

The Role of Immunomodulators in the Treatment of Sinusitis in Benign Neoplasms of the Nose and Pines Area

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Abstract: 56 patients with sinusitis in benign neoplasms participated in the studies. The positive effect of the immunomodulator polyoxidonium on the clinical course and indicators of local and general immunity of patients with sinusitis with benign neoplasms of the nose and paranasal sinuses has been studied, the drug also increases the effectiveness of treatment, reduces the length of stay of patients in the hospital, reduces relapses of inflammatory and tumor processes.

Keywords: immunomodulators, polyoxidonium, sinusitis, benign tumor.

The relevance of the problem. Currently, a new clinical situation has formed in otorhinolaryngology, characterized by a combination of the inflammatory process of ONP with benign neoplasms of the nose and ONP [1, 4, 8, 14, 19]. The development of inflammation of the ONP mucosa is caused by a number of factors: environmental, social and household, a decrease in population immunoresistance, the use of a huge arsenal of antibiotic drugs, changes in the etiological structure of pathogens and modification of biological forms of pathogens. And when all this happens in combination with the tumor process, the inflammatory reaction loses its protective and adaptive character [3, 5, 9, 12, 20]. These diseases are a little-studied problem and create certain difficulties in diagnosis and treatment. However, the immunological reactivity of the patient's body is crucial in the development, course and outcome of inflammatory diseases in tumor processes [1, 6, 10, 13, 17]. Inadequate and insufficient immune response underlies the incompleteness of the inflammatory process, when after traditional treatment of sinusitis and surgical removal of the tumor, relapses of sinusitis, as well as neoplasms, are observed [2, 7, 11, 15, 18]. Therefore, when inflammatory diseases and neoplasms prone to recurrence are poorly amenable to traditional therapy, direct or indirect activation of the immune system is necessary by including immunomodulators in traditional treatment [16].

Objective: to study the effect of the immunomodulator polyoxidonium on the clinical course and immunological parameters of patients with sinusitis in benign neoplasms of PN and ONP.

Material and methods of study. The study involved 56 patients with sinusitis with benign neoplasms of PN and ONP. The inflammatory process was noted in the following sequence: sinusitis - in 16%, sinusitis - in 35%, sinusitis - in 11%, hemisinusitis - in 19%, pansinusitis - in 19% of cases. According to the results of histological examination, there were: angiofibroma - 38.8%. papilloma - 26.2%, adenoma - 19.4%, hemangioma - 11.2%. The age of the patients ranged from 14 to 65 years, of which 64.1% were men and 35.9% were women. The examined patients were divided into two groups: 30 people made up the main group, 26 - the control group. Also, an immunological study of 20 healthy people was conducted for comparison. Upon admission to the hospital, all patients underwent a traditional clinical examination, including a general analysis of blood, urine, R-graph, CT and MRI, if necessary, as well as a study of immunological parameters (T-, B-lymphocytes, Th, Ts and the concentration of immunoglobulins A, M, G in the blood).

Immunological studies in dynamics were carried out on the 10th day after surgery. Patients received traditional medical treatment, which included antibacterial, anti-inflammatory therapy and vasoconstrictor drugs. Upon admission to the hospital under general anesthesia, 32 (57.2%) patients underwent surgery - removal of the tumor by endonasal access, in 24 (42.8%) patients with tumors of the vestibule and anterior part of the PN (1st stage of tumor spread), the operation was performed under local anesthesia. Postoperative management provided for daily dressings with washing of the

ONP with antiseptic solutions. In the complex treatment of 30 patients of the main group, in addition to the traditional one, the immunomodulatory drug polyoxidonium was included at 6 mg i/m 1 time per day for 10 days.

The results of the study and their discussion. Despite the ongoing treatment, the patients of the control group had a tendency to recover at a later date. Reduction of nasal discharge, headaches and restoration of nasal breathing were noted on 8-9 days after removal of the tumor, the average stay in the hospital was about 12 days. The dynamics of improvement of clinical manifestations in patients of the main group was observed at an earlier date, the average indicators of improvement in clinical indicators were: restoration of nasal breathing, cessation of nasal discharge and headaches on 3-4 days after removal of the tumor, complete healing of the surgical wound was observed on 5-6 days. The average hospital stay was 6-7 days.

The conducted immunological blood test showed that in patients of both groups, the initial concentrations of Ig G and A were significantly reduced, and the concentration of IgM was increased compared to the control group. During treatment in patients of the control group, Ig G remained at the initial concentration level until day 10, whereas in patients of the main group, by day 10, there was a tendency to significantly increase their level, which is probably due to the acceleration of the formation of mechanisms of stable general immune protection, including the stabilization of the B-i ratio. T-lymphocytes.

Table 1. Dynamics of immunological parameters in patients receiving traditional and complex treatment

Indicator	Healthy n=20	Before treatment. n=58	Trad. treat. n=28	Comp. treat. n=30	Confidence level
B-Limf-%	22,3±1,1	14,8±0,99	18,6±1,0	20,2±1,3	P<0,05;P1<0,05
T-Limf-%	55,9±1,78	47,4±1,2	50,4±1,5	53,7±1,62	P>0,1; P1<0,05
T-xelp-%	45,1±3,6	21,4±1,4	39,7±2,0	42,2±3,3	P<0,01;Pj<0,05
T-sup-%	26,01 ±2,2	17,1±1,0	19,5±1,1	22,1±2,4	P>0,1; P1<0,05
IgA, g/l	1,5±0,2	1,2±0,3	1,3±0,3	1,4±0,2	P>0,1; P1<0,05
IgM, g/l	1,3±0,2	2,2±0,4	1,9±0,3	1,6±0,3	P>0,1; P1<0,05
IgG, g/l	15,2±1,5	7,4±0,7	10,5±1,3	12,6±1,4	P<0,05;P1<0,05

Note: P - reliability in relation to the indicators before treatment; P1 - reliability in relation to the indicators of healthy.

The ratio of T- and B-lymphocytes in patients of both groups was significantly destabilized. In patients of the main group, after the appointment of polyoxidonium, a significant ratio of T- and B-lymphocytes was noted by the end of treatment, and in patients receiving traditional treatment, there were tendencies to improve.

In patients of the main group after treatment, the content of T- and B-lymphocytes was closer to the physiological $53.7 \pm 1.62\%$ and $20.2 \pm 1.3\%$, respectively, which in turn led to normalization of cellular and humoral immunity in the form of restoration of immunoglobulins A, M, G in the blood. The level of Ig A was reduced at admission in all patients, but with traditional treatment by the 10th day it was 1.3 ± 0.3 g/l, and in patients of the main group the concentration of Ig A was 1.4 ± 0.2 g/l.

The concentration of Ig M in patients of the control group remained unchanged, and in patients of the main group there was a significant decrease by day 10 of 1.6 ± 0.3 g/l ($p < 0.05$) with a norm of 1.3 ± 0.2 g/l. In the treatment of patients with traditional methods, the dynamics of normalization of immunological parameters was quite long and did not reach the limits of the norm before discharge from the hospital. And in patients of the main group with the use of polyoxidonium in the treatment, the tendency to normalize the indicators was noted already from the 5th day after the removal of the tumor and the start of treatment, by the 10th day the immunological indicators were reliably approaching normal physiological indicators. All patients underwent a control examination after 3 and

6 months, relapses of inflammatory and tumor processes in the main group were observed in 10% of cases (3 patients), and in the control group - 32% (9 patients).

Thus, the inclusion of immunomodulating drugs in the complex therapy of chronic sinusitis, occurring in combination with benign tumors, made it possible to achieve a reliable clinical effect; i.e. normalization of immunological parameters, reduction of the length of stay of patients in the hospital, reduction of relapses of inflammatory and tumor processes, which ultimately leads to an increase in the effectiveness of treatment.

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