

покращити якість життя. Також у більшості випадків відмічалась редукція симптомів психічних порушень і розладів.

Таким чином, застосування розробленої нами програми надання медико-психологічної і психіатричної допомоги постраждалим від воєнних дій громадянам України сприяє запобіганню ускладненню психопатологічних станів, скорішому одужанню та адаптації до нової реальності.

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CHARACTERISTICS OF THE COURSE OF PURULOUS POST-TRAUMATIC MEDIASTITIS ON THE BACKGROUND OF FIRE PENETRATING WOUNDS OF THE CHEST

Local wars and armed conflicts that have occurred in the world in recent decades have shown the important role of providing emergency surgical care in the treatment of chest wounds with modern firearms¹.

¹ Selected lectures on military field surgery / Ed. Prof. V. V. Boyka, prof. V. M. Lisovoy, prof. V.V. Makarova – Kharkiv, "NTMT", 2018. 212 p.; Molina D. K. Gunshot wounds: a review of firearm type, range, and location as pertaining to manner of death / J. Forensic Med. Pathol. 2013, No. 34 (4). R. 366-371.

At the same time, it should be recognized that at the very beginning of the ATO/OS military surgeons were not very familiar with the principles of treatment of the specified contingent of wounded with gunshot penetrating wounds of the chest (PWC).

Indicators of the frequency of complications associated with not always correct tactics in 2014, at that time reached 25 %, which the authors attribute to the rarity of gunshot wounds themselves and the insufficient practical experience and knowledge of doctors of the pathogenesis of combat trauma and the features of providing emergency surgical care, as well as the lack of technical capabilities and the lack of proper provision of the treatment process².

It should be emphasized that thanks to the development of military medicine and the allocation of special powers to the newly organized command of the medical forces of the Armed Forces of Ukraine at the current stage, the rapid delivery to military and civilian medical institutions led to the delivery of a significant number of wounded to the operating theater while still alive, despite the massive blood loss and destruction of the internal organs of the chest³.

Purulent mediastinitis is one of the formidable thoracic complications of PWS. The problem of diagnosis and treatment of posttraumatic purulent mediastinitis (PPM) is insufficiently covered in the literature, as evidenced by the few publications based only on the study of a small number of observations. The development of PPM after PWS in a significant part of observations leads to permanent disability and fatal outcomes⁴.

At the same time, the lethality of PPM, even against the background of complex intensive treatment, does not fall below 40 %⁵.

Thus, the peculiarities of the course of PPM against the background of PWS remain largely unresolved or partially resolved, which became the basis for conducting this scientific analytical study.

2 Khomenko I. P., Verba A. V., Khoroshun E. M. Characteristics of combat surgical trauma, shortcomings and achievements in the treatment of wounded and injured in the conditions of anti-terrorist operation / Interdepartmental medical journal "Science and Practice". – 2016, #1-2 (7-8). P. 27-31.; Hemmila M.R., Cain-Nielsen A.H., Wahl W.L., Vander Kolk W.E., Jakubus J.L., Mikhail J.N., Birkmeyer N.J. Regional collaborative quality improvement for trauma reduces complications and costs / Journal of Trauma and Acute Care Surgery, 2015, 78 (1). P. 78-85.

3 Atlas of combat surgical trauma (experience of the anti-terrorist operation of the united forces). Scientific edition. / According to the general ed. academician of NAMNU V. I. Tsimbalyuk. Kharkiv: Collegium, 2021. 385 p.; Kashtalyan M.A., Gerasimenko O.S., Tertyshnyi S.V., Enin R.V. New directions in the treatment of gunshot wounds / Kharkiv surgical school. 2017, No. 1. P. 112-115.

4 Hetman V.G., Safonov V.E., Kravchenko K.V., Khuda M.Yu., Dudla D.I. Complications and consequences of combat trauma of the chest: treatment tactics / Collection of scientific works of the XXIV Congress of Surgeons of Ukraine, dedicated to the 100th anniversary of the birth of Academician O.O. Shalimova. September 26-28, 2018 m. Kyiv. P. 15-16; Penetrating thoracic injuries: a retrospective analysis from a French military trauma center. Swiech A., Boddaert G., Daban J.L., Falzone E., Ausset S., Boutonnet M.J. R. / Army Med Corps. 2019 Jun 6. pii: jramc-2019-001159. doi: 10.1136/jramc-2019-001159.

5 Hetman V.G., Safonov V.E., Kravchenko K.V., Khuda M.Yu., Dudla D.I. Treatment tactics for complications and consequences of combat chest trauma / Collection of scientific papers of the XXIV Congress of Surgeons of Ukraine, dedicated to the 100th anniversary of the birth of academician O. O. Shalimov. September 26-28, 2018 m. Kyiv. P. 17-18; Smith E.R., Shapiro G., Sarani B. The profile of wounding in civilian public mass shooting fatalities / J Trauma Acute Care Surg. 2016 Jul;81(1):86-92. doi: 10.1097/TA.0000000000001031.

The study was performed based on the materials of the clinic "Zaycev V.T. Institute of general and urgent surgery of the National Academy of Medical Sciences of Ukraine" and the surgical clinic of the Military Medical Clinical Center of the Northern Region of the Ministry of Defense of Ukraine and is based on the analysis of 30 PRM observations, and 13 (32 %) of the wounded were characterized by predominance of phlegmon of the mediastinum, and in 17 (68 %) – observation of limited suppuration of the mediastinum dominated.

The analysis of demographic parameters confirmed the results of earlier studies that men of working age are prone to gunshot injuries. The average age at mediastinal phlegmon was 20 % higher compared to observations of limited mediastinal suppuration (37.2 and 44.6 years, respectively). The vast majority of the injured were in the most working age (21–50 years): 82.8 % and 63.6 %, respectively, which also determined the importance of a deeper approach to the study of the PPM problem.

A number of patterns of prevalence, localization and clinical course of the purulent process depending on the nature of breast damage have also been established. Abscesses were more often localized in the anterior mediastinum (33.3 %), while in case of phlegmon, tissue of the posterior mediastinum was more often involved or a total lesion of the mediastinum was observed (64.7 %).

The level of lethality depended on the nature and type of PWS, while the maximum lethality (35.1 %) was observed with phlegmon of the posterior mediastinum or with a total lesion of the mediastinum, and the minimum – with abscesses of the anterior mediastinum (5.5 %).

Lethality with widespread suppuration was significantly higher by 10 times in comparison with the limited nature of the purulent process – 1.8 times. The mean age of those who died was significantly higher than that of those who survived, both in posterior mediastinal phlegmon or total mediastinal involvement, and in anterior mediastinal abscesses (20 % and 10 % of cases, respectively).

Wounded with PPM in the vast majority of observations died in the acute period of suppuration, on average, on the 13th day against the background of anterior mediastinal abscesses and on the 32nd day – after the development of posterior mediastinal phlegmon or with total damage to the mediastinum.

At the same time, the frequency of sepsis among the dead was 4.7 times higher with anterior mediastinal abscesses and 3.9 times higher with the development of posterior mediastinal phlegmon or with total damage to the mediastinum, which

once again confirms the importance of purulent-inflammatory complications in thanatogenesis in PPM.

Thus, the work considered 30 cases of posttraumatic purulent mediastinitis, and 13 (32 %) of the wounded were characterized by the predominance of phlegmon of the mediastinum, and in 17 (68 %) – limited suppuration of the mediastinum dominated.

The level of mortality depended on the nature and type of PPV, while the maximum mortality (35.1 %) was observed with phlegmon of the posterior mediastinum or with a total lesion of the mediastinum, and the minimum – with abscesses of the anterior mediastinum (5.5 %).

All of the above indicates the need for further in-depth study of this complex and still not fully resolved problem.

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СИНДРОМ ПОДРАЗНЕНОГО КИШЕЧНИКА: АСПЕКТИ ДІАГНОСТИКИ. РОЛЬ КАЛЬПРОТЕКТИНУ

Синдром подразненого кишечника (СПК) – хронічні та/або рецидивуючі функціональні розлади дистальних відділів кишечника тривалістю не менше 12 тижнів протягом останніх 12 місяців. Основні скарги пацієнтів при СПК: діарея, закреп, біль у животі, здуття живота і метеоризм, а також психологічні та соціальні чинники також відіграють ключову роль у прийнятті рішення стосовно медичного консультування.