

Competent Treatment a Measles at Children and Adults Without Vaccines

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Measles (Morbilli) - the sharp infectious disease caused by a virus of measles, transferred air-drop by, characterised catarrhal a syndrome, defeat of mucous membranes of an oral cavity, an intoxication syndrome, presence is spotty-papulez rashes with transition in pigmentation.

Historical data. The measles are allocated in independent nosological the form in second half XVIII centuries though it is known long before our era. The filtered nature of the activator of measles is proved in 1911 Anderson, Goldberger to which managed to receive experimental measles at monkeys. The first strain measles virus is allocated in 1954 G. Enders, T Peebles.

Aetiology. The activator of measles *Polinosa morbillarum* concerns to paravixovirus (family Paramyxoviridae, sort Morbillivirus), contains RNA, has the wrong spherical form with a diameter virion 120–250 nanometers. Strains measles virus are identical in the antigene relation, possess complementary, hemagglutinating, hemalysing properties and simplestorage activity. The measles virus is unstable in environment, is sensitive to ultra-violet beams and a sunlight. In saliva droplets perishes through 30 mines, at drying - instantly. Well transfers low temperatures: at - 70° keeps activity within 5 years. Measles virus it is possible to allocate from blood, nasopharyngeal washouts, cal, urine, cerebrospinal the liquids, separated conjunctivas.

The transfer mechanism - drop. A transfer way - air-drop. The virus gets to environment at cough, sneezing, conversation and, extending on considerable distances with air streams, can get into the next premises; through corridors and staircases, on ventilating system even on other floors of a building. The transmission of infection through subjects and the third party practically is absent owing to small stability of a virus in an environment. It is impossible to exclude pre-natal infection (a transplacental way of transfer) at disease of the woman in the end of pregnancy. An index contagiousness - 100%. Time natural security against measles is available only for children of the first 3 months of a life owing to presence at them the congenital immunity received from mother. Further immunity decreases, and by 6-10 months of a life children become susceptible. At absence at mother specific anti-measles antibodies the child can be ill even in the period newborns if there will be a direct contact to the diseased.

Disease source is the infected person - last 2 days of the incubatory period and to 4 days after rash. For 5th day rash the patient is considered safe for associates.

Symptoms of the Typical Form of Measles

Day 1 - the illness beginning is characterised by the fast and sharp beginning for which it is characteristic: a raising of a body temperature to 40 degrees, sneezing, husky a voice, because of dry cough, fear of light, a cold, puffiness of eyelids and a red shade conjunctivas, hyperemia a pharynx, occurrence of stains of red colour in the soft and firm sky (so invited «measles enanthema»).

Day 2 - there are stains Filatova-Belsky-koplika (corporeal specks with the red border, arising on a mucous mouth near molars). It is the basic symptom on which I define measles. The measles are defined to clinical signs.

Days 4 and 5 - rash occurrence (exanthema) on integuments of the person, behind ears, on a neck; then next day after that, the trunk becomes covered by a rash, and for the third day rash (6-7 day of illness) exanthema will become covered extensor parts of finitenesses (including and fingers). It is necessary to notice, that the rash is formed from small papules which are surrounded by a red stain and can incorporate among themselves. Merge papules is a distinctive line of measles from Rubella's.

Day 7-8 (the fourth day after rash) - the condition of the patient is normalised (the temperature settles into shape, the rash dries up, darkens, is shelled). And the rash descends as it appeared - on descending. Pigmentation will descend about 10-11 days. The atypical form - earlier imparted people catch, an illness current in this form a lung, thus a stage rash is broken (высыпания it is possible to see only on the person and a neck), the incubatory period lasts 21 day (at the typical form of measles it proceeds from a week to two, but in unusual cases 17 days last).

(The small incubatory period, is caused by a virus):

Attention! For newborn children is available colostral immunity. It is transferred from mother to the child, before had been ill with measles. It operates 3 months from the moment of a birth! These data it is necessary to have in medical cards of children and adults.

Vaccinal Strains and Their Features

The majority live attenuated measles vaccines have received the beginning from strain's Edmonston, allocated Enders and Peebles in 1954 Well-known vaccinal strains, received of strain's Edmonston, including strains Schwarz (Schwarz), Edmonston-Zagreb, AIK-C and Moraten, which are used since 60th years of the last century. The analysis nucleotide has shown to sequence of the selected genes minimum (<0, 6%) distinctions among these. strains. Strains, not derivative from strains Edmonston, such as CAM-70, TD-97, Leningrad-16 and Shanghai-191, are inclined to show the big deviations in sequence. There are clinical considerable distinctions among these attenuated no vaccines concerning efficiency and collateral reactions. Before use lyophilized the vaccine gets divorced sterile solvent. Each dose in 0.5 ml contains ≥ 1000 virus infectious units vaccinal strain's; it also concerns and combination vaccines containing the measles component (VCMC). Measles the vaccine can contain also Sorbitol and hydrolyzed gelatin as the stabilizer, and also a small amount Neomicyn, but it does not contain Tiomersal (mercury).

The Immune Answer on Measles a Vaccine

Measles the vaccine induces as humoral, and the cellular immune answer, comparable with that at natural disease, a caption of antibodies usually lower. Also lower concentration of parent antibodies is found out in the babies who were born at vaccinated mothers, in comparison with an indicator for the natural disease transferred by mothers. After immunization in blood there are class antibodies transitor measles-specific of antibody Ig M and antibodies of class Ig A - in excreta mucous; antibodies of class Ig G remain in blood years. Vaccination also induces virus-specific CD4 + and CD8 + T-limphocyt. Antibodies to fibers H and F participate in process of neutralisation of a virus and is better correspond to protection against measles.

As well as in a case with wild strain's measles virus, the vaccinal virus causes both stimulating, and overwhelming influence on the cellular immune answer. However the overwhelming effect after vaccination proceeds some weeks and it is considered harmless.

Collateral Reactions to Vaccines

Insignificant pain and rigidity in an injection place can be marked within 24 hours; sometimes it is accompanied by low temperature and local adenopatia's. Approximately in 7-12 days after vaccination to 5% of persons within 1-2 days suffers from a fever to 39, 4°C. Sometimes the fever causes febril attacks (approximately in one on 3000 persons). But it can be avoided if not to do a vaccine (the note of the author).

Time rash are observed approximately in 2%, thrombocytopenic purple - at one on 30 000 vaccinated persons. Collateral displays, behind an exception anaphylactic reactions, are observed less often after introduction vaccines containing the measles component (VCMC).

Allergic reactions to vaccine components, including Neomicyn and Stabilizers, Gelatin or Sorbitol, can be observed after vaccination. Anaphylactic reactions are observed seldom, in 1 case on 100 000 doses of the entered vaccine.

Having had been ill with measles once, at the child proof lifelong immunity is developed. And vaccines only aggravate disease of children! It is better to have been ill and apply once etiotrop therapy, than many times to be ill from vaccines and them revaccination, or to receive other infections on the weakened organism (a syndrome of strengthening of an infection).

Development and Measles Transfer

Viruses at hit in an organism amaze lymphocytes, suppressing work of immune system. As a result of a current of disease and suppression of reciprocal immune reaction on the activator at kids the secondary bacterial infections localised in the top and bottom departments of respiratory ways quite often develop.

The virus is absolutely unstable in environment and quickly perishes at boiling or pasteurisations, collapses at influence of direct solar beams, drying, at contact to disinfectants. The main way of transfer of a virus - air-drop, it is easily transferred to the child at dialogue with sick children or recently had been ill, or sow a virus in environment (at immunodeficiencies), a virus quickly extends at sneezing, cough. Household by the measles virus practically is not transferred, as quickly perishes out of a human body.

As infection source the sick person who remains infectious from the moment infection and to 4 days after rash occurrence on a skin acts.

Symptoms and Signs of Measles at Children

Allocate 4 periods of a current of disease depending on which clinical signs of measles will gradually vary.

The Incubatory Period of Measles

Duration makes it from 9 to 21 days and begins with the moment of hit of a virus in an organism before occurrence of the first clinical signs. At hit of a virus of measles on mucous membranes of the top respiratory ways begins its active reproduction and distribution with a blood current to internal bodies and lymph nodes. In lymph nodes the virus starts to breed again, that leads to the beginning of a following period of measles - catarrhal.

Catarrhal the Measles Period

It still name prodromal or initial, duration makes from 3 till 4 days. During this period the child has a number of the symptoms reminding usual cold:

1. increase body temperatures to 38 degrees and above;
2. head pains and weakness;
3. rhinitis, congestion a nose, expressed rhinorrhea;
4. frequent sneezing and dry cough;
5. hoarseness of a voice;
6. redness of the conjunctiva an eye and a swelling of eyelids;

7. lacrimation and a photophobia;
8. increase and morbidity of cervical lymph nodes;
9. redness throats and a pain at swallowing;
10. enanthate the top sky - occurrence of large stains of red colour;
11. sometimes vomiting is observed liquefied a cal, a pain in a stomach.

All these symptoms appear at the child along with accruing slackness, absence of appetite, dream deterioration. For the second days prodromal the period the patient on mouth mucous membranes, a gum and an internal border of lips has white-grey points with a red frame, Belsky-Filatova-Koplika so-called stains. Such stains specify in destruction epithelial cages a virus, which subsequently exfoliated. The attentive doctor can diagnose «measles» to the patient only to these signs till the moment of occurrence of a rash on a skin that allows to isolate in due time the child from associates and to prevent the illness centres.

Gradually all listed symptoms accrue and are aggravated - the body temperature of the child reaches 40 degrees, the throat, a trachea and bronchial tubes are involved in inflammatory process (sometimes lungs), there is a strong cough with considerable quantity allocation sputum. Disease passes in the following stage - a stage rash.

The Period Rash



Duration of this period till 4 days, as a rule, the first elements of a rash appear for 5 days of illness. At first stains individual, light pink, but quickly darken, get generalized character, extend on all body, amazing integuments and internal bodies. At the given stage the patient has serious allergic reactions, on a skin there are small hemorrhages - petechias.

The first measles stains appear in the top half of body - behind ears, on the person, a neck, gradually falling downwards. Stains are inclined to merge and formation of the centres of the wrong form towering over a skin. As a result of such formations on a body the kind of the child changes: the person becomes bloated, hydropic, lips cracked, dry with blood crusts, eyes red.

After rash occurrence on a body catarrhal measles signs start to decrease - the child is better feels, the temperature falls down, is normalised appetite, there passes weakness, there comes the following period.

The Pigmentation Period

Begins about 4-5 days from the occurrence beginning rash and 2 weeks proceed. Pigmentation of stains begins in the same sequence - with the top half of trunk downwards. Measles stains at first become cyanotic, and then brown, gradually start to be shelled. At pressing on stains a finger, they do not change colour and do not disappear anywhere. From fifth day from the beginning of the period of pigmentation the child ceases be infectious for associates and can visit children's collectives.

Possible Complications of Measles at Children

The main distinctive feature of measles from other children's infections is its ability to suppress immune reaction of an organism therefore the risk of development of complications from all bodies and systems essentially increases. Most often at the child who has transferred measles, the is conditional-pathogenic flora that leads to development of bacterial inflammatory processes becomes more active. Complications can be primary, caused by a virus of measles, and secondary, resulting joining of a bacterial infection.

Primary Complications of Measles Concern:

1. measles a pneumonia
2. encephalitis
3. bronchopneumonia
4. pleuritis
5. polyneuritis
6. meningitis.
7. meningoencephalitis

Secondary Complications of Measles Concern:

1. laryngitis
2. pielonaphritis
3. cystitis;
4. colitis
5. miocarditis
6. otitis
7. conjunctivitis

The age of the child there is less, the complications more hard proceed, some of them even lead to a lethal outcome in the absence of timely competent medical aid by means of Clinical Pharmacists.

Diagnostics of Measles at Children

Statement of the diagnosis to the kid with measles does not make special work. The basic stages of diagnostics are:

1. careful anamnesis gathering - contact to sick children, cases of flashes of measles in a kindergarten or in an environment;
2. complaints parents and the child;
3. appearance characteristic rash;
4. presence Belsky-Filatova-Koplika stains on mucous membranes of a mouth, the sky and gums in the field of molars.

Sometimes the measles at children proceed atypically, without the expressed characteristic clinical semiology. In this case for diagnosis statement carrying out of additional laboratory researches - the virologic analysis of blood, serological researches, a X-ray of bodies of a thorax is required at suspicion on measles complications.

Treatment of Measles at Children

At not complicated current of measles and timely revealing of an infection of the child it is possible to treat in house conditions, carrying out all medical recommendations. Children of younger age are better for hospitalising with mum, they have complications is more often.

Attention! Specific methods of treatment of an infection at children exists! Then symptomatic means are not necessary.

As immunity of the child in illness is weakened it is possible to use Immunomodulations on the basis of interferon of the person - Laferobion, Viferon, Kagocel, Immunal. These preparations speed up work of immune system and promote the prompt recover.

On lips and cracks it is possible to grease crusts with vegetable oil or Retinol's, Carotalin's to reduce unpleasant sensations at the child.

In case of joining of secondary complications of measles the Clinical Pharmacist makes the decision on appointment to the kid of antibiotics. It is necessary to do sensitivity to antibiotics in urine of the child in microbiological laboratory.

Premise where there is a patient, it is necessary to air and spend often damp cleaning 2 times a day. As in catarrhal the period of measles at the kid it is observed lacrimation and a photophobia it is better to curtain a window and to muffle lamp light.

Diet at Measles to the Child

In catarrhal the period appetite at the child is lowered or is absent, therefore it is impossible to force to eat the child violently. Special attention give to a drinking mode, offering the patient compotes, mineral water without gas, broth of a dogrose, a linden, grassy teas, berry juices from berries.

As soon as appetite of the kid will return, the food should be offered in the small portions, all dishes should to be acquired and be vitaminized easily. The diet at measles does not mean in itself anything supernatural - porridges, sour-milk products, low-fat meat, soups, vegetables fruit. It is recommended to exclude chocolate, honey, citrus, nuts, caviar of fish and other potential allergens from a diet.

Preventive Maintenance of Measles at Children

Emergency preventive maintenance of measles means introduction of the Antibody to the child contacting to the patient, intramuscularly unitary. The similar method of preventive maintenance is effective only in the event that the vaccine has been entered right after contact to the patient (the same day!).

Introduction of a vaccine against measles can be spent only to healthy children.

Contra-indications to carrying out of planned or emergency vaccination are:

1. acute inflammatory processes;
2. illnesses of blood;
3. violation from work of kidneys;
4. vices of hearts.

In case of measles flash in child care centre it is necessary to take measures of preventive maintenance in order to avoid epidemic:

1. isolate the sick child from healthy children till the moment of the period of pigmentation коревой rashes (to 5 days);
2. observe quarantine within 21 days;
3. several once a day to air a premise and it is obligatory to spend damp cleaning with use of disinfectants.

In spite of the fact that last years the measles at children are not widespread disease thanks to inoculations, parents should address to the pediatricist at occurrence of any rash on a body of the kid. Remember that measles, and its possible complications are dangerous not. Then vaccines are not necessary. Measles therapy that is possible in Russia and other countries is necessary Etiotropic.

The Earliest Sign of Measles

1. на the sky appear small whitish nodules which then disappear.

Early Signs

1. small point a rash (it is a lot of more than at Rubella's), rash stage-by-stage - at first on the person, then behind ears, on the top half of a trunk,

Hands, feet (distribution within 3 days from top to down occurs - on descending). The rash consists of stains and small knots which often merge and hardly are raised over a skin surface. The rash also from top to down, sometimes leaving small scales disappears. Only then there comes simplification.

2. fever

3. expressed an intoxication

4. conjunctivitis and catarrhal the phenomena

5. present stains Velsky - Filatov's - Koplika's.

Disease can give complications: a pneumonia, meningoencephalitis, a laryngitis, a pharyngitis, a stomatitis. Give vaccine complications more!

6. It is known vaccine's strain measles! It causes disease with serious complications!

Risk Factors on Measles

With measles children at the age of 2-5 years are ill mainly and the adults who have not had been ill with this disease at children's age are much more rare. Newborn children have colostral the immunity transferred by it from mothers if those had been ill with measles earlier. This immunity remains the first 3 months of a life. There are cases of congenital measles at transplacental infection with a virus of a fruit from sick mother.

After the transferred disease proof immunity, repeated disease by measles of the person, without an accompanying pathology of immune system develops, it is doubtful, though also such cases are described from vaccines. The majority of cases of measles each 2-4 years, despite vaccination are observed in winter-spring (December-May) the period with disease lifting. So vaccines what for are necessary? To whom is it favourable? It is business of officials from medicine on blood of children!

Miniepidemics meet. Infection occurs from vaccines when the immune system of children cannot cope with an infection such children sow viruses in surrounding space. It is necessary to do Immunogramms before inoculations, children with immunodeficiencies cannot do inoculations, otherwise, they then are infection carriers to other children. Catch from the imparted! The healthy child does not sow viruses as it is deceitfully treated in official medicine in Russia (the note of the author).

Carriage viruses arises from the made vaccines!

As infection collars mucous membranes of the top respiratory ways and, probably, conjunctivitis serve. After primary replication in epithelial cages and regional lymph nodes the activator gets into blood, primary virology develops already in the incubatory period. As a result the virus disseminates, is fixed in various bodies and again collects in cages macrophagal systems. In bodies (lymph nodes, tonsils, lungs, an intestines, a liver and a spleen, myeloid fabrics of a bone brain) develop small inflammatory infiltration with proliferation reticuloendothelial and formation of multinuclear huge cages. In the incubatory period the quantity of viruses in an organism is still rather insignificant and can be neutralised introduction anti-measles an antibody to the persons contacting with sick measles, not later than 5th day after contact.

Occurrence of the second wave coincides with occurrence catarrhal disease symptoms virology. The maximum concentration of a virus in blood remains during all catarrhal the period and the first day rash, then sharply falls. By 5 day rash in blood appear virus neutralizing antibodies, an a virus any more do not find out.

Possessing an affinity to epithelial to cages of mucous membranes and central nervous system, the virus basically amazes the top departments of respiratory ways (sometimes also bronchial tubes and lungs), conjunctiva, in insignificant degree gastrointestinal tract (GIT). The inflammation with the advent of huge cages in limphoid intestines formations, and also in central nervous system (CNS) owing to what there is a possibility of development of complications in the form of a meningitis and meningoencephalitis develops. Albuminous components of a virus and biologically active substances liberated in reply to circulation of a virus, give catarrhal to an inflammation in the amazed bodies infectious-allergic character. Specific inflammatory focal process with allergic reaction, a dystrophy epithelia's, increase in permeability of vessels, perivascular infiltration and a hypostasis underlies formation measles, enanthate stains Filatova-Koplika-Velsky on a mucous membrane of cheeks and lips, and later and exanthema.

System defeat limphoid fabrics, macrophagal elements, departments TSNS (reticular formations, podvorovoy to area, etc.) leads tranzitor to suppression hymoral and cellular immune reactions. Easing of activity of nonspecific and specific factors of the protection, peculiar to measles, extensive defeats of mucous membranes of a respiratory path and GIT, and also decrease in a vitamin exchange with deficiency of vitamins C and A make group of the factors promoting occurrence of various bacterial complications.

After recover immunity with lifelong preservation anti-measles antibodies in blood is formed.

Attention! The virus can is long to remain in a human body and to be the originator of development of a slow infection in the form of a multiple sclerosis (more often at women, at men - amiothrophic a lateral sclerosis), subacute sclerosing panencephalitis, and also, probably, some system diseases - system red lupus, system, scleroderma reumatoid an arthritis.

Important! Therapy of measles for preventive maintenance neuroinfections and system diseases at adult age (the note of the author) is necessary Etiotropic!

Microscopic histologic picture: mucous respiratory ways - a hypostasis, plethora vessels, the centres necros's, sites metaplasia epitelia's, focal lymphohistiocytic infiltration in submucosal a layer. Reticuloendothelial system - cages Warthin-Finkeldey. A skin - changes in papillary a layer derma's in the form of a hypostasis, plethora vessels, hemorrhages with perivascular lymphohistiocytic infiltration, focuses necros'a in epidermis.

Measles Symptoms

The incubatory period averages 1-2 weeks, at passive immunization by an antibody it can be extended till 3-4 weeks. Existing clinical classifications allocate the typical form of measles of various severity levels and the atypical form. Recurrence of a current of disease in the typical form allows to allocate three consecutive periods of clinical displays of measles:

1. catarrhal the period;
2. the period rash;
3. the period reconvalence.

Differences of Symptoms at Children and at Adults

Catarrhal the period begins sharply. There is a general indisposition, a headache, decrease in appetite, dream infringement. The body temperature raises, at heavy forms it reaches 39-40°C. Signs of an intoxication at adult patients are expressed much more, than at children. From first days of illness mark a rhinitis with plentiful mucous, sometimes mucopurulent selections. Persuasive dry cough develops, at children it becomes frequent rough, «barking», is accompanied hoarseness voices and (in some cases) stenotic by breath. Simultaneously develops conjunctivitis with puffiness of eyelids, hyperemia of the conjunctiva, an injection склер and the purulent separated. Quite often in the mornings eyelids stick together. The patient is irritated with bright light. At survey of children sick of measles reveal puffiness persons, hyperemia's a mucous membrane oropharynx, granularity of a back wall drinks. At adults these symptoms are expressed slightly, but observe limphadenopathia's (mainly cervical lymph nodes), listen to rigid breath and dry rattles in lungs. At a part of patients mark short pappy a cal.

For 3-5th day the state of health of the patient improves, decreases a fever a little. However in day displays of an intoxication and catarrhal a syndrome again amplify, the body temperature rises to high figures. During this moment on a mucous membrane of cheeks opposite to small molars (is more rare on a mucous membrane of lips and gums) it is possible to find out a cardinal clinical diagnostic sign of measles - stains Filatova-Koplika-Velsky. They represent a little acting and densely fixed white stains surrounded with a thin border гиперемии (a kind of «cream of wheat»). At children elements usually disappear with occurrence exanthema's, at adults can remain within its first days. A little before stains Filatova-Koplika-Velsky or simultaneously with them on a mucous membrane of soft and partially firm sky appears measles enanthema in the form of red stains of the wrong form, size about a pin head. In 1-2 days they merge and lost on the general hyperemic a mucous membrane background.

In same time at increase of symptoms of an intoxication sometimes it is possible to observe dyspeptic the phenomena. As a whole catarrhal the period proceeds 3-5 days, at adults is sometimes tightened till 6-8 days.

The period rash replaces catarrhal the period.

Occurrence of the bright is characteristic is spotty-papulyoz exanthema's, tending to merge and formation of figures to sites of a healthy skin between them.

1. In the first day rash elements appear behind ears, on pilar head parts, then arise this very day on the person and a neck, the top part of a breast.
2. For 2 day rash the rash covers a trunk and the top part of hands.
3. For 3 days elements exanthena's act on the bottom finitenesses and distal departments of hands, and on the person turn pale.

The descending sequence rash - is characteristic for measles and is very important differentsial-diagnostic sign.

At adults the rash happens more plentifully, than at children, it is large-is spotty-papulyoz, often drain, at heavier current of disease occurrence hemmoraghe elements is possible.

The period rash accompanies strengthening catarrhal the phenomena - a cold, cough, lacrimation, a photophobia - and the maximum expressiveness of a fever and other signs of a toxicosis. At inspection of patients often reveal signs tracheobronchitis, moderately expressed a tachycardia and an arterial hypotension.

The period convalescence (the pigmentation period) is shown by improvement of the general condition of patients: their state of health becomes satisfactory, the body temperature is normalised, gradually disappear catarrhal symptoms. Rash elements turn pale and die away in the same order in what they appeared, gradually turning in light brown stains. In the subsequent pigmentation disappears for 5-7 days. After its disappearance it is possible to observe bran a skin peeling, basically on the person.

Pigmentation and a peeling also serve diagnostic important, though also retrospective signs of measles.

During this period mark decrease in activity of nonspecific and specific factors of protection (measles anergy). Reactance of an organism is restored slowly, within several next weeks and even months the lowered resistibility to various pathogenic agents remains.

Attention! If there will be an infection centre, and there is it always after vaccination it is necessary to spend not inoculations (vaccination), and passive immunization (look in the text).

I understand, that the inoculation from a natural smallpox has been justified, inoculations imparted on hips that the person has not been disfigured. But vaccination of other vaccines is not justified. There were many complications, many children's death that is not justified. In Russia cases of complications and death disappear. To be ill from vaccines it is possible many times. Arise vaccinal strains infections. There are syndromes of strengthening of an infection (often ill children) and a syndrome Imprinting's, especially on the combined vaccines when there is no antibody, or they arise not on all viruses present at vaccines and causing infections, or antibodies not enough for protection against an infection are developed. Diagnostics of presence or absence of antibodies to Russia do not spend. It means that all experiments with infections, - are dangerous! And as it is easy in Russia impart all. By the way, after 50 years too it is necessary to stop vaccination. After 50 years of a vaccine do not work for the elderly.

Important! I consider, that it is necessary to have to begin with to be able to level action of any vaccines if vaccines give complications! And only then to apply on an epidemic situation, instead of all successively. Here also catch all around. In Russia in it are not engaged.

Metilirovanne Measles

The atypical form developing at persons, received passive or active immunization against measles or before had been ill. It always after inoculations. Differs longer incubatory period, an easy current with poorly expressed or completely not expressed intoxication, reduced catarrhal the period. Stains Filatova-Koplika-Velsky are absent more often. The rash is typical, but rash can simultaneously arise on all surface of a trunk and finitenesses or to have ascending sequence. More often others are given out by a meningitis! To be ill with infections after inoculations (vaccine) it is possible many times. There is a question. And what for then to impart children? If at contact to an infection it is possible not to be ill, it is possible to be ill only once and at application Etiotropic treatments, to recover. And 3 variant - actually violently to enter viruses by means of vaccines, and to be ill many times. It is favourable medicine?

At the infected persons whom during the incubatory period entered preventive an antibody or did blood transfusion and plasmas, measles proceeds easily. It differs the increased incubatory period (to 21 days), usually proceeds at low-grade to temperature, catarrhal the phenomena from respiratory ways are expressed poorly, Belsky-Filatova-Koplika stains are not present, exanthema in the form of individual elements without characteristic for measles staging. Complications does not give.

Reaction to an Inoculation

At introduction live anti-measles vaccines 25-50% imparted have different expressiveness a reaction. In some cases it reminds metilirovanne measles. However the incubatory period is truncated till 9-10 days. Body rise in temperature (sometimes considerable), karap the top respiratory ways, poor maculo-papular a rash is marked. Separate children can have spasms and vomiting. Persons with vaccinal reaction for associates are not dangerous. At persons with an immunodeficiency caused by a number of illnesses (leukosis, a leukaemia, oncological patients), introduction live anti-measles vaccines can cause very heavy reaction. The inoculation is counter-indicative to such children.

Current of measles at persons with the broken immune system. At a HIV-infected and oncological patients the measles proceed originally. More often (at 80%) illness proceeds extremely hard. Lethal outcomes were observed at 70% of the oncological patients who have ill with measles and at 40% of a HIV-infected. Immunized earlier (before HIV infection) perished from measles less often. Despite very heavy current, at 30% sick of measles was absent exanthema, and at 60% of patients the rash was atypical. Heavy complications (encephalitis, a pneumonia, etc.) often developed.

Complications. Defeat by a virus of measles of a mucous membrane of a respiratory path can lead to development of a bronchitis, a false croup, bronchiolitis, and also the most frequent complication of measles - a pneumonia. It's virus-bacterial infection on genes's. The big role is played by the accumulated secondary bacterial microflora. But at some forms of a pneumonia the basic role is played by a virus. It is possible to carry to such complications interstitial giant cell a pneumonia which develops at persons with immunodeficiencies (at oncological patients it more often comes to light at 50-60%, at a HIV-infected - at 60-82%), proceeds hard, it is accompanied by a short wind, in lungs come to light infiltrative changes, in sputum it is possible to find out multinuclear huge cages.

Conjunctivitis is obligatory display of measles, but at some patients besides conjunctivitis it can be amazed and a cornea. Keratoconjunctivitis is complication which can sometimes lead to blindness. Rare complications concern miocarditis, a hepatitis, glomerulonephritis. At a secondary bacterial pneumonia the lung abscess can develop.

Heavy complication is defeat of the central nervous system (encephalitis, meningo- encephalitis), which is observed at 1 on 1000 sick of measles (at persons with the weakened immune system encephalitis was observed in 20% of cases). Signs encephalitis appear in a week after occurrence exanthema's though can develop and later (in 2-3 weeks) is more often. The body temperature Again raises, there are signs of the general intoxication, drowsiness, block, sometimes consciousness loss, anim, absence of belly reflexes, nystagmus, defeat of an obverse nerve, paralyses of finitenesses. With heavy consequences can end measles defeat of a visual and acoustical nerve. At involving in spinal cord process can be pelvic frustration.

The Diagnosis and the Differential Diagnosis

In a heat of illness the diagnosis of typical measles of difficulties does not represent. In an initial stage before occurrence measles exanthema's the diagnosis is based on expressed conjunctivitis with a lower eyelid hypostasis, karape the top respiratory ways, enanthema's and especially on revealing of stains of Belsky-Filatova-Koplika.

It is the most difficult to diagnose atypical measles for the imparted.

To differentiate it is necessary from Rubella's, enterovirus exanthema's, infectious eritema's Rosenberg, allergic (medicinal, serumal) to a rash, from infectious mononucleoz.

In these cases it is expedient to use laboratory methods. In an initial stage and in first two days after rash occurrence in painted dabs sputum, nasal slime or urine it is possible to find out multinuclear huge cages. From the same materials on culture of cages it is possible to allocate measles virus. Measles the antigene can be revealed in epitelia's respiratory ways a method immunofluorescence. Use also serological methods (PSK, PTGA, the REEF, etc.). Diagnostic it is considered increase titer in 4 times and more.

Treatment. Attention! I consider, that it is necessary to expand possibilities passive immunopreventive. But not vaccines. Them spend introduction anti-measles an antibody. These are things different.

Etiotropic treatment is - Amizon a syrup from 0 till 6 years and Amizon tablets from 6 years. Anti-measles the antibody possesses only preventive action. At occurrence of clinical semiology it does not render any effect. Patients with measles are treated by houses. Hospitalisation are subject sick of the complicated measles, and also under epidemiological indications (from the closed collectives). During the feverish period the confinement to bed is recommended. A cot put the head end to a window that light did not get to eyes. To the patient give a considerable quantity of a liquid, fruit juice, vitamins, at persistent dry cough - expectorant means. In eyes dig in 20% a solution of sulfatsil-sodium 3-4 times a day. At a pneumonia caused by stratification of secondary bacterial microflora, appoint antibiotics, at a staphylococcal pneumonia - Sangviritrin tablets strictly after meal in 30-40 minutes. Gelomirtol capsules since 12 years. Intramuscularly enter anti-staphylococcal the antibody. It is shown oxigenotherapy by the humidified oxygen through nasal katetors till 30-45 mines of 4-5 times a day. At heavy forms of illness, and also at measles to groats antibiotics combine with Corticosteroid preparations. At occurrence of signs encephalitis to the patient appoint a strict confinement to bed, intravenous introduction of 40% of a solution of glucose and a complex of the actions recommended at a cerebral hypertensia. Glucose it is impossible at infections and oncological patients! Viruses of an infection and oncological infection eat glucose, providing illness relapse (the note of the author). In Russia it is unreasonable in intensive therapy is spent.

Preventive Maintenance and Actions in the Centre

Measles it is possible to warn passive immunization (unitary introduction of an antibody in a dose of 0, 25ml/kg for the first time 5 days after contact with measles the patient). Passive immunization is shown children till 3 years, to the pregnant women, a sick tuberculosis and to persons with the weakened immune system. In Russia it is't do!

Children contacting with sick measles, do not suppose in child care centres within 17 days from the moment of contact, and receiving preventive an antibody - 21 day. The first 7 days from the beginning of contact children are not subject to dissociation.

Attention! The live vaccine cannot be appointed to pregnant women, with a tuberculosis, leukoz's, limphoma's, and also a HIV-infected and oncological of patients!

Attention! It is impossible to apply vaccines at treatment of the big doses of steroid hormones, alkylated (Cytostatics) or metabolic preparations, to the persons receiving beam suppressing immunity-therapy. In Russia it is not considered!

Abortive the measles also concern atypical forms of disease. Begins, as the typical form, but interrupts in 1-2 days from the illness beginning. The rash appears only on the person and a trunk, body rise in temperature observe usually only in the first day rash. More often atypical forms also give out a meningitis!

Also there are the subclinical variants of measles revealed only at serological research of pair whey of blood.

Measles Complications

The most frequent complication of measles - the pneumonia, a laryngitis and laryngo-tracheo-bronchitis at children of younger age can conduct to false croup development. There are stomatitises.

Attention! A meningitis, meningo-encephalitis and polyneuritis observes at adults is more often. These conditions usually develop in the pigmentation period! Prior to the beginning of pigmentation it is necessary to treat illness specific treatment - medicines, instead of inoculations! The most terrible, but, fortunately, rare complication (more often at adults) happens measles encephalitis.

Laboratory Data at Measles - Immunogramms:

Lymphopenia, leukopenia, in case of bacterial complications - leukocytoz, neutrophilez. At measles encephalitis - the raised maintenance lymphocytes in a spinal liquid. In 1-2 days after rash raises specific Ig M. In 10 days Ig G. For revealing specific anti-measles antibodies reaction hemagglutination is used. In early terms of illness the virus is found out by a method immunofluorescence. Ig M testify to sharply proceeding infection, Ig G appear in later terms of disease.

Gematologicheskyy data: in catarrhal the period - leukopenia, neutropenia, shift leukocytar formulas, limphocytoz; in the period rash - leukopenia, eozinopenia, monocytopenia, erythrocyte sedimentation rate (ESR) it is not changed.

Allocation of a virus from nasopharyngeal washouts and statement serological reactions (PTGA, PSK and PN in pair whey) in clinical practice apply seldom as their results have retrospective character.

The measles should be differentiated from Rubella's, scarlet fevers, a pseudo-tuberculosis, allergic (medicinal, etc.) dermatitis, enterovirus infections, serumal illness and other diseases accompanied by occurrence skin rash.

The measles distinguish a complex of the basic clinical displays in catarrhal the period: an intoxication, a cold plentiful selections, persuasive rough, «barking» cough, hoarseness the voices, expressed conjunctivitis with puffiness of eyelids, an injection of vessels sclera and purulent separated, a photophobia, occurrence of a cardinal clinical diagnostic sign - stains Filatova-Koplika-Velsky for 3-5th day of illness. Then there is a bright is spotty-papulyoz exanthema, tending to merge.

Attention! Very important differential-diagnostic sign, for measles (behind an exception metilirovanne), the descending sequence rash is characteristic.

Diagnosics

- contact with sick of measles;
- the gradual beginning of illness;
- an accruing body temperature;
- accruing catarrhal a syndrome (cough, a rhinitis, conjunctivitis, etc.);
- a syndrome of defeat of a mucous membrane of an oral cavity (enanthema; friability, diversity, matte colour);
- stains Velsky-Filatova-koplika (in the end of the period).

Support-diagnostic signs of measles in the period rash:

- the characteristic epidemiological anamnesis;
- staging rash occurrence;
- a rash it is spotty-papulez with the tendency to merge and transition in pigmentation;
- rash occurrence is accompanied by new lifting of a body temperature;
- an accruing intoxication;
- a fever and catarrhal a syndrome are expressed as much as possible;
- stains Velsky-Filatova-Koplika (in the period beginning);
- a syndrome of defeat of a mucous membrane of an oral cavity.

Confinement to bed appoint during all time of a fever and the first 2 days of normalisation of a body temperature.

It is necessary to watch the hygienic maintenance of the patient strictly: regularly to wash, sometimes in day to wash out eyes warm boiled water, a weak solution calium's permanganate or 2% a solution of sodium of a hydrocarbonate. For stomatitis preventive maintenance it is recommended to a thicket to give to drink to the patient, to rinse an oral cavity broths of grasses (a Camomile, a Sage, etc.). Conjunctivitis the eye is processed by 3-4 times a day an oil solution Retinol's acetate, lips grease lanolin with a cream, buckthorn oil, dogrose oil, Karatolin's.

Diet appoint taking into account age of the child, the form and the disease period.

During the sharp period it is necessary to give dairy-vegetative food, mechanically and chemically sparing, with the sufficient maintenance of vitamins. After intoxication decrease add meat dishes in the form of steam cutlets, quenelles, baked puddings from low-fat grades of meat. It is recommended to a thicket to give to drink to the child (warm milk, tea with raspberry or honey addition, a cranberry berry juice, dogrose juice, raisin broth).

The reasons and mechanisms of development of the basic children's infections from homoeopathy positions.

The MEASLES are display disbalance between a radio body, on the one hand, and astral and «I», with another. Illness brings the missing form, as a rule, to children - to phlegmatic persons and children poorly owning the radio body. Astral and «I» «enter and put things in order in a radio body». The important role in the course of recover is played by rise in temperature.

Attention! At children who were not receiving febrifuges, illness proceeds is easier and faster. Any Aspirin, Paracetamol, Taulenol, Phlypyrtin!

For meningitis and pneumonia preventive maintenance when the rash turns pale ahead of time and disappears, it is necessary to strengthen rash rubdowns with salt, skin grinding by soft brushes, moderately hot baths before reddening of a skin and rash occurrence.

Diet at Measles at Children

Protein-free a diet and plentiful drink - for children.

If the child is healthy, its body corresponds to spiritual needs. During the period reconvalence (recover from measles) and immunity developments - a susceptibility to various infections increases (the syndrome of strengthening of an infection), therefore is necessary - quarantine (a guarding mode), warmly, decrease emotional and physical activity (to exclude the TV). It is important to strengthen new skills in development of the person of the child - drawing, a moulding, other kinds of creativity. During this period the child has a pleasure from creativity!

If asks to eat apples will quickly recover.

If asks to drink only, do not insist on meal.

A food at Measles

In the first 5-7 days from the beginning of disease by measles children, as a rule, refuse food intake. Is better during given period to offer the child plentiful drink and easy mucous soups. As drinks broth of hips, liquid kissel, tea with a lemon, juice from sweet berries and fruit will approach. At measles milk and sour-milk drinks are recommended also. The food should be wiped and liquid. It will help to avoid personal injury the amazed mucous mouth and drinks.

The wiped vegetable soups, semi-fluid porridges and vegetable mashed potatoes are shown also. To translate the child sick of measles, on a normal food it is authorised after knocking over of the basic symptoms of illness - decrease in a body temperature and regeneration of sites of integuments on which were rash. It is possible to enter into the menu in unlimited quantity fruit and vegetables. After each food intake the mouth needs to be rinsed. Similar procedure is necessary for spending for prevention of development of such complication of measles, as a stomatitis (Sergey Kashin, 2007).

Useful Products at Measles

During illness it is necessary to adhere to a dairy and - vegetables fruit diet.

At temperature which keeps at high level in the first days of illness, it is not necessary to overload an organism with heavy food. For a food dishes from dairy and sour-milk products well will approach. If the patient absolutely does not have appetite - it should give a lot of drink (freshly-squeezed juice, cranberry and cowberry berry juices, compotes).

Gradually (to the extent of temperature stabilisation), the patient needs to enter dairy porridges, lenten soups into a diet, then it is possible to pass to usual porridges, a ragout, to vegetables, fruit and salads (mashed potatoes) from them. It is not necessary to forget and about greens. Salad leaves, fennel, parsley, spinach well will approach.

On condition improvement (it is better to wait when the rash will start to descend) it is possible to add prepared on the pair welded or stewed fish and meat not of fat grades. For meat dishes it is better to take dietary meat.

After full disappearance of a rash and its pigmentation, and, also, all symptoms of illness, it is possible to pass to a habitual food allowance. Naturally, a food should be healthy and correct, containing all vitamin organism vitamin and mineral complexes.

Except synthetic vitamins and microcells is to exclude for the period of illness!

Dangerous and harmful products at measles: fat, firm, fried food;

Spices: a horse-radish, mustard, pepper (especially red); lifeless food.

These products irritate mucous intestines, make heavier work of gastrointestinal tract (GIT) because of what the organism spends all forces for digestion and food processing, instead of on illness treatment.

Recipes of Dishes

The First Dishes

Soup Dairy with a Potato and Carrots

Components

1 l of milk, 300 g a potato, 100 g carrots, 500 ml of water, 10 g a butter, salt.

Way of Preparation

Potato clear, cut small slices, connect to the carrots rubbed on a large grater, lay out in a deep frying pan, fill in with water and extinguish to softness.

Then merge water, add boiling milk and a butter, salt, mix and weary on weak fire within 15-20 minutes.

Ready soup pour in portion a plate and at once submit on a table.

Soup with a Potato and Corn**Components**

1 l of the beef broth, 200 g a potato, 200 g corn, 500 ml of water, 100 g carrots, 20 g onions, 20 g a butter, 10 g parsley roots, 20 g parsley and fennel greens, salt.

Way of Preparation

Onions and parsley roots crush and together with the carrots rubbed on a large grater extinguish in a butter.

Corn cob wash up, dry up on a napkin, separate grains, pour out them in boiling water and cook to readiness then cast away on a colander.

Broth place on fire, put the potato cleared and cut by small cubes, stewed vegetables, salt and cook within 20-30 minutes, and then add corn.

Ready soup remove from a plate, pour in portion a plate, strew the chopped greens of fennel and parsley and submit on a table.

Cream Soup from Vegetable Marrows and Green Peas**Components**

500 g vegetable marrows, 200 g a potato, 100 g carrots, 1 l of water, 50 g tinned green peas, 100 ml of water, 20 g wheat flour, 1 egg, 20 g a butter, 20 ml of cream, 20 g fennel and parsley greens, salt.

Way of Preparation

Vegetable marrows both small cut potato and carrots separately extinguish in a small amount of the added some salt water, then accurately cast away on a colander, allow to flow down to surpluses of a liquid and mix.

After that crush by means of a blender, add the green peas kneaded by a plug, the vegetable broth, the boiled milk and the flour sifted through a sieve. All carefully mix, salt, place on weak fire and cook within 15-20 minutes.

Ready soup remove from a plate, fill with the softened butter, pour in a mix of egg and cream, stir in chopped fennel and parsley greens, pour in portion a plate and submit on a table.

Cream Soup from a Broccoli with Onions-cutter

Components

300 g a broccoli, 20 g onions, 20 g onions-cutter, 500 ml of the beef broth, 50 ml of cream, 10 g a butter, 20 g fennel greens, salt.

Way of Preparation

Broccoli wash up and separate inflorescences. The remained stalks clear, cut thin mugs, lay out on разогретую a frying pan and extinguish in a butter together with the crushed onions.

Inflorescences cook in the added some salt beef broth within 20 minutes. After that add stewed vegetables, pour in cream, mix and hold on fire even 20-30 minutes, and then crush by means of a blender.

Ready soup pour in portion a plate, strew the cut greens of the fennel, the chopped onions-cutter and submit on a table.

Cream Soup Dairy With a Cauliflower and a Beet Tops of Vegetable

Components

200 g a cauliflower, 1 l of water, 100 g a beet tops of vegetable, 200 g vegetable marrows, 100 g tomatoes, 100 g carrots, 30 g a leek, 200 ml of milk, 40 g a butter, 50 g sour creams, 20 g fennel greens, salt.

Way of Preparation

Cauliflower wash up, disassemble on inflorescences, lay out in the boiling added some salt water and cook to readiness then extinguish on a frying pan with addition of a small amount of a butter.

Separately extinguish in a water small amount the crushed vegetable marrows, and also cleared of a thin skin and the cut tomatoes with a beet tops of vegetable.

In a frying pan kindle the remained butter and brown in it the chopped leek and the carrots rubbed on a large grater, then pour in milk, salt, mix and boil within 15 minutes.

The prepared components crush by means of a blender, finish to boiling and remove from a plate.

Cream soup pour in portion a plate, fill with sour cream, strew the cut greens of fennel and submit on a table.

The Second Dishes

The Potato Baked in an Omelette

Components

300 g a potato, 500 ml of water, 4 eggs, 100 ml of milk, 20 g a butter, 10 g fennel and coriander greens, salt.

Way of Preparation

Potato clear of a thin skin and cook in the added some salt water to semireadiness, and then cut thin mugs and lay out on a bottom of the form greased with a butter.

Eggs shake up with salt and milk.

With the received mix fill in a potato, strew small cut greens of fennel and a coriander and place in warm to 180-200°C an oven for 15-20 minutes.

Ready dish cut portion slices and submit on a table.

Ragout from a Hen With an Onions and a Tarragon

Components

300 g a chicken fillet, 300 g a potato, 200 g sweet pepper, 50 g onions-shalot, 10 g tarragon greens, 10 g a butter, 20 g sour creams, 10 g fennel greens, salt.

Way of Preparation

Fillet of a hen wash out, dry up on a napkin, cut small slices, shift on пазорпетыю a frying pan and extinguish in a butter together with the chopped onions-shalot.

After that add the potato cut by cubes and the chopped sweet pepper. In 20-30 minutes pour in sour cream, salt, mix and warm up within 15 minutes.

Further add the crushed greens of a tarragon and fennel.

Ragout hold on weak fire even 10 minutes, and then remove from a plate, lay out on a wide dish and at once submit on a table.

Ragout from a Potato with Carrots and Peas Pods**Components**

300 g a potato, 100 g turnips, 200 g peas pods, 100 g carrots, 30 g onions, 50 ml of vegetable oil, 20 g fennel and parsley greens, salt.

Way of Preparation

The crushed onions and peas pods separately extinguish in vegetable oil

Potato clear, carefully wash up, cut small cubes, lay out in a deep frying pan, pour in a few waters and extinguish to semireadiness. After that add the carrots rubbed on a large grater and turnip, mix and warm up on weak fire within 15-20 minutes. Then put pods of peas and onions, salt, again well mix and hold on fire even 20 minutes.

Ready ragout strew small cut greens of fennel and parsley and at once submit on a table.

Ragout from Beef with Tomatoes and a Quince**Components**

300 g beef, 100 ml of water, 300 g a potato, 100 g tomatoes, 100 g a quince, 20 g onions, 10 g green onions, 30 g a butter, 10 g a tomato paste, 20 g fennel greens, salt.

Way of Preparation

Beef wash out, dry up on a napkin, cut small slices, lay out in a deep frying pan and extinguish to readiness with addition of a butter and a water small amount. Then add the crushed onions, cleared of a thin skin and the chopped tomatoes and hold on weak fire within 20 minutes. Then put the sliced quince and a potato, a tomato paste and pour in the remained water.

All well mix and extinguish even 20 minutes. Some minutes prior to readiness salt and add the cut greens of fennel.

Ragout lay out on portion a plate, strew green onions and at once submit on a table.

Baked Pudding from a Hen With Greens and Cabbage**Components**

300g a chicken fillet, 300g the Peking cabbage, 200g a broccoli, 20g a butter, 2 eggs, 20g parsley and fennel greens, 30g sour creams, salt.

Way of Preparation

fillet of a hen wash out, dry up on a napkin, cut small slices and place in the form greased with a butter.

from above lay out chopped peking capus that and crushed broccoli, fill in with the eggs which have been shaken up with salt and cut greens of parsley and fennel then place in warm to 200°c an oven and finish to readiness.

baked pudding cut portion slices, grease with sour cream and submit on a table.

The Beef Baked with Raisin and a Peanut**Components**

500g beef, 100g a peanut, 200g raisin, 30g onions, 30g a butter, 30g fennel and parsley greens, salt.

Way of Preparation

Beef wash out, cut large pieces and pass through a meat grinder together with onions twice. The received forcemeat lay out on a bottom of the form greased with a butter.

From above strew crushed the peanut kernels, the washed out raisin, small cut greens of fennel and parsley, place in an oven and finish to readiness at temperature 180-200°C.

Baked pudding cut on portion slices and at once submit on a table.

Desserts**Mousse from Semolina with Apple Mashed Potatoes*****Components***

50g semolina, 100g apples, 30g powdered sugar, 300 ml of water.

Way of Preparation

Apple clear, remove a core and rub on a small grater. In the received mashed potatoes pour in water and add powdered sugar. Well all mix, place on fire and boil within 5-7 minutes then remove from a plate, slightly cool, filter and again finish to boiling. Then a thin stream pour semolina also cook to thickening.

Then a mix remove from a plate and quickly cool, shaking up a mixer.

Mousse from a Black Currant

Components

200g berries of a black currant, 600 ml of water, 20g gelatin, 70g powdered sugar.

Way of Preparation

Currant (150) wash out, carefully knead and wring out.

The remained oil cake fill in with water (550 ml), place on fire and boil within 15-20 minutes then remove from a plate, slightly cool, filter through a sieve or the gauze combined four times, add powdered sugar (50) and the gelatin dismissed in boiled water. Place on fire and cook at constant stirring of 2-3 minutes, then remove from a plate and, shaking up a nimbus or a mixer, quickly cool.

The remained currant pound in mashed potatoes, pour in water (50 ml) and boil 5 minutes, then filter, connect to powdered sugar (20), carefully mix and warm up on weak fire even 3-5 minutes.

With the received syrup fill in mousse and at once submit on a table.

Drinks

Compote from Apples, Wild Strawberry and a Raspberry

Components

1 l of water, 200 g apples, 100 g wild strawberry berries, 100 g raspberry berries, 30 g sugar.

Way of Preparation

Apples wash up, clear, remove a core, cut small slices and lay out in boiling water, then add the touched and washed out berries of wild strawberry and a raspberry.

All mix, pour sugar and boil within 10-15 minutes.

Ready compote remove from a plate, slightly cool, pour in a glass and submit on a table.

Cocktail from Cherries with a Lemon Juice

Components

400 г cherry berries, 5 ml of a lemon juice, 10 г powdered sugar.

Way of Preparation

Cherry berries touch, wash up, remove stones, pound in mashed potatoes (having left a little for an ornament) and wring out. The received juice connect to a lemon juice and powdered sugar and carefully mix. On a bottom of a high glass put the remained berries of a cherry, fill in with the received mix and at once submit on a table.

It is necessary to look on a situation when a rash about to descend, it is possible to include in a food - the fish prepared on pair, put out dietary meat (turkey).

After full disappearance of a rash and its pigmentation, it is possible to pass to a usual food allowance.

Positive examples of treatment by herbal medicine at measles at children and adults.

1. phony broth from flowers - before a dream.
2. decoction parsley (root) - 4 times a day before meal, broth to insist in a thermos of 8 hours, to filter and drink draughts - a rash all leaves from within outside.

By the way, parsley juice cleans a skin itch!

3. berries raspberries, it is possible with lime honey.
4. eyes to wipe a weak solution of boric acid with pure water. Attention! This solution it is impossible to wipe a rash on a body!
5. each two hours to rinse a mouth - Camomile broth, Rotocan, or sage broth is cures stains from the sky and mucous cheeks.
6. tubs with bran - for 10 minutes, temperature - 35 degrees on Celsius - are removed by a peeling.
7. decoction from grasses - Elecampane, a Camomile, Mother-and-stepmother, a Calendula, Lungwort, Thyme, an Elder.

Harmful products - fat, firm, fried food, spices, a horse-radish, mustard, pepper (especially red). These products irritate mucous a stomach and an intestines, it is better not to apply them during illness.

Measles Treatment and Complications on Inoculations

Medicamentous therapy apply depending on expressiveness of symptoms of illness, and also from presence and character of complications. In quality Etiotropic therapy can recommend - RNK-za (an irrigation of mucous membranes of an oral cavity, instillation in a nose and eyes, in heavy cases - intramuscularly), recombinant Interferons (Viferon, Reaferon, Realdiron, Interlok). At children till 7 years - Viferon - specific treatment.

Viferon-1 - On 2 candles in day in back pass - 5 days. A throat - p-p Lugol's - to grease a pharynx. After 7 years - accept Viferon-2. Granulations on a back wall drinks to grease 5 days. From all inoculations in weight the child starts to lose, and it is dangerous, as well as illness. Adults too can apply this preparation!

At purulent conjunctivitis dig in 20% a solution Sulphacyl sodium; at serous or mucous excreta from a nose use children's Naphtizin, Galozolin, Pharial; at purulent excreta from a nose - pawn ointments with antibiotics. To struggle against cough apply Tussin, Libexin, Bromgexin, Bronchicum, Gelomirtol, mixture with Altea a root, Pertussin. Antibiotics at not complicated measles do not appoint. To children of early age who are often ill, with various chronic processes antibiotics recommend to appoint already at suspicion to complication of the bacterial nature, and to children of advanced age - after revealing of first signs of complication. The antibiotic choice is defined by sensitivity of the allocated flora. Choice preparations is Penicillin, Rulid, Chefotaxim, Oxacyllin.

In heavy cases of a croup are used Corticosteroids, that is undesirable! Corticosteroids often gives infection relapses.

Ribavirin has shown the efficiency in vitro. The author applied Ribavirin at adults with positive results! For preventive maintenance and treatment the big doses of vitamin A can be used.

Medicinal grasses is the operating and checked up method of treatment. Here some recipes which will help to get rid of measles.

Method 1. To prepare means it is necessary to take 2 table spoons of berries of a dogrose, a table spoon of leaves of a nettle and also a table spoon of roots of a dandelion. 500 ml of hot water are necessary to mix and fill in all components. Means should be insisted about one days then he needs to be filtered and added a little bit honey. To accept broth on 3 times a day on 2 table spoons.

Treatment by Multicomponent Mixes of Grasses

Method 1. To prepare broth, to you it is necessary table spoon of a dogrose and table spoon of a black currant to fill in 500 ml of hot water. It is necessary to allow for raw materials to be insisted time, somewhere about 50 minutes then means is necessary for filtering and then to accept throughout all day.

Method 2. For treatment it is necessary to take a table spoon of berries of a cowberry and as much dogrose berries. All it is necessary to fill in 400 ml of hot water, to insist on an extent of 50 minutes and to accept throughout all day.

Method 3. As a way of struggle against measles it is possible to use gathering from cowberry and grass berries Hypericum. For preparation it is necessary to take on a table spoon of each component and to fill in with three glasses of hot water then it is necessary to give to means time will be insisted, somewhere hour. To accept 4 times a day on half of glass.

Method 4. To prepare infusion it is necessary to take a table spoon of a grass mother-and-stepmother, 2 table spoons of lime colour, and also to add honey to taste. 500 ml of hot water are necessary to fill in the given mix, to insist about an hour and to finish to boiling on small fire. Then means needs to be decanted and accepted on two glasses before a dream.

Attention! Any synthetic vitamins in illness!

Not complicated forms treat in-home is more often. Hospitalise patients with the heavy and complicated forms, and also under epidemiological indications. Duration of a confinement to bed depends on degree of an intoxication and its duration. A special diet it is not required.

With an intoxication struggle appointment of a considerable quantity of a liquid. Spend care of an oral cavity and eyes. Exclude irritating influence of direct solar and bright artificial light.

There are messages on positive effect of Interferon (Leykinferon) at appointment in early terms of illness the adult. In some cases, at the heavy and complicated current of measles, probably, a prescription of antibiotics, but it is necessary to define presence of bacterial microflora in the Center of hygiene and its sensitivity to antibiotics.

To children weakened, early age and at heavy forms of measles it is recommended to enter an antibody the normal human donor.

Passive immunization is spent by an antibody to human normal donor contact children at the age from 3 months till 2 years, not ill with measles and not imparted against measles. To children of advanced age an antibody enter under indications - weakened, reconvalescences's. Optimum terms of introduction of an antibody - not later than 5th day from the moment of contact to the patient.

For seropreventive measles contact it is recommended to enter a specific Antibody - 1, 5 ml (children of early age) or 3, 0 ml (children of advanced age). Passive immunity remains within 30 days.

Differential diagnostics. In catarrhal the period the greatest difficulties arise at carrying out of the differential diagnosis with acute respiratory viral infection (adenovirus, a flu, a paraflu, etc.), in some cases a whooping cough and a parawhooping cough, the milkwoman. The infection which is characterised by cough, a cold, conjunctivitis, a syndrome of an intoxication and a fever has the greatest similarity adenovirus. However at acute respiratory viral infection, unlike measles, catarrhal the phenomena develop with less natural sequence - more quickly, sharply; conjunctivitis it is observed irregularly and it is not accompanied infiltration a century and a photophobia. The intoxication phenomena develop also more quickly - for 1-2nd day of illness. Crucial importance has survey of mucous membranes of an oral cavity: at acute respiratory viral infection throughout all illness they remain pure, light pink and only occasionally in the soft sky it is possible to find out enanthema's. The milkwoman is characterised by occurrence on a mucous membrane Cheeks, the soft and firm sky, language of the whitish large sizes of imposings which easily act in film. Children do not have intoxication, a fever, catarrhal a syndrome. To the period rash the differential diagnosis spend with Rubella's, a scarlet fever, enterovirus an infection, meningococcemia's, allergic rashes, in some cases with a pseudo-tuberculosis, Stevens-Johnson's syndrome and syndrome Layela.

Stevens-Johnson's syndrome begins sharply with rise in temperature of a body till 39-40 ° C and above, cough, a cold, vomiting, refusal of meal, a pain in eyes is observed. The expressed and deep defeat of a mucous membrane of a mouth and conjunctives (bubbles, sores, sites necroz's) is characteristic. Nekrotic defeats are often observed in the field of an urethra, anal apertures, genitals. The rash appears in 4-6 days from the fever beginning, with primary localisation in the field of a back surface of brushes, feet; staging in rash distribution is absent. In some hours after rash occurrence on its place bubbles of various size with muddy or transparent contents are formed. Syndrome Layela is characterised by the sharp beginning, fast lifting of a body temperature to febril the figures, the expressed syndrome of an intoxication, early defeat of a skin. The rash eritematoz-papulez, appears on the person, a breast, a back and gradually goes down downwards, feigning этапное rash, characteristic for measles. However further there is a merge of elements of a rash to fast development of large bubbles. Bubbles with thin walls (a flabby wrinkled surface, seroz-gemorragich contents) after which rupture appear extensive becoming wet eroded surfaces. At patients with syndrome Layela defeat of mucous membranes is observed not often, basically, at forms with heavy total defeat of a skin and is characterised by formation of bubbles (with the subsequent them ulceration).

Attention! At measles encephalitis doctors apply the big doses Prednizolon under cover of antibacterial preparations (the incompatible treatment giving complications and relapses)!

Attention! But my opinion - needs to be entered Immunomodulations (to do Immunogramms in dynamics for competent selection Immunomodulations) and antivirus preparations - to do analyses on DNA of viruses (the note of the author).

Measles preventive maintenance: Passive Immunopreventive spend introduction anti-measles of the Antibody.

Measures of the help of the house.

1. wrap the child in a red fabric (on the sun to be it is impossible!)
2. give to drink red colour drink (a cranberry berry juice)

Secondary Preventive Maintenance

1. ANTIBIOTICS (for elimination of bacterial complications)
2. A food - fruit (sea-buckthorn berries), vegetables (cabbage Bruxelles, a broccoli), dairy products.
3. Vitamins - A, C and E (natural) - these products alkalize an organism also help to struggle with illness. Other vitamins not to apply!
4. Buckwheat a sowing campaign - action for the account glicozid routine - the powder, tablets, but is better grass broth Buckwheat, fruits Buckwheat. Infusion from flowers - at a bronchitis and a pneumonia. Leaves and flowers are used as wound healing means.

5. Eucalyptus (decoction inside, Sanorin in nasal drops only, but not spray - in it is not Eucalyptus) and Echinacea (decoction inside).

6. Fir oil.

Attention! At children in disease such condition, as anergy (immunity decrease) develops.

Measles at Adults

The clinical picture of measles is typical and a little than differs from that at children. However clinical supervision have shown, that the heavy form of measles as well as metilirovanne the measles, at adults meet more often, than at children. Early revealing, timely isolation has great value, and at necessity and hospitalisation of patients.

Measles, as well as many infectious diseases, proceed cyclically. The incubatory period proceeds in most cases 9-11 days. The illness beginning is characterised by occurrence of symptoms initial catarrhal the period.

In catarrhal stages the measles diagnosis is based on presence of a typical complex of the phenomena: a fever (till 38-39°C), conjunctivitis with lacrimation and a photophobia, puffiness persons, spotty enanthema on a sky mucous membrane, detection of stains Filatova-Koplika. More often these rash are found out on a mucous internal surface of cheeks, is direct against small molars; to see a little bit more rare than them it is possible on a mucous membrane of gums and is even more rare - lips. Stains (rash) have no propensity to merge and do not act in film a tampon.

Correctly collected epidemiological anamnesis helps with early diagnostics of measles also. Sick measles it is most infectious in initial catarrhal the period, therefore at interrogation it is necessary to find out, is not present and whether was in an environment of sick persons with catarrhal the phenomena. An infection source also can be sick metilirovanne and consequently not diagnosed measles.

Depending on weight of a clinical current distinguish (both at adults, and at children) the easy, sredne-heavy and heavy form of measles. In typical cases in stages rash the diagnosis of measles does not represent difficulties. Medical sister should know about staging rash (in the beginning the person, a neck, a breast, then a trunk and finitenesses), terms of occurrence of a rash (4-6th day), character (it is spotty-papulez the elements having propensity to merge) and duration rash (a rash keep 3 days, for 4 days its elements turn pale, and begins the pigmentation period). Diagnostic errors in the period rash happen at an atypical current (metilirovanne a measles, a measles to a malignant current - hypertoxic, haemorrhag) is more often.

Metilirovanne the measles are observed at the persons who received anti-measles Gamma globulin or, on occasion, at imparted, but have lost imparted immunity. Disease is characterised easy catarrhal by the phenomena, stains Filatov's can be absent, the temperature normal or low-grade, is not enough rash, it pale.

The Haemorrhagich form differs a heavy general intoxication and is accompanied by the phenomena haemorrhag a diathesis: plural hemorrhages in a skin, mucous membranes, a bloody chair, hematuria. This form can quickly end with a lethal outcome.

The hypertoxic form of measles is characterised hypertermia's, a toxicosis, sharp cardiovascular insufficiency, meningo-encephalitis by the phenomena.

From the complications of measles demanding special tactics, it is necessary to note the most frequent - a bronchitis, a pneumonia, a false croup (sharp measles laryngo-tracheitis with breath frustration). Otitises, eustacheitis, a sinusitis, pyelonephritis, quinsy which to a thicket appear in the pigmentation period can be observed long conjunctivitis, keratitis, and also.

The heaviest and often terrible complication of measles are meningo-entsephalit and a serous meningitis.

Against, apparently, typical current of measles appear brainwave symptoms - a sharp headache, vomiting, impellent excitation, confusion and consciousness frustration, meningeal signs (rigidity nape muscles, positive symptoms Kernig's, Brudzinsky). It is noticed, that, the during earlier period there is meningeal a semiology, the the disease current is heavier.

From Clinical Supervision (Medical Errors)

The patient of M. of 17 years, has arrived for 7th day of illness. Was ill sharply: cough, a cold, temperature to 39°C. The next days the condition did not improve. For 4th day on a face skin there was a plentiful is spotty-papulez a rash which has extended next two days on a trunk and finiteness. For 3rd day rash the condition has sharply worsened: an intensive headache, vomiting, short-term loss of consciousness. The patient is hospitalised. At receipt a condition heavy. On a skin typical measles a rash. Consciousness confused, expressed meningeal a syndrome. In 5 hours after receipt the patient without consciousness, periodic impellent excitation and the general tonik-klonich spasms. At a puncture cytoz small - 37 cages in 1 mm (лимфоцитов 86%), fiber is raised. Further in the subsequent three days the condition remains very heavy. Has joined right-hand hemiparez, involuntary urination. The patient was spent desintoxication (a Наемомisinformation, Reopolyglucin, a physiological solution), dehydration (Lazix, Magnesia), anti-inflammatory (Prednizolon) therapy. For 4 days of treatment in a hospital.

The patient has come to consciousness, in the subsequent the condition gradually improved. It is written out for 30th day from the receipt moment in clinic in a satisfactory condition. At catamnestic supervision in 6 months and 1 year of the complaint to periodic headaches. The neurologic status without a pathology.

Patient T, 18 years. Was ill sharply: a heat, cough, a cold. For 4th day of illness on the person there was a rash. The same day by the evening it is hospitalised. At receipt on a face skin and trunks typical measles a rash, on mucous a mouth not numerous stains Koplika's. For 2nd day of stay in a hospital the condition of the patient has sharply worsened: a strong headache, vomiting, meningeal symptoms. At a puncture small cytoz for the account лимфоцитов (39 cages in 1 mm), fiber slight increase. Corresponding pathogenetic therapy is appointed. However the condition did not improve: the patient has lost consciousness, there were spasms, impellent excitation, there was a respiratory standstill, the patient is translated on operated hardware breath. Intensive therapy was spent: desintoxication, dehydration, anti-inflammatory, anticonvulsant. The next days the condition did not change.

The patient remained without consciousness, independent breath was not restored. The bilateral pneumonia has developed. Despite spent therapy, for 12th day from the beginning rash there has come a lethal outcome. At pathoanatomical research the measles in the pigmentation period, meningo-encephalitis with the phenomena of a hypostasis and swelling of a brain and impaction it in the big occipital aperture, bilateral focal a pneumonia are ascertained.

In the described supervision meningo-encephalitis at measles has developed during the sharp period rash - the period virology. Such development testifies to possible direct action measles a virus on a nervous fabric. Concerning development meningo-encephalitis at measles many researchers, dealing with this problem adhere to the similar point of view also. Complications as a result not true treatment.

In some cases the measles should be differentiated with Rubella's, a scarlet fever, a flu and others acute respiratory infection (ARI), meningococemia's, infectious mononucleoz's, medicinal rashes and other diseases.

Treatment of patients with not complicated measles can be spent in house conditions. A heavy current, complications demand therapy in infectious hospitals. Hospitalise sick of measles as well on epidemiological indications (barracks, hostels etc.).

Etiotropic measles treatment is!

Противокоревой Gamma globulin is effective at introduction in first half of incubatory period.

Treatment of not complicated measles is a struggle against measles virus, against an intoxication and inflammatory changes of respiratory ways and eyes. The forecast at measles, at not complicated current, favorable. At development encephalitis - always serious. The rest Etiotropic treatment - look under the text.

The medical sister working on a site, should carry out routine inspection of the persons who had contact with measles by patients, to observe of the patients, treated is out-patient. On cases of deterioration of a condition immediately to inform the attending physician and the Clinical Pharmacist.

The Conclusions

1. Measles flashes develop from vaccines, instead of from the infection, therefore it is necessary to have a healthy organism and strong immunity not to be ill with measles.
2. The heaviest complications happen only from vaccines, instead of from the measles.
3. If the child or the adult were ill, that is alternative treatment (look under the text).
4. It is necessary to do Immunogrammas and to select Immunomodulations for treatment, as measles, and for preventive maintenance and treatment of complications.

5. It is necessary to introduce Etiotropic measles therapy in medical practice.
6. Doctors it to understand a pathology going from vaccines and from medicines, - by means of Clinical Pharmacists.

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