Severity Scoring of Atopic Dermatitis (SCORAD) index. The data were analysed, the comparable indexes were calculated and the Pearson correlation coefficient (PCC) between indexes established.

**Results** The age of children ranged from 4 to 18 years with average of 8.4±2.8 years. Of the patients 60% were female. The average score was 12.6±4.5 for DFI, and 28.3±19.8 for SCORAD. The average score for CDLQI in the period of remission of AD is 12.5. In 11.8±3.5% of cases was detected 'very significant' impact of AD to QoL of children, in 24.5±6.4 - 'significant', in 51.2±8.2% 'non significant' and no influence of AD on QL in 10.8±3.6% of patients. The correlation among the scores CDLQI, DFI, and SCORAD was significant by the PCC (p<0.001). The obtained data showed, that the QoL correlated with severity of illness and with type of the allergen-specific sensitivity. A comparison analysis demonstrated that the index of QoL in 65.6±6.0% of parents was lower than that of their children.

**Conclusion** AD affects the QoL of both children and their parents and indicates the importance of including the study of QoL as a complement to clinical evaluation. Children with AD, even in remission is defined by a low overall QoL with a greater degree of suffering psychological sphere, appearing difficulties socialization of the child and maintain the desired lifestyle. Educational and psychological support for patients and their families in addition to medical treatment of AD may improve their long-term physical outcomes.

**P20**

**RELATIONSHIP OF VEGETATIVE STATUS AND CONTROL OF ASTHMA IN CHILDREN**

Elena Tush, Tatjana Eliseeva, Ilya Bulgakov, Olga Khaletskaya, Andrew Prakhov, Pirogov Russian Research Medical University, Nizhny Novgorod, Russian Federation; National Medical Research Center of Children’s Health, Moscow, Russian Federation; Central Clinical Hospital, Russian Academy of Sciences, Moscow, Russian Federation; Russian National Research Medical University, Moscow, Russian Federation

**Background** Violation of vegetative regulation (VR) is a component of the pathogenesis of bronchial asthma (BA) which is confirmed by the abundance of vegetotropic drugs used in the treatment of these patients. Assessment of autonomic function in the management of patients with asthma in routine clinical practice is not provided. However, the state of VR in patients with asthma continues to be of interest to researchers, especially in the aspect of the relationship of VR parameters with the parameters of control of asthma.

**Aims** Determine the relationship of VR parameters with the parameters of asthma control level in children using methods available in a wide clinical practice.

**Method** 88 patients (54 boys and 34 girls) aged 5 to 17 years with atopic bronchial asthma were examined. Quantitative assessment of bronchial asthma control was carried out using questionnaires Asthma Control Questionnaire-5 (ACQ-5), Childhood Asthma control test (ACT-C) in children under 12 years old, and Asthma control test (ACT) in children and adolescents aged 12 years and older. All children underwent a standard examination with determination of blood pressure, pulse, respiratory rate, with the calculation of Kerdö and Hildebrandt indices, characterizing vegetative regulation. Taking into account the age-dependent changes in heart rate, we used for the first time a relative heart rate index equal to the ratio of the patient’s heart rate to the median heart rate for this age group.