

SOMATIC BACKGROUND IN ADOLESCENT GIRLS WITH DELAYED SEXUAL DEVELOPMENT

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Relevance: Chronic systemic diseases may be accompanied by delayed growth and puberty. These include diseases of the digestive system with malabsorption syndrome (celiac disease, chronic pancreatitis, hepatitis), chronic kidney disease, heart defects, chronic bronchopulmonary diseases, endocrinopathies (hypothyroidism, diabetes mellitus, hypercortisolism, including iatrogenic, etc.)[1-4]. Delayed sexual development is observed when there is a lack of body weight as a result of an unbalanced diet, insufficient energy value of consumed food (anorexia nervosa, dieting, fasting); nutritional obesity. Non-physiological excess energy expenditure (gymnastics, ballet, etc.) may be accompanied by delayed puberty[5-8].

Purpose of the study: to compare the severity of sexual development and its delay in teenage girls who have different somatic backgrounds.

Materials and methods of research: To determine the prevalence of somatic diseases with mental retardation among adolescent girls, we examined 85 schoolchildren and specialized colleges aged 13-18 years in the Tashkent region.

Results of the study: In connection with the above, one of the important tasks of the work was to substantiate the possibility of early diagnosis and prediction of mental retardation in girls based on the identification of significant risk factors. A prospective assessment of the studied factors was carried out by analyzing laboratory-functional and questionnaire data. An analysis of observations of 85^{3/5} children aged 13 to 18 years was carried out. The main group consisted of 85 girls diagnosed with delayed sexual development. The comparison group included 10 teenage girls with normal sexual development. A total of 29 factors were analyzed. The same parameters were used to predict delayed sexual development. An analysis of the studies showed that the development of delayed sexual development in teenage girls was significantly influenced by the state of the reproductive system of mothers or close relatives: first of all, later menarche (F=39.3; P<0.001), as well as various menstrual dysfunctions (F=9.3; P<0.01). Perinatal risk factors include: asphyxia (F= 30.6; P<0.001), premature birth (F= 9.6; P<0.01), gestosis (F= 5.1; P<0.05). Significant factors were identified as frequent infectious diseases in a child (F= 10.3; P<0.01), as well as chronic somatic diseases: degree I-II anemia (F= 21.5; P<0.01), gastrointestinal diseases (F= 33.9; P<0.001), kidney disease (F= 9.1; P<0.05), diffuse goiter grade I-II (F= 6.9; P<0.05), combination 2- x or more diseases (F= 17.2; P<0.01). Thus, a comparative assessment of the characteristics of sexual development in girls with mental retardation revealed varying degrees of deficiency in sexual development, which manifests itself depending on the degree and form of the disease. These questionnaires and laboratory-functional studies are an early diagnostic method that allows us to identify signs of sexual infantilism in erased forms of pathology.

References:

1. Graber J. A., Brooks-Gunn J. Adolescent girls' sexual development //Handbook of women's sexual and reproductive health. – 2002. – С. 21-42.
 2. Dhooge W., Kaufman J. M., Comhaire F. Delayed sexual development in adolescents //The Lancet. – 2001. – Т. 358. – №. 9295. – С. 1816-1817.
 3. Бекбаулиева Г. Н., Курбаниязова М. З., Шакирова П. Д. Профилактика синдрома гиперстимуляции яичников при стимуляции овуляции : дис. – «АКТУАЛЬНЫЕ ПРОБЛЕМЫ ГИНЕКОЛОГИИ», 2023.
 4. Исмоилов С. Р. и др. ВЛИЯНИЕ ФЕНКАРОЛА И ЗАДИТЕНА НА КОРРЕЛЯЦИОННУЮ ЗАВИСИМОСТЬ МЕЖДУ ФАКТОРАМИ МЕСТНОЙ ЗАЩИТЫ, МИКРОФЛОРОЙ КИШЕЧНИКА И ФЕРМЕНТАМИ ПОДЖЕЛУДОЧНОЙ ЖЕЛЕЗЫ КРЫС В СТАДИИ СЕНСИБИЛИЗАЦИИ ПАССИВНОЙ АНАФИЛАКТИЧЕСКОЙ РЕАКЦИИ //INTERNATIONAL SCIENTIFIC REVIEW OF THE PROBLEMS OF NATURAL SCIENCES AND MEDICINE. – 2019. – С. 71-79.
 5. Исмоилов С. Р., Атаджанов Ф. С., Ибрахимова Н. О. СПЕКТР АКТИВНОСТИ ПИЩЕВАРИТЕЛЬНЫХ ФЕРМЕНТОВ ПОДЖЕЛУДОЧНОЙ ЖЕЛЕЗЫ КРЫС В СТАДИИ СЕНСИБИЛИЗАЦИИ ПАССИВНОЙ АНАФИЛАКТИЧЕСКОЙ РЕАКЦИИ И КОРРЕКЦИЯ НАБЛЮДАЕМЫХ НАРУШЕНИЙ ДИМЕДРОЛОМ И ФЕНКАРОЛОМ //ДОСТИЖЕНИЯ ВУЗОВСКОЙ НАУКИ 2018. – 2018. – С. 228-232.
 6. Исмоилов С. Р. и др. Влияние некоторых антигистаминных препаратов на активность ферментов поджелудочной железы при пищевой анафилаксии //МОЛОДЫЕ УЧЕНЫЕ-МЕДИЦИНЕ. – 2017. – С. 106.
 7. Рахимова Э. Э. и др. XALQ TABOVATIDA ISHLATILINADIGAN TABIIY MINERAL TUZLARNING TIBBIYOTDA ANAMIYATI //Журнал химии товаров и народной медицины. – 2023. – Т. 2. – №. 5. – С. 113-121.
- Karimjonov Y. M. et al. ANALGETIK DORI VOSITALARNING KONTENT TAHLILI //Talqin va tadqiqotlar. – 2023. – Т. 1. – №. 25.