

THE USE OF ANTIBODY-COATED BACTERIA IMMUNOLOGICAL TEST IN THE DIAGNOSIS OF INFLAMMATORY PROCESSES IN THE KIDNEYS AND URINARY TRACT

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ABSTRACT

Introduction. Bacteriological investigation of urine presents a summary indication of inflammatory processes components. Some authors describe the presence of immuno-inflammatory phenomena in the urinary system that allow their staged detection.

Objective. Presents an interest the interaction of immunological tandem formed by the immunity of the renal parenchyma (imposed by germs) and bacteria detected in the urinary tract. **Methods.** The urine of 32 patients (19 women, 13 men) who were treated in the urology clinic with various inflammatory processes was investigated. Pyuria was present in most cases. The bacteriological examination allowed the detection of more than 1000 bacterial germs in 1 ml of examined urine. The immunological urine investigation was performed by Shestakova V.P. (2015) method.

In order to determine the antibody-coated bacteria (ACB), the freshly harvested urine was centrifugated. Inactive suspension of staphylococci from the Cowan-1 strain, which contain Protein A antiglobulin in their coat, was added to 1 ml of centrifuged. **Results.** If agglutination occurs, the test is considered positive. Bacteria contain fixed antibodies (pyelonephritis). The lack of agglutination and therefore of ACB indicates the presence/absence of an inflammatory process in the lower urinary tract (LUT). **Conclusions.** The lack of ACB even when pyuria is present indicates a location of the infection in LUT. Only the presence of the positive agglutination process expressed by the bacteria covered with antibodies shows the inflammatory process in the kidneys. Renal parenchyma is a stronger immune substrate than LUT immunity.