

OTOMYCOSIS DISEASE AND ITS ETIOTROPIC TREATMENT METHODS

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Abstract. *This article provides sufficient information about otomycosis and unietiotropic treatment methods, disease history, development, negative consequences, and treatment methods.*

Keywords: *etiology, otomycosis, algaezontistrikers (Galalzontin, Naphtimiin, Sanorin), Surginect Scale, aspirin, paracetamol, triolol, melbek-fororte.*

INTRODUCTION

Infectious human diseases caused by fungi are collectively called “mycoses.” The etiology, pathogenesis and clinical manifestations of mycoses are extremely diverse [1]. Civilization became familiar with fungal infections—mycoses—in ancient times. Thrush was described by Hippocrates and Galen in ancient times. The first observations of individual cases of fungal infection of the skin of the external auditory canal were noted in the middle of the 19th century, and the first case was described in the literature by N.V. Mauer in 1844. Soon there were reports of clinical observations of otomycosis by other researchers (Pacini, 1851; Cramer A, 1859; Bezold F., 1870). In all observations, the causative agents of otomycosis were fungi of the genus *Aspergillus*, and it was a mycotic lesion of the external auditory canal. A more complete description of this disease is given in the work of R. R. Vreden (1867). He named the mycotic ear disease “*Aspergillus myringomycosis*.” The first report of fungal infection of the postoperative cavity of the middle ear belongs to Cavadas (1930). Postoperative mucorosis of the ear was described by Lev N. A. (1966). This author has the most complete description of fungal infection of the postoperative cavity of the middle ear. In recent years, there have been reports in the literature that after sanitizing and hearing-improving operations, patients experience persistent suppuration from the ear, poor healing of the postoperative cavity, and wetting of the plastic flap, caused by various types of mold and yeast-like fungi. At the turn of the 19th and 20th centuries, almost all the main human mycoses and their causative agents were described. According to the World Health Organization, by 1995, 20% of the world's population suffered from mycoses of various localizations, and by the beginning of the 21st century, this figure, according to some data, doubled.

Otomycosis (fungal otitis, otitis of fungal etiology) - most often these names mean an inflammatory disease of the skin of the external auditory canal, caused by various types of parasitic fungi. Also in the practice of an ENT doctor, there are fungal diseases of the eardrum itself, the middle ear and the postoperative ear cavity, but the most common is fungal infection of the outer ear.

The most common diseases of the respiratory tracts are among the most common diseases of the respiratory tracts, the most common diseases - at an average of 75% of the population. The problem of adequate diagnostics of these diseases, rational treatment and rational prevention of various fields - from otorinolaryngologists remaining relevant to the healthwomen's health. A comprehensive approach to its solving remains one of the most important sectors of knowledge - from molecular biology to hygiene and sanitation.

Filving of the middle ear is a very common external state of expression. The occurrence of this disease is 25-30% of the total number of earphones. According to American authors, the loss of hearing in 60% of the U.S. population occurs due to a childhood chronic medium termite.

The social side of this problem is not even important. The frequent and long-eared diseases of the middle ear helps to develop hearing ability and leads to limiting the main categories of human life: the ability to communicate and work.

In the highest reasons, the OTIT's pathogenesis may not have enough information about the microbiological factor. There are fewer information on the factors of forming microbial biocenosis of the middle ear, the stability of mechanisms and pathogens of the middle ear, which does not allow early diagnosis of the media, effective therapy.

Current treatment of patients with chronic orchards can now be allocated three main areas: conservative treatment using various drugs; surgery, including microsurgical intervention; Physiotherapy.

In recent years, many complex methods have been developed to treat Szoo. However, this problem has taken to reconsider traditional conservative methods due to the search for the inefficiency and treatment of otorinaringologists. One of these methods is used different types of physical energy: magnetic, laser, electromagnetic and others. The most effective of them is a laser therapy (lt) used in inflammatory diseases of the ENT members.

The assignment of antifunicide (AF) is a very urgent problem that depends on a number of unusual interest for the practice.

In recent decades, the effectiveness of treatment of patients with inflammatory diseases of the upper respiratory diseases is not always satisfied with the patient and doctor of patients with inflammatory diseases of high respiratory diseases.

Many medicines with anti-fungi are characterized by a doctor, if it clearly indicates the nature of the drug, and if it takes into account the medicine of the drug, can only be successful use of its pharmacodynamics and side effects. The therapeutic dose of the drug knows the correct calculation of the course of treatment.

The choice of fungal diseases of the middle ear is an important task of a otorinotrichologist. The need to take into account the results of bacteriological analysis, the vitality of the medium ear, the severity, nature of the complications of the disease, liability.

One of the important factors is the method of using antimicrobial vehicle. One of the traditional methods used in our country is antibiotics parenteral. In middle ears, this method is not always justified, because in this case, treatment mode is difficult to follow the patient. In this case, post-injection complications may also occur, in turn leading to an increase in the cost of treatment. The selection of modern modern drugs that low frequency can reduce costs and make treatment more comfortable.

In the treatment of inflammatory diseases of the middle ear, including systemic use of the new generation, but also caused the microflora in drums of microflora, the decrease in the microflora in drums of the immune system as a result of the development of fungal diseases of the middle ear.

Research Methodology

We have studied the results of patients with a chronic fungi between 18 and 30 to achieve the goal of this scientific work and the implementation of chronic municular functions, 20 of which (40.3%) are men and 30 women (59.7%).

Depending on treatment methods, all patients are divided into 2 clinical groups: the first main group consisted of 27 (58.2%), which included laser therapy with Te-Textumazins and Application. The dynamics of patients, clinical symptoms, and assessment of therapeutic effects of treatment (in the analog of the patients) are the patients with the methods of disease and the maintenance of the main group of patients compared with a control group.

Patients' distribution depending on the reasons for chronic fungi are given in Table 1.

Table 1.

Current fungi medium OTIT the distribution of patients depending on the causes

The main diseases	Number of patients	
	abc	%
Orview	48	68,0
Chronic rinosinusite	18	26.3
Diabetes	2	2.7
Local and general cooling	2	2.7
Total	70	100

As we can see from Table 2, the main part of the Current Fund Medium Medium was patients with infected respiratory viral infections - 48 (68%). 18 (26.3%) Patients are recorded in chronic rhinosinusitis. The number of patients with microtrades and released cooling was equal - 2 (2.8%) patients each - each.

Table 2.

Distribution of patients by gender and age

Young	Gender								TOTAL	
	Control (N-30)				Асосий (н-42)					
	Male		Woman		Male		Woman			
	abc	%	abc	%	abc	%	abc	%	abc	%
18-22	8	61.5	11	64.7	10	62.5	18	69.2	47	65.3
22-26	3	23.1	4	23.5	4	25.1	5	19.2	16	22.2
26-30 age	1	7.7	1	5.9	1	6.2	2	7.7	беш	7.0
31 and older	1	7.7	1	5.9	1	6.2	1	3.9	4	5.5
TOTAL	13	43.3	17	56.7	16	43.8	26	56.2	72	100

According to the information provided, it is illustrated patients with the age of 30. Such youth features the complexity of surgical treatment of patients with the Current Fund Medium.

The occurrence of women among patients with the medium horseman of the Current Fun is high - 59.7%. Our information (Palchun V.T., 2022), corresponds to data (Palchun V.T., 2022), which shows an increase in the number of girls infected with the medium dotty at all.

Assessing traditional treatment in chronic fungal medium

Compared to the patient's inflammatory processes in the Currency Fun Medium (Surginet Scale) and therapeutic effects of patients (in the analog of research) and the dynecic effects of patients (in the analog of research) and the dynecic impact of patients (in the analog of research) and the dynapy effects of patients (in the analog of research) In the fight against the fight, we have implemented a traditional complex treatment scheme.

The complex therapeutic regime includes dietary No. 15, algaezontistrikers (Galalzontin, Naphtimiin, Sanorin) is prescribed. The fight against infection was leading. For this purpose, large spectrum antiquities (nystatin, clotimalaimazol, etc.), used in conjunction with immunostalin

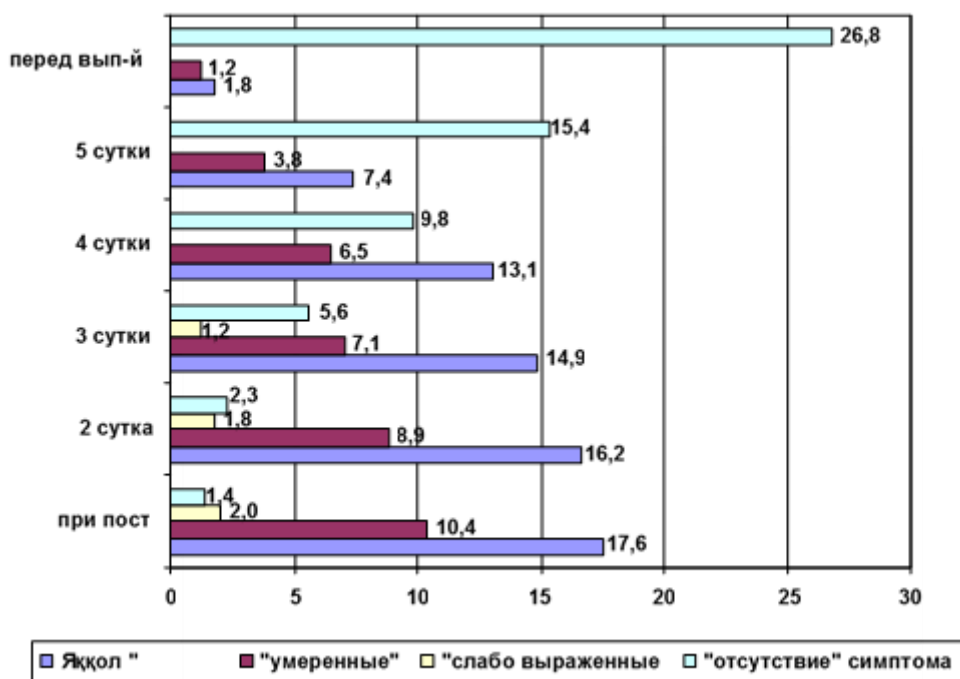
therapy (immunomodulin). Analgesic and antipyretics (aspirin, paracetamol, triolol, melbek-fororte). Antiegestamins (DiphenGidamin, Tusaghlil, Suprastin) 1-2 times a day. Emitolics and secretions are washed with a solution of external ear furatyline 1: 5000 times a day (UHF and physiotherapy 1 time, 5-8 procedures per day). The vitamins B and ascorbic acid was used to improve the metabolic processes.

The dynamics of clinical manifestations of the Current Fore Medium Medium Characteristics is of great interest to patients. When accepted in the 17.6 ± 4.2 (58.6%) patients in the control group, in 10.4 ± 34.4 (34.6%), on the $10.4 \pm 34.4\%$ (34.6%) was observed . patients. Ear pain is observed in almost all patients. Most patients complain about losing hearing ability. In patients 16.4 life, 7.8 ± 3.6 (26%) of this sign, on the patients 7.8 ± 2.6 (26%), this mark was reflected in the "moderately". During 51.3% and 45.0% in the control group, the delicacy of the "hard" headache and a masher is recorded during a palpation. When accepted, 12.7 ± 3.1 (42.3%) patients will display the "average" of this sign in the "clear" swelling and hyperemia, and $10.5 \pm 2.0\%$. In almost half of patients in the control group of one or other violence, the rise and weakness of the body temperature are noted.

The positive effect of the ongoing traditional therapy of this group of patients was clinically manifested from 5-6 days. (Diagram 1).

Diagram 1.

Dynamics of the clinical symptom of "early ear discharge" in patients of the control group.





Before treatment

After treatment

The dynamics of the treatment results in patients with SZO'O in the control group showed that "obvious" muco-purulent or purulent discharge from the ear at admission was observed in 16.6 ± 4.2 (57.6%) patients, and the "average" manifestation of this symptom was 10.5 ± 3.4 (35.6%). On the 5th day of treatment, a significant reduction of this symptom was noted - in

6.4±1.9 and 2.8±1.8 patients, which is 58.0% and 63.5%, respectively ($p < 0.05$), from the initial data less. 1.4±0.7 (4.6%) patients in the control group had "absence" of muco-purulent and/or discharge from the ear at admission. A significant increase in this indicator was noted in 5.6 ± 1.8 (14%) patients on the 3rd day of treatment, and before discharge, this indicator was 84.7% - 26.8 ± 3.1 patients (diagram 1).

CONCLUSIONS

The characteristic features of the disease - inflammatory process, excessive accumulation of inflammatory-purulent exudates in the middle ear, manifestation of various "severe" clinical symptoms, alteration and inflammation of the mucous membrane, and violation of the drainage function of the middle ear were observed in patients with acute fungal otitis media.

Inclusion in the complex of therapeutic measures of rational antimycotic therapy using teknazol and otozole, as well as laser therapy in patients with chronic fungal otitis media helps to correct the inflammatory syndrome and clinical symptoms, has general anti-inflammatory, antifungal properties. proved to have an anti-inflammatory effect, stimulating the compensatory functions of the macroorganism.

The use of laser therapy and Teknazol in the inflammatory syndrome against the background of fungal otitis media is pathogenetically based on increasing the effectiveness of complex therapy and shortening the duration of treatment, as it leads to the rapid elimination of the clinical manifestations of the disease, has a positive effect on the prevention of recurrence of the disease, and helps.

Laser therapy with the use of teknazol and otozole drugs is a minimally invasive, inexpensive and effective therapy method in a complex of therapeutic measures, and can be used in all otorhinolaryngology hospitals.

PRACTICAL RECOMMENDATIONS

1. The dose of laser radiation and the duration of the treatment course depend on the severity of the disease and the individual characteristics of the patient. Initial dose: wavelength 0.89 μm, input average laser power 4.6 W, pulse repetition rate 1500 Hz. Irradiation is carried out in the projection of the affected ear through the external auditory canal for 1 session every day, the duration of exposure is 5 minutes, the course of treatment is 5-6 sessions.

2. It is important to maintain an interval between the use of Otosol solution in the form of endural, local drops in the ear and laser therapy. This period should be sufficient for absorption of drugs and should be at least 30-40 minutes.

It is recommended to take Teknazol drug once a day after meals. If the therapeutic efficiency is low, the dose of the drug can be increased.

In patients with acute fungal otitis media, if there is a severe course of the disease, it is recommended to increase the course of treatment to 9-10 days in order to achieve a therapeutic effect according to the instructions.

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