
CERVICAL PATHOLOGY IN WOMEN INFECTED WITH ONCOGENIC TYPES OF HUMAN PAPILLOMAVIRUS

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Objective: We determined frequency and nature of cervical pathology in women infected with oncogenic types of Human Papillomavirus (OT HPV).

Methods: 350 women with cervical pathology and 50 women without it were investigated. OT HPV were detected by means of Hybrid Capture 2 and PCR. All women underwent colposcopic and oncocytologic examination.

Results: 27,7% of women with cervical pathology and only 5,4% of women without it were infected with OT HPV. In women infected with OT HPV in 23 cases we revealed primarily cervical displasia (among them in 11 cases – mild, in 6 – moderate, in 3 – severe displasia, in 3 – carcinoma in situ). Quantitative detection of HPV demonstrated correlation between HPV viral load and frequency and severity of displasia: when viral load was less than 100 DNA copies/mkl in investigated sample no displasia was revealed (in 80% of cases) or mild displasia (20%). In viral load 100-750 DNA copies/mkl no displasia was revealed in 20%, mild displasia – in 40% and moderate displasia in 40% of cases. When viral load was more than 750 DNA copies/mkl no displasia was revealed in 10%, mild – 40%, moderate – in 30%, severe displasia or carcinoma in situ – in 40% of cases.

Resume: All women with cervical pathology should be investigated for the detection of OT HPV. Viral load detection can be an additional criterium for patients screening who are required corresponding diagnostic and treating procedures.

EARLY DIAGNOSIS AND STAGE-RELATED THERAPY AS MAJOR FACTORS FOR PREVENTING DISABILITY IN CHILDREN WITH PERINATAL CEREBRAL PATHOLOGY

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The study was carried out on the basis of St. Olga CPH. The aim of the study was to establish methods of early diagnosis of cardinal CNS function disorders in children during their first three years and to estimate the approaches to stage-related therapy of children with cerebral palsy.

Strictly determined set of partial components of psychic function was qualitatively and quantitatively evaluated in accordance with the classification of prespeech development delay. For one year old babies: visual, hearing and vocal function, emotions, visual and motor coordination, prerequisites for expressive speech (reflected and spontaneous babbling, non-differentiated chattering) and expressive speech (differentiated chattering, words), prerequisites for impressive speech and impressive speech, and reflexes of oral automatism, persistent synkineses preventing the development of speech stereotypes. For two-three year old children: visual, hearing and vocal function, emotions, visual and motor coordination, visual and spatial ideas, expressive speech, impressive speech, game activity. The quality of motor development was estimated correspondingly to righting and statotonic reaction (chain symmetric righting reflex).

By the first year of life (n=150) — 10.7% of children with early stage of cerebral palsy demonstrated the I-II degree delay of prespeech development, 89.3% — the III-IV degree delay of prespeech development.

Among 213 children, who were diagnosed cerebral palsy by the 6-7 month and got comprehensive complex therapy, follow up (4-7 years) revealed contractures (7.1%) in the joints of upper and lower extremities (predominately functional), 84 children, in whom cerebral palsy was diagnosed after the first year of life contractures were demonstrated in 41.6 % of cases (predominately rigid), and 125 children who did not get systematic therapy demonstrated multiple contractures (predominately rigid) in 50.5% of cases after the first course of treatment.

So, if pre- and postnatal maturing of brain structures controlling the development of motor, psychic and speech functions is stage-related, then therapy if undertaken within appropriate period can facilitate their normal evolution.