THE WAYS OF TRANSFORMATION OF BRONCHOPULMONARY DYSPLAZIA IN CHILDREN

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SUMMARY

In the article represents modern data about the ways of evolution of bronchopulmonary dysplasia – heavy pathology in prematurely born new-born children, being on the prolonged artificial lung ventilation and dependent of high content of oxygen in expirated air. It's frequency consists 20 % from the number of all children exposed to artificial lung ventilation, and depends on body mass at birth and gestational age. Lethality on the first year of life consists 23-36 %, and 4 % of survived children become invalid in future. As to the pathogenesis bronchopulmonary dysplasia is close to the respiratory distress-syndrome in adults and bronchial asthma. A clinical picture is represented by chronic respiratory insufficiency in connection with permanent bronchoobstruction, conditioned by hyperreactivity and chronic inflammation in bronchial tubes, that requires applications of corticosteroids, both the systemic and inhalative. Complications of bronchopulmonary are atelectasis, pneumothorax, cardial insufficiency, pulmonary infections, relapse of obstructive bronchitis and bronchial asthma, delay of growth and gap in physical and neuro-psychical development. Children with bronchopulmonary are included in high risk group in forming of chronic obstructive lung diseases, first of all, bronchial asthma in adults.