

PNEUMOCYSTOSIS AS HOSPITAL-ACQUIRED INFECTION AND MEASURES FOR ITS PREVENTION

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Summary

The extensive parameter of a pneumocystosis for HIV-positive patients was 62 ± 3 %, intensive — 205 ± 15 cysts of *P. carinii* in 1 ml of a sputum; for the HIV-negative patients with nonspecific diseases of lungs — 54 ± 2 % and 175 ± 20 cysts in 1 ml, respectively; in medical personnel of AIDS and pulmonology department — 100 % and 165 ± 30 , respectively. In cough aerosol from 11 patients with a pneumocystosis 2 (18 %) were *P. carinii* DNA positive (using a method of polymerase chain reaction). In AIDS and pulmonology departments intrahospital spread of *P. carinii* infection is possible by an air. The complex of preventive measures includes: detection of *P. carinii* infection in groups of risk, isolation and treatment of infected subjects, strict use of individual protection facilities by personnel; use of ventilation equipment; antirelapse courses of chemotherapy of a pneumocystosis in immunocompromised patients.