holding of antibiotic therapy, was observed in 5 patients GS (40%), 3 (15%) of them during the first week of treatment refused further antibiotics. In the study of feces in the initial period is quite pronounced changes in the ratio of representatives of the intestinal microflora were revealed in most patients in both groups in the first place was a marked decrease in bifidobacteria and lactobacilli. After a course of antibiotikoterapii the patients, a significant increase in the number of bifidobacteria and lactobacilli and a significant decrease in the number of pathogenic and conditionally pathogenic bacteria. In the GS drew the attention of the inhibition of microbial growth of representatives of the normal intestinal microflora and an increase in the degree of intestinal dysbiosis.

CONCLUSIONS. Thus, the obtained data confirm the negative effect of standard antibiotic therapy of acne on the microbial composition of the intestines. The inclusion of prebiotics in the traditional method

of acne treatment, allows to obtain a more pronounced therapeutic effect compared with using only the standard dermatological treatment regimens and achieve more severe patients adherence to treatment.

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OSTEOPATHIC CORRECTION AS A METHOD OF PREVENTION OF GALLSTONE DISEASE

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THE AIM OF THE STUDY to study the effect of osteopathic influence on biomechanical and neural disorders and the functional state of the gallbladder in patients.

MATERIALS AND METHODS. Under observation, there were 68 patients with anomalies of the gallbladder and violation of colloidal stability of bile with prospective follow-up from 3 months to 12 months. The study group included 48 patients who underwent osteopathic diagnosis and treatment with frequency of

5–7 sessions. The comparison group consisted of 20 patients treated with the drugs ursodeoxycholic acid for 3 months. Ultrasonographic study was conducted on apparatus "Sonoline Prima LC" firm "Siemens" (Germany), working in real time, using sector and linear transducers 3.5 MHz and 7.5 MHz according to standard methods with the assessment of the size, shape, structure of gall bladder and liver before and after a course of osteopathic influence and homogeneity of bile.

The algorithm of osteopathic diagnosis. Osteopathic diagnosis includes the following tests: fascial listening (global, local), the definition of cranio — sacred synchronicity, the definition of mobility at the level of the cervical, thoracic, lumbar spine, sacrum, the definition of mobility of the thoracic and pelvic diaphragms, the definition of mobility and mailnote of the liver, gallbladder, stomach, duodenum, small intestine and colon, determining whether a voltage and/or pain at the level of the sphincter of Oddi, pyloric stomach, duodeno-analnogo sphincter, ileocecal valve, in the region of the gallbladder, in the course of the common bile duct.

The algorithm of osteopathic impact. In the treatment of patients with padkamenne stage with

cholelithiasis were used techniques of osteopathic correction: soft tissue, fascial, articulatory, visceral, cranial.

Almost all patients of the study group was performed to restore mobility at the level C0/C1, the thoracic diaphragm, correction of dysfunctions of the liver and biliary tract, mobilization of equipment in the small intestine.

RESULTS The study found that all patients revealed functional abnormalities (somatic dysfunction) the global and regional level, including biomechanical, neural and psihofiziologic violations. Regional functional abnormalities manifested on the biomechanical level of the neck, thoracic and lumbar somatic and visceral disorders. At the background of osteopathic correction of dysfunctions were eliminated after a single and after a course of treatments. The results of ultrasound of the gall bladder in patients of the main group the size of the gallbladder accounted for a length of 7.5±1.6 cm, width of 3.3±0.8 cm, with the excesses of the body and neck of gallbladder, with honetmoon bile in the gallbladder different densities displace clots, not giving acoustic shadow. Patients in the comparison group, the size of the gallbladder was made along the length of 7.8 ± 1.7 cm, width is 3.2 ± 0.9 cm with the excesses of the body and neck of gallbladder, biliary suspension. At the background of osteopathic correction in patients with biliary sludge are available, the size of the gallbladder decreased compared to the

initial length to 4.0 ± 1.7 cm and width of 1.5 ± 0.5 cm, the coefficient of discharge was more than 50%, indicating that the increase in contractility of the gall bladder and the effectiveness of treatments. Patients in the comparison group on the background of urotherapy was noted positive dynamics of clinical symptoms and disappearance of biliary sludge, gallbladder had a length of 7.9±1.8 cm and width of 3.4±0.9 cm Ratio emptying of the gallbladder after administration of choleretic Breakfast was less than 45%, indicating hypomotor function of the gallbladder. It follows that ursotherapy effective in biliary sludge, and has no effect on the contractile function of the gallbladder. Thus, integration of the osteopathic treatment in traditional allopathic system for the treatment of biliary disorders contributes to the normalization of the contractility and tone of the gall bladder that can form the basis of prevention of gallstones.

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THE EFFECTS OF REGENERATIVE THERAPY IN PATIENTS WITH CHRONIC HEPATITIS

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To date, the treatment of chronic hepatitis is actual issue of gastroenterology. Despite the development and use of modern medications, the question of progression of fibrosis and development of cirrhosis of the liver, is very serious.

We surveyed 100 patients NAFLD and autoimmune hepatitis. Patients were randomized in two groups. The control group received standard treatment, including drugs ademetionina at a dose of 400 mg/day, patients with autoimmune hepatitis continued immunosuppressive therapy with prednisolone at a dose of 30 mg/day. The study group in addition to basic therapy was carried out introduction the mononuclear fraction of umbilical cord blood from a rate of 1 million Cells per 1 kg of body weight. The follow-up was 12 months. To assess indicators of the effectiveness