

## Opportunities of a Complex of Beam Diagnostics Purulent Processes in Patients with a Terminal Stage of HIV Infection

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### Abstract

This study focuses on identifying opportunities highly informative computed tomography and MRI techniques to identify local surgical pathology and peculiarities of its course in 32 patients with end-stage HIV infection (man – 24 (75 %), women – 8 (25 %)). These include the prolonged formation of capsules ulcers, protracted disease, priorguest, multiple lesions, the propensity to recurrence. All patients underwent multispiral computed tomography (MSCT) of chest and abdominal cavity on Toshiba Aquilion 64 (Japan) according to the traditional method with bolus three-phase enhancement. Magnetic resonance imaging (MRI) of the abdominal cavity was performed in 12 patients at Siemens 1,5 T Magnetom Essenza (Germany) with bolus contrast enhancement, 5 of which with hepatopathies drug primovist. Hepatopathies phase received through 25–70 min after injection, depending on the degree of liver failure or presence of hyperbilirubinemia. Our research has shown the need to use MSCT all AIDS patients not only with suspicion surgical pathology of the chest and abdomen, but also as an active search of this pathology. Magnetic resonance imaging with bolus contrasting strengthening hi-tech to diagnose small abscesses of the pancreas, as well as with hepatopathies drug for the choice of surgical tactics in treatment of abscesses of the liver with the presence of hepatobiliary and podepsaly fistula.

**Key words:** HIV Infection, Local Surgical Pathology, Capsule, Protracted Relapsing Course, Abscess, Empyema, Pancreonecrosis.

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