

THE MAIN ASPECTS OF DIAGNOSTIC OF FUNCTIONAL DYSPESIA AND SYNDROME OF DYSPESIA IN CHILDREN
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Background and aims:

The important question of child's gastroenterology is timely diagnostics of functional diseases of digestive tract, which appear the symptoms of dyspepsia. It is predefined large prevalence of dyspepsia violations among adults children - from 20 to 50%. Improvement of diagnostics of dyspepsia for children on the basis of complex estimation of clinic-laboratory and instrumental indexes for differentiation of functional dyspepsia (FD) and SD.

Methods:

Clinical - laboratory analyses, morphological, instrumental and ultrasonic research of motor-evacuatory function of the stomach by Lemeshko Z.A. Posters 388 Results: We are conduct research 125 patients with symptoms dyspepsia. There were 50 patients with FD, 75 patients with the SD. FD is characterized advantage of slow motility of stomach ($58,00 \pm 6,98\%$) which correlated with clinical displays, as discomfort in the overhead, early satiation and postprandial syndrome in $26,00 \pm 6,2\%$ children State of acid function of stomach - normoaciditas prevails with advantage at mixed ($66,60 \pm 8,6\%$) and postprandial syndrome ($84,60 \pm 10,42\%$) of FD by the SD and characterized reliable predominance of hiperaciditas and hipoaciditas states.

Conclusions:

An motility function at the children with FD is characterized the slow period of evacuation of stomach, wich correlates with discomfort, early satiation and postprandial syndrome. At FD normoaciditas prevails with advantage at mixed and postprandial. The SD characterized reliable predominance of hiperaciditas and hipoaciditas states. Skringing of laboratory instrumental researches identificate importance of morphological criteria: moderate limphaplasmatarna infiltration ($52 \pm 7,07\%$) and normal histological picture ($48 \pm 7,07\%$) at FD and limphaplasmatarna infiltration ($83,87 \pm 6,6\%$) and intestinal metaplasia ($9,68 \pm 5,3\%$) was identificate at the SD.