



REMAINING INFLAMMATORY KIDNEY DISEASE - CREATIONS OF THE CLINICAL PICTURE

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Abstract

Pyelonephritis in woman is the most communal kidney sickness in all age groups. A higher occurrence of pyelonephritis in girls and woman is owing to the anatomical and physiological physiognomies of the female figure. The from top to bottom incidence of long-lasting pyelonephritis, its exacerbation, difficulties in woman reproduction age touch their general prevalence, lifetime prospect and generative meaning. A polymorphic picture characterizes urinary sediment in woman with pyelonephritis. An upsurge in the equal of cretinin in the blood is renowned.

Keywords: chronic pyelonephritis, pyelocaliceal system, kidney injury, creatinine.

Introduction

The relevance of the problem. Chronic pyelonephritis (CP) is a chronic general infectious and inflammatory procedure by major then early hurt to the interstitial material, calyx-pelvic structure and kidney tubules with following connection of the glomeruli and jugs of the kidneys. Kidney damage in CP is often two-sided. The rate of chronic pyelonephritis is 15-20 cases per 100,000 population per year; the incidence between hospitalized patients is 73 cases per 100,000 patients. CP in superfluous shared in women.

Pyelonephritis positions second in incidence after acute respiratory illnesses, primary in the building of kidney pathology and immobile inclines to grow. In the USA, 2732 individuals pass away by pyelonephritis in 1980, 1126 died in Great Britain, 1786 people expired in Germany (FRG). The prevalent prevalence of urinary region infections regulates their great not only health, but also public consequence. For illustration, in the United States, urinary tract infections are more than 7 million belongings a year the motive for looking for medicinal benefit. In the identical state, pyelonephritis explanations for 100,000 hospitalizations each year.

Continuing pyelonephritis relics a vital difficult both in nephrology and in universal pathology (Kalugina I.A., Klushantseva M.S. 1993). This is unpaid chiefly to the detail that this disease is added commune among women of waged period.

Pyelonephritis in women is the most communal kidney sickness in all age collections. The higher occurrence of pyelonephritis in girls and women is due to the structural and physical features of the female build. The great incidence of chronic pyelonephritis, its exacerbation, problems in women of childbirth age touch the meters of their overall indisposition, life prospect and generative role. All this regulates the massive social import of the problem of chronic pyelonephritis in womenfolk.



The aim of this work was to examine of the structures of progress, clinical sequence and to measure the predictive importance of indicators of chronic pyelonephritis in women.

Materials and research methods.

All patients with CP distributed by oldness. Patients under 20 years old accounted for 12% (4 patients), from 21 to 30 years old - 34% (12 patients), from 31 to 40 years old - 12% (4 patients), from 41 to 50 years old - 24.0% (8 patients), over 50 years - 18.0% (6 patients).

This earnings, as our studies show, chronic pyelonephritis identified in women aged 21 to 30 years, which, in our assessment, is associated with the incidence of a large amount of reasons of this disease at this age.

The strategy of the revision of the patients involved the explanation of complaints, the assortment of data from the anamnesis of life, disease, examination of patients, blood and urine checks, functional and instrumental investigation of the kidneys. After illuminating complaints, indications such as rise (up to 40 ° C) in physique fever, chills, general disorder, and thirst were taken into account.

The signs of pyelonephritis were independent or two-pronged pain in the lumbar area, forced by palpation, a positive symptom of Pasternatsky, tension on the side of the affected kidney - tension of the forward abdominal barrier, oliguria (due to significant fluid hurt through the lungs and covering, as well as improved catabolism) , frequent urge to urinate. Headache, nausea, vomiting were indicators of rapidly growing intoxication, arterial hypertension is a frequent symptom of chronic pyelonephritis, especially bilateral.

The incidence of clinical forms of CP was calculated, it was shown that the regular form is analyzed in 56.0%, anemic - in 15.0%, hypertensive - in 15.0% and septic - in 9.0% of patients. The frequent and anemic form is documented in all age groups, the hypertensive form is more frequently in patients aged 40-50 years, the septic form is above 50 years old.

It was revealed that with CP in 47.0% of patients there is an growth in the equal of cretinin in the blood (on average 166.0 ± 10.5 mmol/l). In septic and hypertensive forms of pyelonephritis was observed increasing of creatinine of a high and medium degree, and a moderate gradation of increase was experimental in a recurrent form of the disease. Ultrasound in 58.8% of patients expressions an increase in the size of the kidneys, in 32.3% - signs of "wrinkling of the kidneys" and distortion of the calyx-pelvic scheme. Wrinkling of the kidneys is most often detected in hypertensive and anemic forms of pathology.

A polymorphic picture describes urinary deposit in females with pyelonephritis. Leukocyturia, pyuria and bacteruria are most classic for septic and recurrent, lone casts and altered erythrocytes, oxalate and phosphoric acid salts in urine - anemic and hypertensive form of the disease. Poor living situations - lack of natural gas, insufficient condition and location of the toilet and bath (76.0%), lack of information of personal cleanness, lavatory (71.0%) are reasons causative to the development and worsening of CP.

It was shown that long-lasting endometritis, undergone certain operations on the uterus and its additions: puffing the fallopian tubes, eliminating ovarian cystomas and amputation of the uterus are factors of CP disease. Of the ailments of the urinary region, pyelonephritis in women is more often promoted by chronic cystitis (70.6%). Obstetric and pregnancy issues - termination of pregnancy by miscarriages, abortions, antenatal fetal death, play an important role in the development of CP in women.



FINISHES

1. By stage, the recurrent and anemic form is chronicled in wholly phase collections and ripens more often in the initial periods of the disease, the hypertensive form - more often in patients aged 41-50 years, the septic form - over 51 years; hypertensive and septic forms develop with a disease duration of more than 5 years.
2. Urinary sediment in women with pyelonephritis characterized by a polymorphic print. Proteinuria is most characteristic of anemic, hypertensive and septic form of the disease. Leukocyturia, pyuria and bacteruria are most typical in septic and recurrent, single casts and altered erythrocytes, oxalate and phosphoric acid salts in urine - anemic and hypertensive form of the disease
3. With CP, 47.0% of patients have an increase in the level of creatinine in the blood (on average, 166.0 ± 10.5 mmol / l). An increase in creatinine of a high and medium degree observed with septic and hypertensive and a moderate degree of increase is observed in a recurrent form of the disease.
4. Poor living conditions, improper hygiene of the genitals and a burdened obstetric and gynecological history are factors contributing to the development and severity of CP.

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