of community-acquired pneumonia in a healthy patient were considered to be a mixed type of ventilation disorders, there was a predominant decrease in VEL compared with FEV1, because of this, in patients with isolated VEL reduction, an obstructive type of ventilation disorders was considered, respectively, 1, 2, 3 degrees. The research of these methods we considered that 89 patients with communityacquired pneumonia and 8 of them was healthy volunteers underwent a bronchodilation test with salbutamol. Conclusion. X-ray examination of the lungs in patients is the most important diagnostic criteria. Allowing early detection of inflammatory processes are invisible during clinical and laboratory indicative MSCT examination and to resolve the issue of additional serological examination of early therapy in order to prevent the development of bronchiectopic disease.

Practical recommendations: to detect bronchoobstructive clinical syndrome locally in the area of pneumonic infiltration or in patients with community-acquired pneumonia, it is necessary to perform auscultative examination of the lungs correctly: in a clinical position using forced exhalation, except in an orthostatic position of the body.

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Revention and therapy. Treatment of such patients is difficult due to the polyethology of acute respiratory viral infections, which are caused by DNA andRNA-containing viruses, the presence of mixed infections and complicated forms of diseases, the formation of viral resistance to chemotherapy drugs, the development of secondary immunological insufficiency that aggravates the course and outcome of respiratory infection. The therapeutic effect is preserved against the background of taking chemotherapy only for respiratory viruses and does not affect the immune system; toxic side effects are possible. In the case of viral infection, the cytokine response develops mainly according to the Th1 cell type. This plays a crucial role in protecting against intracellular pathogens, including viruses. It is believed that the predominantparticipation of cytokines produced by Th2 cells is associated with viral persistence and chronization of the process, and the participation of cytokines produced by Th1 cells is associated with recovery and

elimination of the pathogen. The main purpose of viruses is to inhibit the induction of interferon synthesis and action (IFN) for unhindered infection of cells and spread through the body. In this situation, the use of a genetically engineered IFN preparation can prevent the inhibitory effect of the virus and make it possible to manifest the effect of IFN in full and in optimal time for blocking the spread of the virus. Thus, recombinant IFN introduced from the outside into the respiratory tract, for example in the form of drops, ointments or aerosol sprays, can have both a therapeutic effect at the initial stage of the disease and a preventive effect during an epidemic. Undoubtedly, IFNs are currently the drugs of choice in the treatment of viral infections. First, IFNs have antiviral activity against almost all types of DNA and RNA viruses, "launching" a program for the synthesis of antiviral proteins in cells. Secondly, IFN activates antiviral immunological reactions at the level of the body. The result is the involvement of all possible antiviral mechanisms in the organization of a single protective reaction of the body against the introduced virus. Previous in vitro studies vitroon SARS-CoV and MERS-CoV infections haveshown that IFN type 1 (IFNa/β) has inhibitory activity. To prevent коронавируснойthe coronavirus infection COVID-19 (2019-nCoV), the Ministry of Health (MOH) of Russia recommends individual non-specific prevention measures, for example: irrigation of the nasal mucosa with an isotonic solution of sodium chloride, which reduces the number of both viral and bacterial pathogens of infectious diseases. Separately, the Ministry of Health of the Russian Federation highlights the use of medicines with barrier functions as a method of combating the spread of coronavirus. In this case, special attention is paid to local forms of drugs containing IFN. For the prevention and treatment of children, including from the first days of life, the Ministry of Health of the Russian Federation recommends the use of recombinant IFNa-2b drugs (in the form of drops and sprays), which are widely used for therapeutic and preventive purposes in seasonal acute respiratory infections. The drug of choice allowed for use by pregnant women and children from the first days of life can be a domestic drugGrippferon in the form of nasal drops and spray. Mechanism of actionGrippferonis based on preventing the reproduction of any viruses that enter the body through the respiratory tract. Safety and efficacy of the drug Grippferon in the treatment and prevention of respiratory viral infections confirmed multiprophylaxisand therapy Treatment of such patients is difficult due to the polyethology of acute respiratory viral infections, which are caused by DNA andRNA-containing viruses, the presence of mixed infections and complicated forms of diseases, the formation of viral resistance to chemotherapy drugs, the development of secondary immunological insufficiency that aggravates the course and outcome of respiratory infection. The therapeutic effect is preserved against the background of taking chemotherapy only for respiratory viruses and does not affect the immune system; toxic side effects are possible. In the case of viral infection, the cytokine response develops mainly according to the Th1 cell type. This plays a crucial role in protecting against intracellular pathogens, including viruses.

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