

PI10: TRANSANAL ENDOSCOPIC BIOPSY TO THE WALL OF THE LARGE INTESTINE AS A METHOD OF DIAGNOSTICS OF CONGENITAL AND ACQUIRED DISEASES IN CHILDREN

Rybalchenko Vasul Fedorovuch*¹ and Tsyborovsky Yaroslav Olegovsch²

E-mail: Rybalchenko Vasul Fedorovuch — pedsurgery_ua@ukr.net

¹Shupyk National Medical Academy of Postgraduate Education Kyiv, Ukraine;

²Pediatric Hospital N.1, Kyiv, Ukraine

Background The problem of constipation and fecal incontinence common to all countries, one way or another disease affects 30 to 50% of the population and from 5 to 20% of children according to some data, and other data this problem affects 25% of the child population and 3 times more often are in preschool children and 70% of patients the disease begins to 5 years. Currently, the number of patients has the tendency to decrease. The development of telecommunications, including computer games, are a cause of sedentary lifestyles, both adults and children, leading to progression of disease. Timely diagnosis and successful emptying abuse as one of the symptoms of defects colon is the key to a successful operation.

Materials and methods In clinics Department of Pediatric Surgery National Medical Academy of Postgraduate Education from 2000 to 2016 held 64 transanal endoscopic biopsy of the colon, the age of patients ranged from 5 to 17 years. Duration emptying dysfunction lasted from 1 A to 3 years. Patients were 38 males (59.4%), 26 women (40.6%). Fyroskop biopsy using OLYMPUS GIF-XT30 and kolonofyroskop OLYMPUS CF-40L. Biopsy was performed three to 4 persons. According to 3 cm by 15 cm. Biopsy was performed under general anesthesia.

Results In carrying out endoscopy, the following changes in the mucous membrane, catarrhal colitis in 11 (17.2%), atrophic colitis in 38 (59.4%), erosive colitis in 7 (10.9%), pathological changes were found in 8 (12.5%). Successful biopsy considered when biopsies were at least areas of submucosal mucous and muscular wall of the colon. In our study, 59 (92.2%) patients biopsy was successful, and 5 (7.8%) in biopsies was slimy and partially entire layer submucosal membrane. The results of histological examination, the following results: agangliosis in 4 biopsies in 12 (18.7%) in agangliosis 3 - hipogangliosis biopsies and the fourth in 10 (15.6%), hipoagangliosis 2 — x biopsies and neuromuscular dyslaziya in the next two in 8 (12.5%), atrophic colitis in four biopsies in 15 (23.4%), colitis subatrofichnyy hipogangliosis with all four biopsies in 6 (9.4%), catarrhal prokto-syhmoyidit 5 (7.9%). Pathology stipulated in 8 (12.5%). With transanal endoscopic biopsy wall of the colon agangliosis established in 22 (34.3%) patients, and hipogangliosis and neuromuscular dysplasia in 8 (12.5%). Different types of colitis and prokto-syhmoyiditu found in 26 (40.7%) patients. Pathology stipulated in 8 (12.5%). Surgical treatment is performed in 30 (46.8%) patients. Complex conservative therapy lasted for a

year and further supports twice a year every year was positive in 34 (53.2%) patients, both in terms of normalization of stool suspension and inflammation of the colon. Of complications of transanal endoscopic biopsy is not installed.

Conclusions Transanal endoscopic biopsy of the wall of the colon as a method of diagnosis of congenital and acquired diseases in children is an effective screening method for diagnosis of congenital and acquired diseases of the colon, manifested as constipation and fecal incontinence. Found that in 46.8% of patients had constipation causes malformation agangliosis — Hirschsprung's disease different length parts. Effective and reasonable method of surgical treatment of Hirschsprung's disease Delimitation resection only its preoperative verification.

Key words agangliosis, hipoagangliosis colon, colitis, prokto-syhmoyidit, agangliosis