



Distribution of parasitic diseases in children by age and gender

Aslonova Marjona
Ramazonovna

Bukhara State Medical Institute named after Abu Ali ibn Sino

ABSTRACT

Helminthiasis is a widespread infectious disease among children and poses a serious threat to children's health. According to the World Health Organization (WHO), parasitic diseases are the third most common infectious disease after coronary heart disease (after diarrhea and tuberculosis). To date, about 350 species of helminths have been proven to be parasitic in the human body. According to many authors, more than 40 species of parasites are carcinogenic to humans and animals.

Helminthoses are chronic parasitic diseases in which all organs and systems are involved in the process. In total, there are more than 250 species of helminths, and about 90 species are found in the CIS countries. In the years of independence, the processes of improving health care in the Republic of Uzbekistan rose to the level of state policy. Nevertheless, there are a number of problems in the field of health care. Among them, one of the important problems is the spread of parasitological diseases among the population, the lack of optimal methods of their early diagnosis and treatment.

Keywords:

Helminthiasis, calcium, enterobiosis, hymenolepidosis, giardiasis, ascariasis.

Introduction.

It is known that helminthiasis is a common infectious disease among children and poses a serious threat to children's health. According to the World Health Organization (WHO), parasitic diseases are the third most common infectious diseases (after diarrhea and tuberculosis) after cardiovascular diseases [2,3,7].

Helminthiasis is one of the most common diseases in Uzbekistan, as well as in other regions, they account for more than 90% of parasitic diseases, and the level of infection of the population has remained stably high for many years [6]. More than 200,000 infected people are registered in the country every year [22]. According to data, 263,167 (3.5%) of 7,580,703 people examined for helminths were infected [8,9,10,11].

The development and expansion of animal husbandry causes an increase in the incidence

of geohelminthosis (ascariasis, trichocephalosis) due to diseases (trichinellosis, teninosis) transmitted by the consumption of meat products of domestic animals, and the popularization of the use of human excrement as biofertilizer in agriculture [13,15,16].

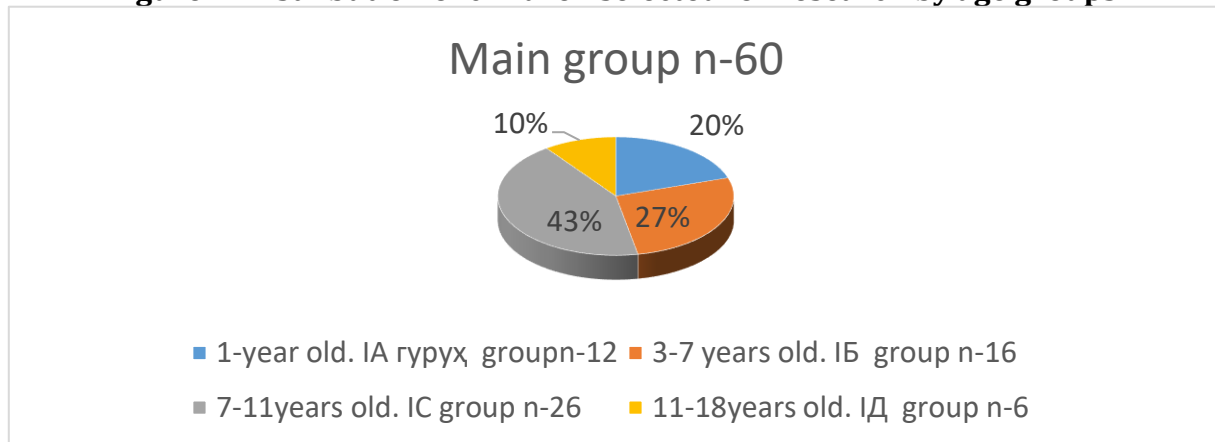
The purpose of scientific research: to determine the distribution of parasitic diseases among children by age and gender.

Material and methods. In the study, we analyzed the observations of 150 children in the Bukhara Regional Hospital of Infectious Diseases, Parasitology Department in 2018-2020. We made the diagnosis on the basis of medical history, epidemiological anamnesis, clinical and laboratory data.

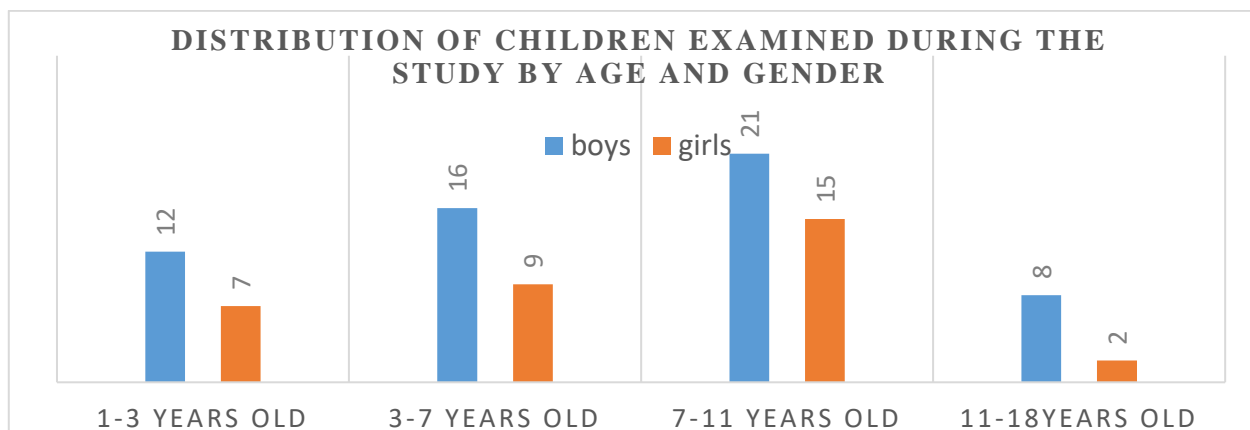
Laboratory diagnosis: we used parasitological, immunological and allergic tests.

A total of 90 children were selected for research. Of these, 60 were selected as the main group, and 30 as the control group

Figure 1. Distribution of children selected for research by age groups.



The children selected for the study were divided into 4 groups according to age groups. There are 12 (20%) children aged 1-3 years, 16 (27%) children aged 3-7 years, 26 (43%) children aged 7-11 years, 6 (10%) children aged 11-18 years. Did



57 (63.3%) of the children selected for the study were boys, 33 (36.7%) were girls. In connection with the above, the prevalence of parasitic diseases among children was studied. Pathological cases of parasitic diseases such as giardia, enterobiosis, geminlipidosis and ascariida among children were found in the analysis. The analysis first examined the prevalence of the main components of parasitic diseases among children.

Determination of the combination of parasitic diseases in children.

Incidence rates of parasitic diseases in 1-3 year old children

Table 1.

Giambliosis, entrobiosis, geminlipidosis n=6	Giambliosis, entrobiosis, n=4	entrobiosis, geminlipidosis n=2	Giambliosis, entrobiosis, geminlipidosis Ascariasis n=0	Total n=12
50% (6)	33.3% (4)	16.6% (2)	-	100 % (12)

Indicators of parasitic diseases of 1-3 year old children were analyzed. Children aged 1-3 made up 12 out of 60 examined children. According to the types of parasites found in children, children were divided into 4 groups.

Type 1 giardiasis, entrobiosis, geminolipidosis in 6 children - 50% of total 12 children.

4 children with type 2 lyambiosis, entrobiosis combined - 33.3% of the total 12 children.

Type 3 Entrobiosis, geminolipidosis in 2 children - 16.6% of the total 12 children.

Type 4 Giambliosis, entrobiosis, geminolipidosis ascariasis combination, children were not identified.

Incidence rates of parasitic diseases in 3-7 year old children

Table 2.

Giambliosis, entrobiosis, geminolipidosis n=12	Giambliosis, geminolipidosis n=2	Giambliosis, entrobiosis, geminolipidosis Ascariasis n=2	Total n=16
75% (12)	12.5% (2)	12.5% (2)	100% (16)

Indicators of parasitic diseases of 3-7 year old children were analyzed. Children aged 3-7 made up 16 out of 60 examined children. According to the types of parasites found in children, children were divided into 3 groups.

Type 1 giardiasis, entrobiosis, geminolipidosis in 12 children - 75% of the total 16 children.

Type 2 giardiasis, 2 children with a combination of geminolipidosis - a total of 16 children It was 12.5%.

Type 3 Giambliosis, entrobiosis, geminolipidosis in a combination of 2 children - 12.5% of the total 16 children.

Incidence rates of parasitic diseases in 7-11 year old children

Table 2.

Giambliosis, entrobiosis, geminolipidosis n=20	Giambliosis, geminolipidosis n=2	Ascariasis, Giambliosis, geminolipidosis n=2	Giambliosis, n=2	Total n=26
78.7% (20)	7.1% (2)	7.1% (2)	7.1% (2)	100% (28)

Indicators of parasitic diseases of children aged 7-11 were analyzed. Children aged 7-11 made up 26 out of 60 examined children. According to the types of parasites found in children, children were divided into 4 groups.

Type 1 giardiasis, enterobiosis, geminolipidosis in 20 children - 78.7% of the total 26 children.

Type 2 giardiasis, geminolipidosis in combination with 2 children - 7.1% of the total 26 children.

Ascariasis type 3, giardiasis, geminolipidosis in 2 children - 7.1% of 26 children.

Type 4 giardiasis occurred alone in 2 children - 7.1% of 26 children.

Incidence rates of parasitic diseases in 11-18 year old children

Table 4.

Giambliosis, entrobiosis, geminolipidosis n=4	Ascariasis, geminolipidosis n=2	Giambliosis,	Total n=6
66.6% (4)	33.3% (2)		100% (6)

Indicators of parasitic diseases of children aged 11-18 were analyzed. Children aged 11-18 made up 6 out of 60 examined children. According to the types of parasites found in children, children were divided into 2 groups.

Type 1 giardiasis, enterobiosis, geminolipidosis in 4 children - 66.6% of the total 6 children.

Type 2 giardiasis, ascarida, geminolipidosis in combination with 2 children - 33.3% of the total 6 children.

Summary.

When we studied the results of the examination conducted in children, the co-occurrence of Giardia, enterobiosis, and geminolipidosis among 1-3-year-old children was a high rate. That is, 6 children with a combination of giardiasis, enterobiosis, geminolipidosis - 50% of the total 12 children. Among children aged 3-7 years, 12 children had a combination of giardiasis, enterobiosis, geminolipidosis - 75% of the total 16 children. Among children aged 7-11 years, 20 children were diagnosed with a combination of giardiasis, enterobiosis, geminolipidosis - 78.7% of the total 26 children. Among 11-18-year-old children, 4 children were diagnosed with a combination of giardiasis, enterobiosis, geminolipidosis - 66.6% of the total 6 children.

References:

1. Oblokulov A R., Aslonova M R. (2022). To indentify the calciological deficiency that occurs against the background of helminthiasis in children// Central Asian journal of medical and natural sciences.-2022.-С. 91-95.
2. Облокулов А.Р., Ниязов Г.Э., Облокулов А.А., Нарзиев Б.И. (1999) Особенности течения лямблиоза у взрослых // Инфекция, иммунитет и фармакология.-С. 151-156.
3. Ibrakhimova N.R., Oblokulov A.R. (2020). Pathogenetic Bases And Prevalens Of Parasitic Infections In Children: Literature Review. The American Journal Of Medical Science And Pharmaceutical Research, 2(10), 87-95.
4. Ибрахимова Х.Р., Облокулов А.Р. (2019). Современный взгляд на распространенность и патогенетические аспекты паразитарных заболеваний у детей. Новый день в медицине. №1(25). –С.30–34.
5. Aslonova.M.R. (2022). CASES OF HYPOVITAMINOSIS ON THE BACKGROUND OF HELMINTHIASIS // International scientific research journal. - 2022. – P. 305-312.
6. Аслонова.М.Р. (2022). Болаларда паразитар касалликлар фонида кальций тишмовчилигини аниқлаш // ТИББИЁТДА ЯНГИ КУН.-2022-С.147-152.
7. Esteban-Pretel G., Marin M.P., Renau-Piqueras J., Barber T., Timoneda J. Vitamin A deficiency alters rat lung alveolar basement membrane: Reversibility by retinoic acid. J. Nutr. Biochem. 2010. vol. 21. P. 227-236.14.
8. ИД Кароматов, МР Аслонова. (2018). *Малина как лечебное средство //Биология и интегративная медицина.- 2018.-С. 221-216.*
9. Oblokulov A.R., M.I. Mukhammadieva (2022). Clinical and biochemical characteristics of liver cirrhosis patients of viral etiology with spontaneous bacterial peritonitis // ACADEMICIA GLOBE: INDERSCIENSE RESEARCH.-2022.- P. 210-216.
10. Мухаммадиева.М.И., Облокулов. А.А. (2022). Клинико-лабораторная характеристика пациентов циррозе печени вирусной этиологии со спонтанным бактериальным перитонитом//NEW DAY IN MEDICINE.-2022.Р. 3-9.
11. Облокулов. А.Р., Мухаммадиева.М.И. (2020).Вирус этиологияли жигар циррозида спонтан бактериал перитонитнинг клиник-лаборатор тавсифи//ЖУРНАЛ ВЕСТНИК ВРАЧА.-Р.66-69.
12. Brown C.H., Noelle R.J. Seeing Through the Dark: New Insights in to the Immune Regulatory Functions of Vitamin A. Eur. J. Immunol. 2015. vol. 45. P. 1287-1295.17.
13. Livrea M.A., Tesoriere L. Antioxidant activity of vitamin A within lipid

- environments. *Subcell. Biochem.* 1998. vol. 30. P. 113-143.9.
14. Rhinn M., Dolle P. Retinoic acid signaling during development. *Development.* 2012. vol. 139. P. 843-858.11.
15. Desai T.J., Chen F., Lu J., Qian J., Niederreither K., Dolle P., Chambon P., Cardoso W.V. Distinct roles for retinoic acid receptors alpha and beta in early lung morphogenesis. *Dev. Biol.* 2006. vol. 291. P. 12-24.15.
16. Ross A.C. Vitamin A and retinoic acid in T cell-related immunity. *Am. J. Clin. Nutr.* 2012. vol. 96. P. 1166S-1172S.12.
17. Mukhtarova SH.A. (2022) AGE-RELATED FEATURES OF CLINICAL MANIFESTATIONS OF GIARDIASIS // INTERNATIONAL JOURNAL OF MEDICAL SCIENCES AND CLINICAL RESEARCH - 2022.-P.17-21.
18. Shohida Abdulloyevna Muxtorova. (2022). Clinical and laboratoriya features of acute respiratory disease in frequently ill children // Web of scientist: International scientific research journal.-2022.-P. 1026-1030.
19. Аслонова.М.Р. (2021). Возникновение Случаев Гиповитаминоза Из-за Гельминтозов// CENTRAL ASIAN JOURNAL OF MEDICAL AND NATURAL SCIENCES. – 2021.- P. 46-50.
20. Aslonova.M.R. (2022). Determination of suicidality against the background of Parasitic Diseases in children // INTERNATIONAL JOURNAL OF PHILOSOPHICAL STUDIES AND SOCIAL SCIENCES. – 2022.- P. 9-12.
21. Khamidova N.K. (2021). Clinical and Immunological Study of the Effect of Different types of Therapy on the Course of Allergic Rhinitis in Children with Hymenolepiasis. *Annals of the Romanian Society for Cell Biology, 1900–1908.* Retrieved from <https://www.annalsofrscb.ro/index.php/journal/article/view/2713>.
22. Аслонова. М. Р. (2022). СЛУЧАИ ГИПОВИТАМИНОЗА НА ФОНЕ ГЕЛЬМИНТОЗОВ//Web of Scientist: Международный научно-
- исследовательский журнал.-2022.-P. 305-312.