

# IMMUNOLOGY AND CELL BIOLOGY

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# BACTERIOLOGY AND INFECTIOUS DISEASES

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## THE NEW DOCTRINE OF ACUTE PNEUMONIA AND THE FIRST RESULTS OF PATHOGENETIC APPROACHES TO TREATMENT

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**T**reatment of acute pneumonia (AP) in recent decades focused solely on antibiotic therapy, does not include pathogenetic, specific methods of assistance and repeats the principles of treatment of other inflammatory diseases. Reducing the effectiveness of antimicrobial drugs, the emergence and the increasing number of antibiotic-resistant pathogens and a gradual increase in the frequency of purulent complications attach importance and urgency to the solution of this problem. The first step in this decision is a revision of ideas about the nature and mechanisms of AP. This work has been done and tested in a clinical setting in the years 1976-1984 in Novokuznetsk State Institute for postgraduate doctors (USSR, Russia). The basis of the new doctrine AP was based on the following scientific medical axioms, already having previous scientific justification: The body's response to any stimulus, including the initiation of inflammation, is highly individual and unique; the basis for the inflammatory transformation of the body tissue is a vascular reaction with a specific stage sequence; small and big circles of blood circulation not only have a direct relationship, but an inverse relationship; among the nonspecific forms of inflammation, AP is the only process occurring in the system of lesser circulation and the same medical procedure can have different effects on inflammation in the small or big circles of blood circulation. Following private studies were additionally performed: Experimental model of AP (4 series of experiments, 44 animals) obtaining a model of pleural complications; X-ray examination 56 lung anatomical preparations with different forms of the AP, taken from the dead patients; record comparative rheopulmonography before and after performing medical procedures (36 patients) and analysis of the observation and treatment of 994 children with AP and its various destructive and pleural complications. The revised treatment guidelines were applied in 101 patients in the initial period of aggressive forms of AP. The received results allow to speak about possibility of the guaranteed prevention of suppurative and destructive complications of the disease.

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