МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
НАЦІОНАЛЬНИЙ ФАРМАЦЕВТИЧНИЙ УНІВЕРСИТЕТ
КАФЕДРА КЛІНІЧНОЇ ЛАБОРАТОРНОЇ ДІАГНОСТИКИ

V ВСЕУКРАЇНСЬКА НАУКОВО-ПРАКТИЧНА ДИСТАНЦІЙНА КОНФЕРЕНЦІЯ «СУЧАСНІ ДОСЯГНЕННЯ ТА ПЕРСПЕКТИВИ КЛІНІЧНОЇ ЛАБОРАТОРНОЇ МЕДИЦИНИ»

Збірник тез конференції

27 травня 2026 рік
ХАРКІВ

immunological and oxidative indicators. The advantages of combined therapy are due to the synergistic effect on histamine-mediated, inflammatory and prooxidant mechanisms of the pathological process. The results obtained justify the prospect of further research into the combined use of loratadine with thoroughwax extract as a potential approach to pathogenetic therapy of allergic rhinitis.

CLINICAL AND LABORATORY DIAGNOSIS OF ENTEROBIOSIS

Pidgaina V.V., Matviichuk O.P., Matviichuk A.V.
National University of Pharmacy, Kharkiv, Ukraine
matviychukelen@gmail.com

Enterobiasis is a human parasitic disease, the causative agent of which is the human pinworm (Enterobius vermicularis), a milky-white spindle-shaped helminth, the length of the male is 3-5 mm, the female is 8-12 mm, the eggs are colorless, transparent, the size is 50-60 x 20-30 microns, the shape of the egg is oval-asymmetric, human infection occurs when swallowing mature pinworm eggs, which contain motile larvae. The pathogen parasitizes in the lower part of the small intestine and the upper part of the large intestine, which is its only host. Mostly children are affected, but there are cases among the adult population. The mechanism of transmission of the disease is fecal-oral, the contact-household route of transmission is significant. The main factor is hands contaminated with helminth eggs, as well as contaminated (dirty) household items (door handles, surfaces of furniture, windows and window sills, dishes, toys, children's pots), and less often - contaminated food products.

The basis of the pathogenic effect of pinworms on the human body is the mechanical effect of helminths on the intestinal mucosa, associated with irritation of mechanoreceptors and chemoreceptors during their fixation and movement. Clinical manifestations of enterobiasis depend on the intensity of infection. The main clinical symptoms are abdominal pain, morning intestinal discomfort, nausea, frequent formed bowel movements up to 4-5 times a day. Irritation of the ileocecal area leads to the possibility of developing enterocolitis. When penetrating the vermiform appendix,

pinworms can cause appendicitis.

Female pinworms lay eggs on the border of the skin and mucous membrane in the perianal folds, and can also lay eggs on the skin. Each female lays 10,000-12,000 eggs, which mature within 5-6 hours and then become invasive. Pinworms cause severe itching when crawling. When combing itchy areas, helminth eggs get on the hands, under the nails, and from unwashed hands into the mouth – this is how re-infection (self-infection) occurs. From dirty hands, pinworm eggs can get on any objects that the affected person has touched: toys, books, towels, door handles, taps, food products. Pinworms live for 2-2.5 months, and the disease in humans can last for years, since if certain hygiene rules are violated, infestation constantly occurs. Enterobiasis is often detected in several family members. Complications of enterobiasis include the occurrence of dermatitis and eczema of the perianal area, and severe complications of enterobiasis also occur: appendicitis, proctitis and paraproctitis, painful vulvitis and vulvovaginitis in girls.

The diagnosis is established by the presence of adult worms when examining feces during their macroscopic examination. Pinworm eggs are detected by microscopic examination of material obtained from the perianal folds using transparent adhesive or material from the subungual space. For the reliability of the result, the study is carried out 3-5 times. For the diagnosis of enterobiasis in adults, the method of perianal-rectal scraping is more often used.

The condition for successful treatment is the simultaneous implementation of a whole complex of preventive measures, along with therapeutic measures, to prevent re-infection. This is, first of all, strict adherence to personal hygiene. Given the high contagiousness of the invasion, all persons in contact with the patient should be examined for enterobiasis – all should undergo simultaneous deworming.

In organized children's groups, prevention consists of observing sanitary and hygienic requirements: teaching children the rules of personal hygiene, changeable shoes, marked sanitary clothing for work related to the organization of food, and marked special clothing for cleaning premises.