

The Significance of Diseases of the Gastrointestinal Tract in the Clinical Course of Allergic Rhinitis

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Resume: We examined 42 patients with seasonal allergic rhinitis aged 18 to 47 years. Among the surveyed there were 29 men and 13 women. All patients underwent general clinical and functional examinations. All patients underwent a standard allergological examination. Based on the data of clinical, laboratory and instrumental examination of patients with allergic rhinitis, frequent involvement of digestive organs in the pathological process was revealed, as well as correction of gastrointestinal tract functions will have a positive effect on the dynamics of clinical and functional indicators of allergic rhinitis. Thus, more than 94% of the examined patients revealed various isolated and combined pathology of the gastrointestinal tract.

Key words: seasonal allergic rhinitis, gastrointestinal tract.

Relevance. Allergic rhinitis is a big problem for healthcare. This is a widespread disease in the world, which affects from 10 to 25% of the world's population, and the prevalence of allergic rhinitis is growing. Allergic rhinitis is associated with various limitations of physical, psychological and social aspects of life, which leads to a decrease in the quality of life, sleep disorders, and in severe cases — to problems in the professional career of the patient [1, 12]. The importance of this problem is due to the fact that allergic rhinitis is one of the serious risk factors for the development of bronchial asthma [2, 8, 11].

Since in more than 80% of cases allergic manifestations develop against the background of pathology of the gastrointestinal tract, in particular the liver and pancreas (pancreas), recently, when choosing antihistamines for the treatment of allergic pathology, preference is given to drugs that are not metabolized in the liver [5,7,10]. The liver is involved in many pathological processes, and its damage causes serious disorders of metabolism, immune response, detoxification and antimicrobial protection. The liver is an organ that provides the energy and plastic needs of the body, and also largely performs a detoxification function, that is, protecting the body from both external aggression and endogenous, including those associated with the treatment of many diseases, since the metabolism of most drugs occurs in the liver [3,6].

It has been established that chronic liver lesions, in particular of chemical etiology, continue to increase in the structure of general morbidity and mortality. In parallel with this, the number of allergic diseases has been increasing in the last 20 years. According to WHO data, the frequency of toxic liver lesions has increased 6-8 times in the world since 1960.

The constant load on the liver under chemical stress can cause a change in the nature of the course, chronization and prevalence of diseases of the liver and other organs and systems. Against the background of structural damage to the liver parenchyma and its functional insufficiency, the activity of microsomal enzymes of liver cells responsible for the neutralization processes decreases, which can lead to a decrease in the clearance of foreign substances entering the body, incomplete neutralization of endogenous metabolic products. As a result, this can lead to the accumulation of compounds in the organs and tissues of the body that predispose to the occurrence of toxic lesions. Incomplete metabolism of chemical compounds, a number of protein structures in the liver can lead to the occurrence of general and local allergic reactions in the body and, in turn, to the development of immunopathological reactions [4, 9, 11].

The purpose of the work. To study the importance of diseases of the gastrointestinal tract in the clinical course of allergic rhinitis.

Materials and methods. We examined 42 patients with seasonal allergic rhinitis aged 18 to 47 years. Among the surveyed there were 29 men and 13 women. All patients underwent general clinical and functional examinations. All patients underwent a standard allergological examination. The cause of pollinosis in 22 patients was allergy to tree pollen, in 20 — allergy to pollen of herbs and flowers.

Clinical manifestations of gastrointestinal tract lesions were observed in 37 (88.9%) patients with AR and were characterized by abdominal pain (intestinal colic), flatulence, frequent loose stools or constipation, cramping, short-term abdominal pain of indeterminate localization, out of connection with food intake. During palpation of the abdomen, soreness was noted at the projection points of the pancreas (Mayo-Robson, Desjardins points), the gallbladder, and the pyloroduodenal zone. Dyspeptic syndrome in the examined patients was characterized by nausea in 15 (36.1%) patients with AR; heartburn, unstable stools, flatulence in 16 (38.9%) patients with AR; pain in the right hypochondrium in 14 (33.3%) patients with AR.

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Ultrasound signs of changes in the pancreas were detected in 23 patients with AR and were characterized mainly by a diffuse increase in it with unchanged parenchyma; in 9 patients with AR, edema of the head area was detected. Echographic examination of the liver and biliary tract revealed a violation of the motor function of the gallbladder and moderate lesions of the liver parenchyma in 36 (86.1%) patients with AR. Mainly, a thickening of the gallbladder wall of more than 3 mm, its compaction, and the presence of heterogeneous sediment at the bottom of the gallbladder were revealed.

Thus, more than 94% of the examined patients revealed various isolated and combined pathology of the gastrointestinal tract.

All patients also underwent biochemical studies, the level of bilirubin was determined, which allows us to judge the absorption, metabolic and excretory functions of the liver; aspartate aminotransferase (AST) and alanine aminotransferase (ALT), which are sensitive indicators of the integrity of liver cells; alkaline phosphatase, which is a sensitive indicator of cholestasis. The normal state of the liver was recorded in 9 patients; in the rest, the studied liver indicators were below normal: total bilirubin - 1.7 mmol/l (in 9 patients), direct bilirubin was absent in 8 patients, reduced to 0.4.3 mmol/l in 7 patients, indirect bilirubin below normal - up to 1.7 mmol/l - in 5 patients, was absent from 4 patients. The results of ALT, AST were within the normal range.

Based on the data of clinical, laboratory and instrumental examination of patients with allergic rhinitis, frequent involvement of digestive organs in the pathological process was revealed, as well as correction of gastrointestinal tract functions will have a positive effect on the dynamics of clinical and functional indicators of allergic rhinitis.

Conclusion. In case of allergic rhinitis, determination of the functional state of the gastrointestinal tract is shown; if necessary, correction of these functions

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