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# MODERN DIAGNOSTICS, CLINICAL PICTURE AND EPIDEMIOLOGY OF INTESTINAL YERSINIOSIS

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**Summary**: Yersiniosis is a disease caused by several types of enteropathogenic Yersinia. They have an alimentary route of infection, clinically manifested by CNS intoxication, dyspepsia, tonsillitis, lymphadenopathy, rash, organ lesions in various organs. The survey data, as well as the diagnosis and treatment of 120 children aged 6 months to 14 years with acute diarrheal disease, were analyzed between 2021 and 2023, while they constituted the main study group, 40 children were examined for the control groups. All children under observation underwent extensive continuous examination, which included clinical and laboratory, biochemical, virological and immunological studies. In this regard, the emphasis was placed on their complaints, previous and concomitant diseases, the causes of the disease, the duration of the disease, the results of diagnostic and early treatment measures.

**Key words:** *Yersinia enterokolitica, sick animals with yeriniosis.*

The study analyzed 250 children with acute diarrhea retrospectively, of whom 120 children were analyzed prospectively, forming the main group in our research. Among this main group, 78 (65%) were children living in rural areas, while 42 (35%) were children from urban areas.

When studying the etiology of the disease in 120 patients with controlled intestinal infections, the cause of acute diarrhea remained undetermined in some cases: 34 cases of intestinal yersiniosis, 2 cases of Salmonella, 2 cases of Shigella, and 2 cases of rotavirus infection.

**Objective:** To study the epidemiological and clinical manifestations, as well as laboratory diagnostics of yersiniosis.

**Materials and Methods** The 120 observed children were divided into three subgroups based on age for further analysis:

**Results and Discussion**

- **Subgroup 1**: 91 (75.8%) children aged 6 months to 3 years.
- **Subgroup 2**: 24 (20%) children aged 4 to 11 years.
- **Subgroup 3**: 5 (4.2%) children aged 12 to 14 years.

Figure 1 presents the distribution of the children under observation by age and gender. It shows that 44% of the examined children were boys, while 66% were girls.

Notably, in all studied age groups, girls predominated in the overall number of children.

Explaining this trend is more challenging, as it may be linked to the biological gender characteristics of the child's body, which remain unclear. At the same time, children aged 6 months to 3 years accounted for over half of those examined with intestinal infections—75.8% (Figure 1). This can be attributed to the anatomical, physiological, pathomorphological, and general characteristics of children affected by yersiniosis.

When analyzing comorbid conditions in children with yersiniosis (Figure 2), 89 (74.1%) patients were found to have anemia, rickets, or hypotrophy, with the following specific distributions:

- Rickets and hypotrophy: 41 (34.1%)
- Hypotrophy and anemia: 28 (23.3%)
- Exudative-catarrhal diathesis: 23 (19.1%)
- Anemia: 19 (15.8%)
- Malnutrition: 19 (15.8%)
- Paratrophy: 16 (13.3%)
- Hereditary diseases: 12 (10%)
- Chronic tonsillitis: 5 (4.2%)
- Carrier of NVSAD: 5 (4.2%)

Among 34 children with confirmed yersiniosis:

- 18 (53.0%) were diagnosed with gastroenteritis
- 8 (23.5%) with enteritis
- 8 (23.5%) with enterocolitis

Clinical observations revealed that gastroenteritis is the predominant form of yersiniosis.

**Conclusions** The diversity of intestinal infections, their complications, and clinical manifestations require the attention of infectious disease specialists and pediatricians, ensuring rapid diagnosis and correct pathogenetic treatment approaches. As seen in Table 2.5, among 34 children diagnosed with yersiniosis, 3 (8.8%) had a moderately severe course, while 24 (70.6%) had severe forms of the disease. The severity of the illness was found to be related to the slower activation of the body's defense mechanisms, confirming clinical observations.

Among 120 children with controlled acute diarrheal disease:

- 34 (20.6%) had a mild course
- 16 (8.8%) had a moderate course
- 80 (70.6%) had a severe course of the disease

These findings highlight the importance of timely diagnosis and management of intestinal infections to prevent severe complications.

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