The aim of the present work was to investigate the clinical effectiveness of Lymphomyosot and Echinacea compositum in children with infectious mononucleosis (IM).

Clinical-laboratory investigation was conducted in 39 children suffering from IM (ranging from 1 to 15 years of age).

Four groups of observation were chosen:

- **Group No1** – 10 children treated conventionally;
- **Group No2** – 9 children treated with Lymphomyosot in addition to conventional care;
- **Group No3** – 10 children treated with Echinacea compositum in addition to conventional care;
- **Group No4** – 10 children treated with Lymphomyosot and Echinacea compositum in addition to conventional care.

Lymphomyosot was prescribed in a dosage between 8-15 drops 3 times daily, depending on the child’s age. Echinacea compositum was prescribed in a dosage of 1/2 - 1 ampoule (2 ml), i.m., daily.

All groups were comparable with diagnoses (combined forms), disease seriousness (medium seriousness), age and sex. Illness was diagnosed according to clinical epidemiological and laboratory data. Lymphomyosot and Echinacea compositum were prescribed starting on the first day of treatment and given until the end of the treatment (3 weeks later).

The effectiveness of the therapy was evaluated by the dynamics of reduction of clinical symptoms of the disease.

Application of both antihomotoxic preparations Lymphomyosot and Echinacea compositum in the treatment of children with IM led to satisfactory results faster than in the control group.

Antihomotoxic preparations did not have side effects and showed good tolerance while antibiotics and especially desensitizing preparations very often led to deterioration.

Based on the data, it was concluded that the application of Lymphomyosot and Echinacea compositum in the treatment of infectious mononucleosis in children was effective.