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**«KLINIK TIBBIYOTDA  
ZAMONAVIY MUAMMOLAR VA  
INNOVATSION YONDASHUV»**

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Inson qadr-qimmati ulug'langan, manfaatlari ustuvor yurtda yuksalish va taraqqiyot bardavom bo'ladi. E'tiborlisi, mustaqillik yillarda mazkur tamoyil asosida mamlakatimizning barcha jahbalarida ijobiy o'zgarish va yangilanishlar kuzatilib, xalqimizning erkin va farovon yashashi, baxtli hayoti yo'lida izchil islohotlar amalga oshirilmoqda.

So'nggi yillarda mamlakatimizda Prezident Shavkat Mirziyoyev rahbarligida keng miqyosli islohotlar amalga oshirilib, davlat boshqaruvini tubdan yangilash, ijtimoiy soha va iqtisodiyot tarmoqlarini modernizatsiyalash borasida yangilanish va tashabbuslar boshlandi. Shu bilan bir qatorda, tibbiyot sohasidagi yetuk Respublikamizdagi va xorijiy olimlar bilan tajriba almashish maqsadida «Klinik tibbiyotda zamonaviy muammolar va innovatsion yondashuv» nomli ilmiy-amaliy konferensiya o'tkazildi va natijada Surxondaryo viloyatidagi OTM va tibbiyot tashkilotlari xodimlari uchun tibbiy ta'limdagi zamonaviy ilmiy tadqiqotlar, dolzarb masalalar, yutuqlar va innovatsiyalar, muammolar va ularning yechimi bo'yicha dolzarb muzokaralar olib borildi va tavsiyalar ishlab chiqildi.

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## CLINICAL COURSE OF CHANGES IN THE CARDIOVASCULAR SYSTEM IN SEVERE FORMS OF ACUTE PNEUMONIA IN CHILDREN OF EARLY AGE

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**The aim of study:** To estimate the clinical course of changes in the cardio-vascular system in severe forms of acute pneumonia in children of early age.

**Materials and methods.** 92 children were examined, patients with severe form of acute pneumonia, at the age from 1 till 3. Patients were divided into 2 groups: 47(51,1%) were in the 1-group patients with acute pneumonia with complicated carditis; in the 2 group - 45(48,9%) patients with acute pneumonia without carditis. There were conducted ECG investigation, EchoCG, X-ray examination of the chest.

In ECG combined disorders of rhythm and conducting as sinus tachyarrhythmia – 46,8% and bradyarrhythmia -19,1% were noted in children of the 1 -group. In 4,3% children were observed ventricular premature beats. AV blockade was detected in 4,3% patients, incomplete blockade of the right curs of Gis fascicles -14,9%, blockade of the left curs of Gis fascicles- 6,4%. In 14,9% children of the 1 group took place the decreasing of amplitude of wave QRS complex, which has indicated to acuity and diffuse character of the duration of carditis. In 19,1% children of the 1 group was detected hypertrophy of the left ventricle, in 8,5%-hypertrophy of the right ventricle, in 12,8% hypertrophy of both ventricles of the heart. In 31,9% cases were marked only metabolic changes in myocardium. In the analysis of ECG reading of the patients in 2 GROUP were determined metabolic changes in myocardium in 6,7 % cases, the rest of children normal readings of ECG were registered corresponding to the age. In analysis of EchoCG was established that in more than 1/3 children of the 1- group was detected dilatation of the cavity of the left and right ventricle. Ejection fraction ( EF ) in children of the 1-group was moderately decreased ( $56,6=2,3$ ). In children of the 2 group end systolic volume (ESV), end diastolic volume (EDV) practically was not changed, EF decreased insignificantly ( $61,7=4,3$ ), valves were intact, decreasing the contractility of myocardium were not observed. Studying of cardiothoracic index (CTI) in X-ray examination of the chest was detected cardiomegaly nearly in half of the patients of the 1-group with increasing off to I-II degree. Thus in children with carditis in pneumonia normal cardio thoracic index was marked in 14(29,8%) cases, in distinction from practically all children of the 2 -group - 43(95,6%; $P=0,05$ ). Increased CTI of I-II degrees were in children of the 1 group 19(40,4%) and 13(27,7%) cases correspondingly, when in the second group were observed decreasing CTI only I degree and in 2 (4,4%;  $P=0,05$ ) cases.

**Conclusion .**Thus, significance of the changes in cardio-vascular system in acute pneumonia in children varies from minimal metabolic changes in myocardium till severe – combined disorders of rhythm and conducting of the heart is characterized by dilatation of the both cavity of ventricles, decreasing of ejection fraction. Timely detection of these disorders can contribute an early diagnostics of heart affection in patients with acute pneumonia and correspondingly with prescription of coregent therapy.