

EFFECTIVENESS OF SURGICAL PREVENTION OF POSTOPERATIVE PURULENT COMPLICATIONS IN CHILDREN

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Abstract

Postoperative purulent complications (POC) remain one of the significant problems in pediatric surgery, since they can significantly worsen the outcomes of surgical interventions and increase the duration of recovery. In children, due to the peculiarities of the immune system and anatomical and physiological characteristics, the risk of developing such complications may be higher than in adults, which requires a special approach to prevention and treatment [7, 13, 2].

Introduction

Purulent complications after surgical interventions in children can be caused by many factors. Among them are:

- Violation of sterility in the operating room: Insufficient observance of asepsis and antisepsis during surgery can lead to the introduction of infection into the wound.
- Patient's immune status: Children, especially those with chronic diseases or weakened immune systems, are at a much higher risk of infection.
- Type of surgery: Surgeries on the intestines, urinary tract, and skin may make them more susceptible to infection.
- Inadequate postoperative care: Improper handling of the postoperative wound and insufficient attention to hygiene measures may cause infection.

Surgical prevention of postoperative purulent complications in children is key to improving treatment outcomes. The use of effective prevention methods can significantly reduce the incidence of infections and accelerate the healing process of postoperative wounds [8, 6, 3, 9].

Main areas of prevention

- Preventive use of antibiotics: The use of antibiotics in the early stages after surgery is one of the fundamental methods of preventing POGO. However, it is important that the choice of antibiotic is justified taking into account possible pathogens, as well as the patient's characteristics (allergies, age characteristics, etc.).
- Asepsis and antisepsis: It is important to strictly follow all recommendations for sterility during surgery. This includes the use of sterile instruments and materials, as well as monitoring the cleanliness of the surgical field.





- Optimization of postoperative care: In the postoperative period, it is necessary to ensure regular monitoring of the wound condition, dressings with antiseptics, and promptly identify signs of infection. In some cases, drainage may be required to remove exudate.
- Correction of immune status: If the child has immune disorders or chronic diseases, it is necessary to carry out appropriate correction, which will help improve the body's resistance to infections.
- Use of modern diagnostic methods: The inclusion of ultrasound examinations, bacteriological tests and other diagnostic methods allows for the timely detection of early signs of purulent inflammation and the beginning of treatment at the very first stages.
- Nutrition and recovery: A balanced diet that takes into account the body's needs in the postoperative period, including vitamins, trace elements and proteins, helps strengthen the immune system and accelerates tissue healing.

Particular attention should be paid to a multidisciplinary approach to the prevention of postoperative purulent complications. Not only surgeons, but also anesthesiologists, pediatricians, infectious disease specialists, and nurses who provide competent care for the patient should participate in the work. Coordination in the actions of medical personnel at all stages of treatment plays a key role in preventing complications [8, 12, 10, 5].

If all preventive measures are followed, the effectiveness of the fight against postoperative purulent complications in children increases significantly. In cases of early intervention and competent prevention, serious complications such as sepsis, abscesses or phlegmon can be avoided. However, in the presence of risk factors and the absence of timely diagnosis, complications can significantly worsen the prognosis [1, 11, 13].

Conclusion:

The effectiveness of surgical prevention of postoperative purulent complications in children depends on a comprehensive approach, including the correct use of antibiotics, asepsis and antisepsis, high-quality postoperative care and monitoring of the patient's condition. Timely intervention and monitoring of the patient's condition at all stages of treatment can significantly reduce the risk of infection and improve the child's quality of life after surgery.

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