

Pathogenetic risk factors causing acute laryngotracheitis

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Abstract: Laryngotracheitis is a complex lesion of the respiratory tract, an acute or chronic disease of the respiratory tract. The pathological process is characterized by inflammation of the trachea and larynx, combined with injury. The disease is infectious in nature. Depending on the clinical condition, it is caused by bacteria, viruses or several agents at the same time (in this case, the pathological condition is slightly more severe). Violation is dangerous for health, and in some cases for the patient's life. It is fraught with many complications. Therefore, the disease cannot be ignored. Diagnosis and treatment of the pathological process, laryngotracheitis, the work of an otorhinolaryngologist. Conservative therapy is carried out. Usually outpatient. In rare cases, surgical treatment is required, but this is an extreme and very small measure of helping the disease.

Key words: Ear, nose and throat diseases, Diagnosis, Treatment, Prognosis, Prevention.

Causes of the development of laryngotracheitis

The causes of laryngotracheitis are complex. Depending on the nature of the pathological condition, there is an infectious lesion of one or another origin. A weakened and insufficiently functional immunity of the patient also plays a negative role. It also includes the so-called risk factors that create an additional possibility of the development of the inflammatory process in the respiratory tract. Assessment of the causes is important to determine a competent and quality course of treatment. A doctor must work with reasons. He prescribes treatment and prescribes preventive measures to prevent recurrence of the disease.

Pathogenesis of the disease

The basis of the disease is inflammation of the trachea and larynx of an infectious nature, as well as a decrease in local and general immunity. These two factors play a key role in the pathogenesis of the disorder. Inflammation is caused by bacteria or viruses. Among bacterial agents, the following pathogens play the most important role:

staphylococci (primarily *Staphylococcus aureus*);

streptococci (as an equally dangerous and widespread representative of the pyogenic flora group);

pneumococcus (slightly less common).

Pathogens are often representatives of specific flora. Agents that cause sexually transmitted diseases: mycoplasmas, chlamydia, syphilitic spirochetes. *Mycobacterium tuberculosis* can also be affected. Such forms of the disease are undoubtedly more severe and can cause complications. Fortunately, they do not develop as often as others. Such clinical cases are rare.

Another group is viral agents. The provocateurs of the pathological process are:

herpes viruses, several strains (including Varicella-Zoster, this strain causes chickenpox);

influenza viruses;

parainfluenza viruses;

measles and rubella viruses;

other infectious agents located in the respiratory tract.

Against the background of damage to the trachea and larynx, the inflammatory process is a normal reaction of the body to a foreign structure. However, in some cases, the natural response to infection is insufficient. This happens when local and general immunity decreases. A similar phenomenon occurs in every fifth patient. Some social groups have more people with insufficient immune systems.

In the broad sense of the word, the reasons for the development of immunodeficiency can be very different. Among them:

inflammatory processes of a chronic nature affecting the oropharynx, oral cavity and other infections;

History of HIV virus, as well as the active form of the disease, immunodeficiency (AIDS);

previous operations;

strong negative impact on the patient's body (including low temperatures, overheating of the body, contact with sick people and other options).

Increased risk factors

Inflammation of the respiratory tract occurs in response to the influence of a group of factors that create an additional possibility of a pathological condition. These factors include:

infections of the oral cavity, pharynx (tonsillitis, caries, regular stomatitis and other pathological conditions);

pharyngitis is one of the most important risk factors for the development of laryngotracheitis;

immune system disorder, regardless of the origin of the disorder;

the use of hormonal drugs that potentially reduce the intensity of the patient's body's defenses;

chronic respiratory diseases, including bronchitis, pneumonia, bronchial asthma and other options;

metabolic diseases such as diabetes;

any hormonal imbalance due to natural or endocrine pathology;

other somatic diseases, damage to the body and its systems;

Diseases of the ENT organs.

Risk factors can be adjusted as part of quality prevention. By eliminating at least some of them, the patient has the opportunity to significantly reduce the likelihood of developing laryngotracheitis.

Classification and forms of laryngotracheitis

It can be classified according to the nature of the course of the disease. There are acute, subacute variants and a chronic form of the pathological process.

Acute laryngotracheitis develops in 1-2 days or sooner. It is accompanied by a bright clinical picture with a complex of local and general manifestations. Requires urgent medical attention as soon as possible. The subacute form develops rather slowly. In addition, there is a cut clinical appearance. In the chronic form, the disease occurs with alternating periods of exacerbation and remission. In remission, there are no symptoms or they are few and very few. Almost invisible. Complete treatment of chronic laryngotracheitis is almost impossible. Help is symptomatic.

Laryngotracheitis is always contagious. There are several subtypes of the pathological process:

with bacterial laryngotracheitis, the culprit of the disorder is a bacterium, a microorganism (staphylococci, streptococci or other representative of opportunistic or pathogenic flora);

with viral laryngotracheitis, the disease is caused by viruses;

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