

Feature of the allergic component in chronic otitis media

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Abstract. *Chronic inflammation of the middle ear, despite significant progress in prevention, diagnosis and treatment, remains one of the most common and dangerous diseases. This is due to many medical and social reasons, as well as to such unfavorable consequences as hearing loss and the risk of intracranial complications caused by exacerbations of the chronic process in the middle ear. Research in this area, based on microbiological, morphological and functional aspects of the mucosa, has improved knowledge in the physiology and pathophysiology of otitis media.*

Key words: *morphological and functional aspects, inflammatory, and if the significant.*

Relevance.

Chronic inflammation of the middle ear, despite significant progress in prevention, diagnosis and treatment, remains one of the most common and dangerous diseases. This is due to many medical and social reasons, as well as to such unfavorable consequences as hearing loss and the risk of intracranial complications caused by exacerbations of the chronic process in the middle ear. Research in this area, based on microbiological, morphological and functional aspects of the mucosa, has improved knowledge in the physiology and pathophysiology of otitis media.

Purpose of the work

To give a comprehensive characterization of the inflammatory process in chronic otitis media with a list of parameters related to the development of the allergic component of inflammatory infiltrates, regardless of the nature of the exudate.

The mean age of patients in groups I and II was 21.8 ± 9.2 and 32.4 ± 12.4 years, respectively, and the sex distribution (m/w) was 15/17 in the CCA group and 20/24 in the CSF group. Pathologically, the picture of the inflammatory process in acute and chronic otitis media generally consisted of similar components, differing mainly in varying degrees of their severity. To obtain quantitative characteristics, a histomorphometric study was performed. The data presented in Table 1 generally reflect the regularities of the development of acute and chronic inflammatory processes. This is evident from the indicators that characterize its acuity (hemorrhages in the stromal tissue, dystrophic, necrobiotic and necrotic changes in connective tissue fibers). This also includes the area of inflammatory infiltrates. They significantly prevailed in group I. In turn, the processes reflecting chronic inflammation (fibrotic, sclerotic changes, petrification) were higher in group II. Nevertheless, a number of results are of particular interest. In particular, the area of edema. Due to the fact that edema, along with pain, redness, local fever and impaired function, is included in the pentad of local signs of inflammation, it would be logical to expect that they will be more pronounced in the acute process. However, despite the fact that the edema index was higher in group I, it was not

significantly higher. That is, in chronic purulent otitis media, it played no less a role than the syndrome. For the purpose of this study выраженный, pronounced edema can already be attributed to indirect signs of an allergic nature, which implies the presence of other signs, which will be discussed below.

And if the significant predominance of the number of small capillary vessels in group II is explained, then the alignment of the total area of small capillary vessels between groups, which manifests itself in the absence of confidence, needs to be explained. The fact is that in the morphometric study, all small capillary vessels were taken into account, including peripherally dilated ones, the number of which clearly prevailed in group I. In any case, in both groups, these indicators indicating clear (neo)angiogenesis in стромальной the stromal tissue, along with the above signs, allow us to suspect the presence of an allergic component in inflammatory processes. Based on these data and in order to be able to comprehensively assess the nature of the inflammatory process, including with tyrol, which plays an allergic component in it, the cellular composition of inflammatory infiltrates was analyzed. Клеточный The cellular composition of inflammatory infiltrates in general also reflects its correspondence to the picture of acute and chronic otitis media.

In contrast при ХСО достоверно преобладали показатели по , histiocytes, macrophages, and giant resorption cells significantly prevailed in CSR. However, as in the first table, individual data needs special attention. A significant predominance of T-lymphocytes in the chronic process is expected. While in CCA, B-lymphocytes (plasmocytes) play a more significant role than in chronic. The results of the study show также, that the number of neutrophils also prevails in relation to the total number of T - and B-lymphocytes, especially with a special 7.5 paper day. In CSF, the predominance of neutrophils over lymphocytes was 2-fold higher.

However, in this case, this indicates a local decrease in immunity (respectively, a deficiency in the components of cellular and humoral immunity). Even more interesting is the significant difference in eosinophil counts between groups, which is due to their predominance in group II. On the one hand, it was expected that in acute inflammatory process their number will be higher.

The results of the study show that in chronic otitis media одним из аллергический компо, the allergic component plays a significant role in the pathogenesis of the inflammatory process. An important factor in ET is the anatomical and physiological relationship of the tissue structures of the middle ear with the Eustachian tube and nasopharynx. This fact should be taken into account when designing tactics for the treatment of chronic otitis media, an important element of which could be the use of drugs not only with anti-inflammatory and иммуносупpressive, but also anti-allergic properties, especially prolonged action, as well as herbal preparations with similar properties.

literature

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