

## Consequences of Diseases Caused by Airborne Infections

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**Abstract.** *The problems of epidemiology and immunization among the population and military personnel of airborne “children” (measles, mumps, rubella and etc.) and other common infections (influenza, meningococcal and streptococcal infections, acute respiratory diseases and pneumonia). Ways to improve calendars of preventive vaccinations for military personnel, including for epidemic indications, were discussed. as well as the need to immunize risk groups against influenza, meningococcal, pneumococcal, adenoviral infections and chickenpox, and in the future - against other current airborne infections, including "children's". Risk of disease from airborne droplets the route of transmission of infection will increase in the case of close contact, but not everyone gets sick, and the diseases progress differently. This is determined primarily by the state of human immunoresistance to pathogens circulating in communities autonomously or introduced from outside. Among of the mentioned categories of the population is always available a significant proportion of individuals with a deficiency of immunoresistance, manifested by a predisposition to frequent diseases of VCI, which is genotypically and/or phenotypically determined. This share depends on the number of groups, the age of people and the conditions of their life and activities. Typically, the autumn-winter-spring wave of VCI incidence is the main one, the summer wave is less intense, but in military training centers the latter is also very impressive: it is reflected in the large number of teams and the renewed composition. Sometimes an increase in incidence of different etiologies occurs almost simultaneously, but more often first - ARI, then tonsillitis, and later - by other VKIs.*

**Keywords:** *groups of military personnel, airborne infections, streptococcal infections, Rubella, Community-acquired pneumonia, immunoresistance.*

Community-acquired pneumonia (CAP) is a pressing problem in world medicine. We are talking about acute pneumonia, which is caused by the same pathogens, the same as ARI. In Russia, up to 400 thousand cases are registered annually in adults alone. Children and the elderly are at risk unfavorable outcomes of the disease. The range of pathogens is very wide: influenza viruses, adenoviruses, RS virus, coronaviruses, and bacterial agents - streptococci, Haemophilus influenzae, staphylococci, etc. Etiologically deciphered About a third of pneumonias, of which in recent years almost half are caused by streptococci, the latter being dominated by pneumococci. In organized teams, VPs usually arise against the backdrop of seasonal increases in the incidence of ARI and bronchitis. Vaccines against streptococcal infections of serogroups A and B are only being developed, however in addition to etiotropic treatments (penicillins, cephalosporins, etc.), giving not only clinical, but also anti-epidemic effect, there are means of emergency prevention of sore throats and their complications for military personnel at risk. For pre-season health improvement for people prone to frequent sore throats and exacerbations of chronic ENT diseases, a stimulator of local nonspecific immunoresistance is used.

Rubella has long been considered an uncontrollable infection because it was unjustifiably regarded as a mild illness. Every year she like measles and mumps in the pre-vaccination period, caused hundreds of thousands of diseases. The persistence of the rubella virus in the body is especially dangerous for expectant mothers - fetal pathology (congenital syndrome). rubella). Therefore, to prevent these

situations, vaccination of individuals is first necessary. females during puberty and prenatal periods.

As for whooping cough, it should be noted that it's far from a harmless infection. Its consequences manifest themselves in the predisposition of young people to diseases of influenza, acute respiratory infections, bronchitis and pneumonia, complications from them, and in total they lead to the formation of chronic obstructive pulmonary disease. There is evidence that adults suffer from whooping cough infection (sometimes repeatedly), and it is not always mild even among vaccinated people.

One of the most relevant is meningococcal infection (MI), it is also potentially controlled by means of immunoprophylaxis, but the creation and use of effective vaccines is still complicated by the heterogeneity of meningococci circulating in regions and communities. In this case, it is often not possible to identify the serogroup of the causative agent of MI. Particular danger for The younger generation is represented by its generalized forms (GF) - meningitis, encephalitis, sepsis and their combinations, followed by disability and even death after the disease.

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