Objective: To study the clinico-epidemiologichni features of pertussis in children with incomplete obsyazi population vaktsynatsiёyu planned. Material and method. To achieve this goal evaluated epidemiogicheskoy situation pertussis and studied the clinical course of the disease in 296 children aged 1mes. up to 14 years (data from the annual reports for the period 1987-2012 biennium). Additional research methods included: complete blood count, chest X-ray of the chest, enzyme-linked immunosorbent assay (ELISA), PCR and bacteriological method. Evaluation of immune status was conducted on the basis of a comprehensive study of potential indicators of total body jet by studying qualitative - quantitative characteristics hemogram. Statistical analysis of data was carried out using packet analysis program Microsoft Excel-2003.

The Results. In the Donetsk region as a whole in Ukraine, there was a tendency to reduce the incidence of whooping cough (figure 12.4 - 1.5 100 tys.naseleniya) with periodic ups and downs every 2-3 years. 2011 marks another rise in the incidence of pertussis infection - the incidence exceeded the previous year 3 times and national figure - 1.5 times (2.9 per 100 thousand. Population). Increase in the incidence was observed in each of the second administrative territory; for some of them it has increased 10-18 times compared to the previous year. Worsening epidemic occurred against a backdrop of incomplete coverage of routine vaccination due to the insufficient supply of vaccines Donetsk region in the past 3 years - 77% (2009), 51% (2010) and 56% (2011). The most endangered age group for whooping cough are still children first year of life (index 132.1 per 100 thousand. Population) who were not subject to vaccination by age or have not received the full course of vaccination, as well as children grupy risk aged 5-9 years (figure 46.8 per 100 thousand. population) teenagers (figure 1.42 100 tys.naseleniya).

Changing the epidemic situation has had an impact on the nature of the clinical course of pertussis - increase in the number of severe - unvaccinated children accounted for 84%, and recorded manifest forms of the disease (in the foci of infection 85 - 92%).
Conclusions. Stabilization of the epidemiological situation of pertussis has contributed a number of preventive measures: a) the development of legislation to improve the system of epidemiological surveillance; b) monitoring of changes in the landscape serotypes of the pathogen; c) improvement of laboratory diagnosis of diseases through the introduction of modern methods of research; g) Annual sufficient supply regions pertussis vaccine in accordance with the requests; d) timely and complete vaccination coverage according to the annual plan of immunization; e) professional training of primary health care practice. Prevent involvement in the epidemic process of young children and students is possible by maintaining the stability of high immunization coverage of children in terms decreed by using an effective vaccine availability of affordable and informative methods for assessing immunity and reliable bacteriological diagnosis of pertussis. Currently, along with increased coverage of routine vaccination, particularly important oversight of the infection, allowing time to carry out anti-epidemic measures in the form of early diagnosis of pertussis in contact children. In modern conditions in vaccinated and unvaccinated children against pertussis retains the classic symptoms of the disease, but there are differences in the severity of pertussis in children with poor premorbid background. Diagnosis of pertussis, especially among children in the first year of life, remains a challenge for practical public health.