STUDY OF CHRONIC GASTRODUODENAL PATHOLOGY IN SCHOOL-AGE CHILDREN

Yahudaev Esan Muzdaevich, Associate Professor

Department of Propaedeutics and Polyclinic

Pediatrics of Children's Diseases

Andijan State Medical Institute

Resume,

In recent years, there has been a noticeable increase in interest in pediatric gastroenterology, which is due to the increased attention of specialists from various pediatric fields, such as cardiology, allergology, pulmonology and neurology. This desire is due to the fact that children often exhibit gastrointestinal symptoms against the background of diseases of other organs and systems, and the therapy of most childhood diseases is closely interconnected with the functioning of the gastrointestinal tract.

The frequency of chronic gastrointestinal diseases among children is 300-400‰ of the total number of diseases and ranks second in the structure of childhood morbidity. At the same time, 70-90% of all gastroenterological diseases are chronic gastritis and gastroduodenitis. In addition, in recent years, some characteristic changes in the clinical course of chronic gastroduodenal pathology (CGDP) in children and adolescents have been identified, which differ from traditional concepts. Thus, the study of clinical manifestations of CGDP in this age group becomes an urgent task of modern pediatric gastroenterology.

This article will present the key clinical and endoscopic features of diseases of the gastroduodenal region in children at the current stage of medicine development.

Key words: pancreas, gastroduodenitis, children, clinical and endoscopic examination.

MAKTAB YOSHIDAGI BOLALARDA SURUNKALI GASTRODUODENAL PATOLOGIYANING O'RGANISH

Yahudaev Esan Muzdayevich, dotsent Bolalar kasalliklari propedevtikasi va poliklinik peditriya kafedrasi Andijon davlat tibbiyot instituti

Rezyume,

So'nggi yillarda bolalar gastroenterologiyasi masalalariga qiziqish sezilarli darajada oshdi, bu kardiologiya, allergologiya, pulmonologiya va nevrologiya kabi turli pediatriya sohalari mutaxassislarining e'tiborining ortishi bilan bog'liq. Bu istak, bolalarda boshqa organlar va tizimlarning kasalliklari fonida ko'pincha oshqozon-ichak belgilari namoyon bo'lishi va ko'pchilik bolalar kasalliklarining terapiyasi oshqozon-ichak traktining ishi bilan chambarchas bog'liqligi bilan bog'liq.

Bolalar o'rtasida surunkali oshqozon-ichak kasalliklari bilan kasallanish umumiy kasalliklar sonining 300-400 ‰ ni tashkil qiladi va bolalar kasalliklari tarkibida ikkinchi o'rinda turadi. Bundan tashqari, barcha gastroenterologik kasalliklarning 70-90 foizi surunkali gastrit va gastroduodenit bilan bog'liq. Bundan tashqari, so'nggi yillarda bolalar va o'smirlardagi surunkali gastroduodenal patologiyaning (CGDP) klinik kursida an'anaviy tushunchalardan farq qiladigan ba'zi xarakterli o'zgarishlar aniqlandi.

Shunday qilib, ushbu yosh guruhidagi surunkali gastroenteritning klinik ko'rinishini o'rganish zamonaviy bolalar gastroenterologiyasining dolzarb vazifasiga aylanadi.

Ushbu maqolada tibbiyot rivojlanishining hozirgi bosqichida bolalarda gastroduodenal mintaqa kasalliklarining asosiy klinik va endoskopik xususiyatlari keltirilgan.

Kalit so'zlar: oshqozon osti bezi, gastroduodenit, bolalar, klinik va endoskopik tekshiruv.

ИЗУЧЕНИЕ ХРОНИЧЕСКОЙ ГАСТРОДУОДЕНАЛЬНОЙ ПАТОЛОГИИ У ДЕТЕЙ ШКОЛЬНОГО ВОЗРАСТА

Яхудаев Эсан Муздаевич, доцент
Кафедра пропедевтика детской
болезней и поликлинической педиатрии
Андижанский государственный медицинский институт

Резюме,

В последние годы наблюдается заметный рост интереса к вопросам детской гастроэнтерологии, что обусловлено повышенным вниманием педиатрических областей, специалистов ИЗ различных таких кардиология, аллергология, пульмонология и неврология. Это стремление связано с тем, что у детей часто проявляются гастроэнтерологические симптомы на фоне заболеваний других органов и систем, и терапия заболеваний большинства летских тесно взаимосвязана функционированием желудочно-кишечного тракта.

Частота хронических заболеваний желудочно-кишечного тракта среди детей составляет 300–400‰ от общего числа заболеваний и занимает второе место в структуре детской заболеваемости. При этом 70–90% всех гастроэнтерологических заболеваний относятся к хроническим гастритам и гастродуоденитам. Кроме того, в последние годы были выявлены некоторые характерные изменения в клиническом течении хронической гастродуоденальной патологии (ХГДП) у детей и подростков, которые отличаются от традиционных представлений.

Таким образом, изучение клинических проявлений ХГДП у данной возрастной группы становится актуальной задачей современной детской гастроэнтерологии.

В данной статье будут представлены ключевые клиникоэндоскопические особенности заболеваний гастродуоденальной области у детей на текущем этапе развития медицины.

Ключевые слова: поджелудочная железа, гастродуоденит, дети, клинико-эндоскопическое обследование.

Relevance. The morbidity structure of schoolchildren is characterized by the dominance of pathology of the musculoskeletal system -24%, the second place is occupied by diseases of the digestive system -19%, the third - diseases of the nervous system and mental sphere -14%[1,4]. Chronic diseases of the digestive system occupy a leading place in the structure of chronic somatic pathology in older children[2,5]. Of these, the most common are lesions of the gastroduodenal zone. A significant increase in the prevalence of digestive diseases requires the development of a criteria-based system for evaluating the effectiveness and quality of treatment for this pathology, determining the effectiveness of rehabilitation treatment and medical examination, taking into account the opinion of the doctor and the patient[3,6]. This is exactly what the quality of life assessment methodology allows.

The purpose of the study. To establish patterns of changes in the quality of life in school - age children in order to optimize the design of preventive and curative measures .chronic diseases of the gastroduodenal zone in children.

Research materials and methods. 1,150 people participated in the study. In accordance with the objectives set, the program of this study included a number of sections.

The results of the study. The quality of life, according to the CHQ-87 and SF-36 questionnaires (general health, psychological health, behavior, social functioning), largely depends on lifestyle factors - the duration of a night's sleep, diet, physical activity, and outdoor activities.

Prolonged time spent at the computer and watching TV leads to a decrease in the quality of life on the general health scale to 59.05 ± 1.86 points in children who spend more than 3 hours a day watching TV, versus 63.55 ± 1.16 points in children who spend up to 2 hours a day watching TV (p<0.05), the viability scale is up to 52.25 ± 2.99 points in children who spend more than 3 hours at the computer, versus 60.31 ± 1.63 points when they are at the computer for up to 2 hours a day (p<0.05);

The increase in behavioral and emotional problems was 78.02 ± 1.79 points in children who spent more than 3 hours at the computer, versus 82.95 ± 0.93 , respectively, when they were at the computer for up to 2 hours a day (p<0.05).

The dynamics of quality of life (according to CHQ-87 and SF-36) has age and gender differences: with age, by the age of 14-17, there is a decrease in the quality of life on the scales of psychological health, pain, behavioral and emotional problems increase, self-esteem and family cohesion decrease.

Girls showed a decrease in psychological health scores earlier (by the age of 14) than boys, to 63.86 ± 2.40 points versus 71.59 ± 1.84 points for boys (p<0.05), and family cohesion to 52.73 ± 4.50 points versus 68.53 ± 3.60 points for boys, respectively (p<0.01).

Chronic gastroduodenal pathology in the period of exacerbation has a significant negative impact on the quality of life in the physical and psychological spheres, reduces overall health and limits the possibilities of not only physical, but also social functioning of patients. A comparative assessment of QOL in the opinion of children and their parents revealed a discrepancy between impressions about the effect of gastroduodenal pathology on QOL in the following parameters: general and psychological health, self-esteem, restriction of physical activity, the impact of pain, which must be taken into account when drawing up a treatment and rehabilitation program.

Comprehensive medical, psychological and pedagogical rehabilitation with drug therapy in a rehabilitation center is the most promising form of recovery for children with diseases of the gastroduodenal zone. The combination of transcranial electrical stimulation and drug therapy in the outpatient treatment option increases the clinical effectiveness of the treatment of chronic gastroduodenal diseases in children, has a normalizing effect on the indicators of the psychophysiological status and quality of life of children. H.pylori eradication therapy in children with gastroduodenal diseases negatively affects the quality of life on the scales of general health and vitality, which requires "maintenance" therapy that improves the overall vital functions of the body.

In outpatient settings, the duration of treatment and rehabilitation of children with exacerbation of chronic gastroduodenal pathology, taking into account the restoration of QOL parameters (according to the scales GH-general health, FA-family activity - the degree of restriction of family activity due to the child's health, BE -emotional and behavioral problems, physical and emotional functioning) should be at least 3 months.

Conclusion. The data obtained as a result of the conducted research indicate the prevailing influence of lifestyle on the quality of life related to health, which allows them to be widely used in the structure of preventive measures.

The obtained age-sex values of the QOL parameters of children aged 10-17 years according to CHQ-87 and SF-36 can be the basis for a comparative assessment of the quality of life of children with other diseases when conducting research in different regions.

LIST OF REFERENCES:

- 1. Алымбаев, Э.Ш. Эпидемиологические и клинико-морфологические особенности гастродуоденальной патологии у детей сельских жителей: дис. ...д-ра мед.наук: 14.00.09 / Э.Ш.Алымбаев Бишкек, 2000. 206 с.
- 2. Измайлова О.А., Кику П.Ф., Ярыгина М.В., Ананьев В.Ю., Косолапов А.Б. Гигиенические аспекты распро¬странения экологозависимых заболеваний детей и подростков Приморского края // Гигиена и санитария. 2016. 95(11). С. 1075–1079.

- 3. Ихсанов С. Д., Сергиенко Д. Ф., Деточкин А. Н. Особенности клинического течения язвенной болезни двенадцатиперстной кишки и эрозивных гастродуоденитов у детей. Астраханский медицинский журнал. 2019; 2: 75–81.
- 4. Репецкая М.Н., Бурдина О.М. Современные особенности течения хронического гастродуоденита у детей // Пермский медицинский журнал. 2017. XXXIV-3. С. 19–24.
- 5. Jones N. L., Koletzko S., Goodman K., Bontems P., Cadranel S., Casswall T., et al. Joint ESPGHAN/NASPGHAN guidelines for the management of Helicobacter pylori in children and adolescents (update 2016). J. Pediatr. Gastroenterol. Nutr. 2017; 64: 991–1003.
- 6. Yang L, Zhang J, Xu J, et al. Helicobacter pylori Infection Aggravates Dysbiosis of Gut Microbiome in Children With Gastritis. Front Cell Infect Microbiol. 2019;9:375. Published 2019 Nov 7.
- 7. Sipponen P, Maaroos HI. Chronic gastritis. Scand J Gastroenterol. 2015;50(6):657-667.