DIAGNOSTIC APPROACHES AT DIAGNOSIS OF THE OCCUPATIONAL DISEASE OF THE PNEUMOCONIOSIS

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Abstract: *it is established that industrial aerosols and toxic substances which effect leads to development of pathological changes are the reason of development of a pneumoconiosis and depends on duration of influence, their structure, quantity and also individual predisposition of an organism. Mistakenly very long time was considered that the pneumoconiosis causes only the dust containing free silicon dioxide. However, now it is proved that this occupational disease can arise under the complex or combined action of industrial aerosols of complex structure.*
Keywords: *occupational diseases, pneumoconiosis, diagnostics, clinical diagnostic researches, industrial aerosol, clinical symptoms, prophylaxis.*

ДИАГНОСТИЧЕСКИЕ ПОДХОДЫ ПРИ ПОСТАНОВКЕ ДИАГНОЗА ПРОФЗАБОЛЕВАНИЯ ПНЕВМОКОНИОЗА

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Аннотация: *установлено, что причиной развития пневмокониозов являются промышленные аэрозоли и токсические вещества, действие которых приводит к развитию патологических изменений и зависит от длительности воздействия, их состава, количества, а также индивидуальной предрасположенности организма. Ошибочно очень длительное время считалось, что пневмокониоз вызывается только пылью, содержащей свободный диоксид кремния. Однако, в настоящее время доказано, что данное профессиональное заболевание может возникать под комплексным или комбинированным действием промышленных аэрозолей сложного состава.*
Ключевые слова: *профессиональные болезни, пневмокониоз, диагностика, клинико-диагностические исследования, промышленная аэрозоль, клинические симптомы, профилактика.*

In modern pulmonology distinguish chronic occupational diseases of lungs in which etiology the leading place is taken by dust content and gas contamination of air of a working zone and leading to development of a connecting tissue, that is diffuse primary fibrosis – to a pneumoconiosis. A pneumoconiosis in structure of the existing occupational diseases is high on the list and generally meets in the coal-mining, asbestos, mechanical, glass engineering industry [3, p. 2].

It is established that industrial aerosols and toxic substances which effect leads to development of pathological changes are the reason of development of a pneumoconiosis and depends on duration of influence, their structure, quantity and also individual predisposition of an organism [1, 2]. Mistakenly very long time was considered that the pneumoconiosis causes only the dust containing free silicon dioxide. However, now it is proved that this occupational disease can arise under the complex or combined action of the industrial aerosols of complex structure including substances fibrogenny, toksik-dust and allergenic, sensitizing and irritant action that caused body height of a pneumoconiosis [4, p. 3; 5, p. 72], not characteristic of classical forms, in recent years, as served as the purpose for carrying out this research.

We studied modern approaches to diagnostics of an occupational disease of a pneumoconiosis since there is a large number of the researches allowing to diagnose precisely this disease for further development of preventive and necessary rehabilitational actions.

Modern approaches at diagnostics and to identification of forms of a pneumoconiosis don't deny the importance of drawing up the traditional sanitary hygienic characteristic of working conditions according to

which it will be taped that the leading factors defining development of a pneumoconiosis will be the composition, time of an exposition and high concentrations (exceeding extreme admissible concentration) of the inhaled dust of an inorganic or organic parentage.

Accounting of a professional route of the patient and identification of possible contacts to production dust during all work is of particular importance. Among clinical diagnostic testings there is widely known large personnel roentgenophotography which is a starting point at diagnosis which taps characteristic intensifying and deformation of the pulmonary drawing, existence of fine focal shadows. Such researches as roentgenography of lungs, a computer tomography, a magnetic resonant tomography of lungs allows to specify a pneumoconiosis form (an intersticial, nodous, nodal form) and a disease stage. The existing methods of a spirometry and a gas analytical research allow to conduct researches of function of external respiration and to define borders of changes in pulmonary tissues. Not unimportant value also the microscopical research of a sputum, a bronchoscopy, etc. gets modern methods. Thus, for diagnosis there is a large number of methods, both traditional, and new modern methods with use of the high sensitive equipment. For example, according to the available literary data it is established that the structure of modern forms of a pneumoconiosis generally is defined by structure of an industrial aerosol. So, in 58,8% cases the aerosol of high and moderate fibrogen action which is characterized by specific clinical implications is the reason of development of a silicosis.

On the basis of various clinical, radiological, functional and laboratory results of patients with various forms of a pneumoconiosis and taking into account results of their dynamic observation it will be possible to solve further tactics concerning patients, their rehabilitation and a employment. The complex of the actions referred on optimization of working conditions, keeping of safety requirements of production, improvement of technological processes, the rational organization of the local exhaust ventilation, humidification of production rooms and constant use of individual means of protection is the cornerstone of prophylaxis of a pneumoconiosis.

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