

# Lipid peroxidation in patients with various forms of brucellosis

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**Objective:** To identify the clinical and pathogenetic significance of the activation of lipid peroxidation processes in brucellosis.

**Materials and methods:** There were examined 235 patients with brucellosis at age of 15 to 72 years. The content of primary products of lipid peroxidation in the blood serum of patients with acute, subacute and chronic brucellosis was studied.

**Results:** It was established that in all groups of patients with brucellosis, a moderate excess of the concentration of malonic dialdehyde in the serum of the blood of patients with brucellosis was observed at the 2nd week of the disease, followed by a decrease at the 3rd week. Maximum concentrations of malonic dialdehyde were observed in patients with acute brucellosis during all periods of the disease compared with patients with subacute and chronic brucellosis.

**Consequently:** It has been established that the determination of only primary products of lipid peroxidation in the blood serum of patients with brucellosis does not allow to fully controlling the course of lipid peroxidation. It is advisable to evaluate the intensity of lipid peroxidation in a complex, taking into account the accumulation of the final degradation products of hydroperoxides in the blood serum.

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**B**rucellosis - for a long time continues to be a topical health problem in a number of southern regions of Russia, including taxiways [1, 4, 12]. Despite the relatively well-studied brucellosis, the reasons for its chronicity, immuno-pathogenesis, patterns of evolution and other aspects of the disease cannot be fully understood [4, 10, 12]. Evidence of this is intensive research conducted in this area until recently in our country and abroad [1, 3].

An infectious-immunogenetic concept of the pathogenesis of infectious diseases was put forward, based on the assumption that the nature of the infectious process and its outcome are determined, along with the conditions of infection, by a genetically determined type of

interaction between the aggressors of the microorganism of the pathogen and the immunological systems. Microorganism homeostasis. Because of this, the development of methods and means of identifying and correcting defects of the human immune system becomes a priority [5, 7].

However, information on the immunopathogenesis of brucellosis is often contradictory, and interpretations are different, as are the ideas about the role of immunity factors in the pathogenesis of this disease.

In recent years, researchers have paid much attention to the clinical and pathogenetic significance of the activation of lipid peroxida-

tion (LPO) processes in various diseases [4, 8, 9, 11].

**Objective:** to study the clinical and pathogenetic significance of the activation of lipid peroxidation processes in brucellosis and the accumulation in this connection of lipid peroxides, which are nonspecific toxic agents.

### Material and methods

Under the supervision there were 235 patients aged from 15 to 72 years. The course of lipid peroxidation (LPO) in patients with brucellosis was judged by determining in the serum of the primary products of lipid peroxidation on malonic dialdehyde, which is one of the final products of this process. The content of primary lipid peroxidation products in the serum of

patients with acute, subacute and chronic brucellosis was determined at the 1st, 2nd and 3rd weeks of the survey [2, 6].

### Results

The obtained results confirm that the maximum concentrations of primary lipid peroxidation (LPO) products are observed on the 1st week of the survey, i.e. in the acute period or in the period of exacerbation of subacute and chronic brucellosis. At the 2nd and 3rd weeks of the disease, in all groups of patients, there was a significant decrease in the content of primary lipid peroxidation products in the blood serum of patients compared with the 1st week of the disease (Table 1).

**Table 1.** The content of primary lipid peroxidation products in the serum of patients with various forms of brucellosis ( $M \pm m$ )

| Stage of the process   | Number of patients | Phase       | Days of examination |         |         |
|------------------------|--------------------|-------------|---------------------|---------|---------|
|                        |                    |             | 1-7                 | 8-14    | 15-22   |
| Acute brucellosis      | 24                 | Heptane     | 2.4±0,2*            | 1,6±0,3 | 1,5±0,3 |
|                        |                    | Isopropanol | 3,6±0,3*            | 2,3±0,3 | 2,3±0,3 |
| Subacute Brucellosis   | 28                 | Heptane     | 2,3±0,3*            | 1,4±0,2 | 1,3±0,3 |
|                        |                    | Isopropanol | 3,3±0,2*            | 2,4±0,3 | 2,3±0,3 |
| Chronic brucellosis    | 34                 | Heptane     | 2,0±0,3*            | 1,2±0,3 | 1,2±0,2 |
|                        |                    | Isopropanol | 2,9±0,2*            | 1,9±0,3 | 1,8±0,3 |
| Control group (donors) | 30                 | Heptane     | 1,0±0,1             | -       | -       |
|                        |                    | Isopropanol | 2,1±0,2             | -       | -       |

Note: \* - the differences are significant when comparing indicators with the 2nd and 3rd weeks of the survey.

One of the final decomposition products of hydroperoxides is malonic dialdehyde. In all groups of patients with brucellosis, a moderate excess of the concentration of malonic dialdehyde in the serum of patients with brucellosis was noted at the 2nd week of illness, followed

by a decrease at the 3rd week. Maximum concentrations of malonic dialdehyde were observed in patients with acute brucellosis during all periods of the disease compared with patients with subacute and chronic brucellosis (Table 2).

**Table 2.** The content of MDA in the serum of patients with various forms of brucellosis ( $M \pm m$ )

| Stage of the process | Number of patients | Days of examination |          |         |
|----------------------|--------------------|---------------------|----------|---------|
|                      |                    | 1-7                 | 8-14     | 15-22   |
| Acute brucellosis    | 24                 | 3,4±0,2             | 3,6±0,3  | 2,8±0,3 |
| Subacute Brucellosis | 28                 | 2,9±0,2             | 3,,0±0,3 | 2,6±0,3 |
| Chronic brucellosis  | 34                 | 2,7±0,3             | 3,1±0,3  | 2,0±0,2 |
| Control group        | 30                 | 1,5±0,1             | -        | 1,8±0,3 |

### Findings

1. The determination of only the primary products of lipid peroxidation (LPO) in the serum of patients with brucellosis does not allow to fully controlling the course of lipid peroxidation.
2. Evaluate the intensity of the lipid peroxidation in the complex, taking into account the ac-

cumulation in the serum of the final decay products of hydroperoxides.

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