

HB10: IMMUNE STATUS OF CHILDREN WITH EXTRAHEPATIC PORTAL HYPERTENSION AFTER DIFFERENT TYPES OF PORTOSYSTEMIC BYPASS OPERATIONS

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AIM

The paper is focused on the features and grade of changes in the immune system of children under the extrahepatic portal hypertension (EPH) after splenorenal and mesocaval shunting operations.

METHODS

The study included 100 children with EPH who were divided into two groups depending on type of portosystemic bypass operation, in whom the cell, humoral and unspecific parameters of immune system were evaluated in three and six months after surgical intervention. The leading pathological factors were defined.

MAIN RESULTS

It was established that there is significant increase in rates of IgM, Ig A and phagocytosis ($p < 0,05$), secondary cell immune deficiency with decreasing of absolute number of lymphocytes to $(1.18 \pm 0.6) 10^9/l$ and their subpopulations (CD3+, CD4+, CD8+) ($p < 0,001$) comparing to normal age values. The values of spontaneous NST-test before the surgery were elevated ($55.05\% \pm 5.03$), with the normal value at 10%. The evaluation of immunograms in the dynamics after two types of operations showed the following positive changes: increasing of absolute and relative number of T-lymphocytes, normalization of the level of immunoregulatory index. However the high rates of IgM, IgA and increased activity of the NST test were persistent. Other parameters of immunogram were not significantly different from the normal age value.

CONCLUSIONS

Portosystemic shunting operations improve the parameters of immunograms in patients with EPH, however in the regard of the persistence of pathological changes the pharmacological therapy after bypass surgery can be proposed. Thus the further basic studies to investigate the pathogenesis of these changes should be performed.