Summary

Introduction: In world literature there is a lack of information about the frequency of occurrence of *Chlamydia pneumoniae* in swabs from adenoid vegetations. *Chlamydia spp.* is a group of atypical pathogenic bacteria. Initially, they were considered a cause of lower respiratory tract infections. Nowadays, they are considered as a pathogenic factor of upper respiratory tract infections. They can also cause persistent infection. **Material and methods:** During 3.5 months at the end of winter and beginning of spring, 110 children qualified for adenotonsillectomy (53 girls and 57 boys) were examined. The average age was 6.11 years. **Results:** The positive results of direct immunofluorescence test (IFA) of adenoid vegetations swabs were received in 29 children (26.4%). Received results demonstrate chronic infection with *Chlamydia pneumoniae*. Pneumonia or bronchitis was noted in addition in 3 children (2.7%) in one child pneumonia caused by *C. pneumoniae* was diagnosed, secretory otitis media was diagnosed in 5 children (4.5%), asthma in 3 patients (2.7%). Confirmed infection *Chlamydia pneumoniae* occurred earlier in 5 children (4.5%). **Conclusion:** Results of direct immunofluorescence test (IFA) of adenoid vegetations swabs do not correlate directly with levels of anti-*C. pneumoniae* antibodies in blood. But antibody level could be supplementary to clinical symptoms and and swab result or give us information about infection history in patient.