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SEASONAL INFLUENZA OUTBREAK AFTER COVID-19 PANDEMIC IN KYIV, UKRAINE

Background. The emergence of a new virus back in 2019, which is now known as SARS-CoV-2, had a great impact on the regular seasonal cycles of many infectious diseases globally including influenza. From the start of the pandemic, we've seen fewer and fewer cases of influenza till it started to resurge in late 2021. In early 2024 influenza came back to the Nothern Hemisphere like a seasonal outbreak.

Methods. We would like to present data on the re-emergence of influenza cases in Kyiv (Ukraine) providing a comparison analysis of the number of cases of influenza and COVID-19 among patients who were hospitalized at the Infectious Diseases Unit of Oleksandrivska clinical hospital in Kyiv during the period from October 2023 to February 2024. All cases of COVID-19 and influenza were laboratory-confirmed by rapid testing and PCR tests.

Results. The initial rise in influenza cases we observed in October 2023 when the first two patients were hospitalized in the infectious disease's unit of Oleksandrivska Clinical Hospital. By January 2024 we had 148 patients with confirmed influenza either by results of rapid testing or PCR compared to just 104 cases of COVID-19. The total number of influenza cases was 163 (Type A — 152, type B — 11), compared to 543 cases of COVID-19. There were documented 7 patients with influenza and COVID-19 coinfection, 1 patient with influenza and erysipelas, and 1 patient with influenza and falciparum malaria. Similar to patients with COVID-19, patients with influenza had severe comorbidities most of which decompensated. Influenza hospital lethality during the mentioned period according to our data was 6.7% (10 patients) while COVID-19 lethality was 5.9% (32 patients), p>0.05.

Conclusions. We observed the re-emergence of influenza cases in Kyiv, Ukraine after a prolonged absence of virus circulation. This seasonal rise was characterized by a great number of severe cases mostly due to comorbidities of our patients with slightly higher hospital lethality from influenza compared to COVID-19 (the difference was not relevant statistically).

Резюме. У роботі представлена частота та структура захворюваності на грип в постпандемічний період в порівнянні з COVID-19 в період жовтень 2023— січень 2024 р. на клінічній базі кафедри

інфекційних хвороб НМУ імені О.О. Богомольця — інфекційному відділенні Олександрівської клінічної лікарні м. Києва. Встановлено повторну появу випадків грипу після тривалої відсутності циркуляції вірусу. Цей сезонний підйом характеризувався значною кількістю тяжких випадків здебільшого через супутні захворювання пацієнтів із дещо вищою лікарняною летальністю від грипу порівняно з СОVID-19.

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NEUROLOGICAL STATUS IN HIV INFECTION

Topicality. The symptoms of the nervous system damage are manifested in different ways in different cases: the predominant involvement of the brain substance in the process; spinal cord; shell; peripheral nervous system. However, the frequency of such damage among HIV-infected patients is very high. In today's conditions, all HIV-related lesions of the CNS are united under the general name «HIV-associated neurocognitive disorders (HAND)».

The purpose of the study is to establish the frequency and features

of neurological disorders in patients with HIV infection.

Materials and methods. 116 HIV-infected persons took part in the study. A standard analysis of complaints, anamnesis study, neurological status was studied, instrumental examination methods were evaluated. The control group consisted of 39 practically healthy volunteers, the average age of which was (33.8±5.5) years, of which 23 (59.0%) were men and 16 (41.0%) were women. The control group, completely comparable in terms of age and gender to the study group, was selected after conducting a special questionnaire, which took into account clinical examination data, as well as information from outpatient charts and anamnesis results, according to the WHO criteria.

Results and discussion. When examining the neurological status, minimal focal neurological symptoms were revealed in the form of symptoms of oral automatism and vestibular-atactic disorders (instability in the Romberg pose, inaccuracy when performing coordination tests)—compared to the control group, the difference in all the specified neuro-

logical symptoms was statistically significant.

All HIV-infected patients with the neurological symptoms indicated in the table had no organic diseases in their anamnesis, that is, the cause