



SEXUALLY TRANSMITTED INFECTIONS, HIV/AIDS

EPIDEMIOLOGICAL ASPECTS OF NEUROSYPHILIS DETECTION.

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Introduction: Diagnosis of neurosyphilis - is an actual problem. Pathological conditions of CNS induced by syphilitic infection, frequent associate with slowing down to negative serological response seen in patients.

Objective: to analyze the incidence of neurosyphilis in Tula region in Russia from 2013 to 2017.

Materials and methods: we examined statistical records of follow-up for the period 2013-2017 To the city for four years in Tula region was observed 2623 people sick with syphilis. Of these, the 680 is a lack of or slow to negative clinical and serological tests. With the aim of identifying specific lesions of the nervous system 297 patients in this group had completed a diagnostic study of the liquor with the formulation of the complex specific serological tests: total antibodies to *Treponema pallidum* by ELISA, RMP, RIF (C), PHA, JgM, JgG.

Over the years, the number of patients who were expelled diagnostic study of cerebrospinal fluid was as follows: in 2013 - 21 patients, in 2014 - 47, in 2015 - 45, 2016 - 75, in 2017 - 109.

Results: the diagnosis of neurosyphilis was established in 35.6% of the examined patients with delayed negative clinical-serological tests. Of these, asymptomatic neurosyphilis was diagnosed in 67%, neurosyphilis with symptoms - in 33% of the total number of cases of neurosyphilis.

Conclusions: the study of cerebrospinal fluid with the production complex of specific serological tests: total antibodies to *Treponema pallidum* by ELISA, RMP, RIF (C), PHA, JgM, JgG from 35.6% of patients having seroresistant revealed neurosyphilis. In 67% of cases, the asymptomatic course of neurosyphilis was noted, which makes it necessary and mandatory to perform a spinal puncture followed by a complex of serological tests of liquor in patients with absence or delayed seronegative for the timely diagnosis of specific lesions of the nervous system.

