

ROLE OF INFUSION THERAPY IN OPTIMIZATION INTENSIVE CARE OF PATIENTS WITH SEVERE LEPTOSPIROSIS

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Summary. Lack of effective methods of intensive therapy in patients with leptospirosis due to their application without regard to the pathogenetic factors of acute renal failure. The purpose of the study — the optimization of intensive therapy of severe forms of leptospirosis by incorporating the complex pathogenesis-based pre-emptive infusion therapy. Material and methods. A total of 49 patients with ikterogemorragical form of leptospirosis, predominantly male, aged 20 to 39 years observed. 32 patients (study group) in the complex of intensive therapy used pathogenesis-based preemptive infusion therapy. The control group consisted of 17 patients who did not receive pathogenesis-based preemptive infusion therapy. Results and discussion. In patients with severe leptospirosis significantly suffering blood circulation, kidney damage with leptospirosis was of complex nature due to the different combination of prerenal and renal factors. The effectiveness of preemptive pathogenetically based infusion therapy in patients

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with severe leptospirosis is caused by the multilateral system effects (hemodynamic, anti-inflammatory, detoxifying, immune modulating, hemorheological). Carrying out pathogenesis-based preemptive infusion therapy in patients with severe leptospirosis allowed recompensing violation of hemodynamic, improve blood flow to the liver and kidneys, prevent the development of anuria. The patients recovered diuresis, there was a trend to decrease nitrogenous wastes, reduced mortality.