

ISSN (print) 2072-6732
ISSN (online) 2499-9865

НАУЧНО-ПРАКТИЧЕСКИЙ ЖУРНАЛ

ЖУРНАЛ ИНФЕКТОЛОГИИ

ГОМЕЛЬСКИЙ МЕЖДУНАРОДНЫЙ КОНГРЕСС
«ИНФЕКЦИОННЫЕ БОЛЕЗНИ,
МИКРОБИОЛОГИЯ И ИММУНОЛОГИЯ»

ГОМЕЛЬ, БЕЛАРУСЬ
13–14 сентября 2023 года

Приложение 1

Том 15 №3, 2023

Conclusion. A long delay between the onset of symptoms of HE and the start of effective antiviral therapy is directly correlated with a less favourable clinical outcome. The re-activation of herpesvirus infection in the case of this patient could also occur against the background of a bacterial neuroinfection of unspecified etiology, an increase in the permeability of the BBB. However, despite this, adequate antiviral therapy in combination with other therapeutic options will reduce the risk of complications and mortality in patients with HE.

Mirkhamidova S.M.

THE ROLE OF NURSES IN DESIGNING THE PLAN OF CARE FOR PATIENTS WITH HIV

Tashkent medical academy Tashkent, Uzbekistan

Abstract. The final stage of human immunodeficiency virus (HIV) infection is acquired immunodeficiency syndrome (AIDS). Two to four weeks after HIV enters the body, the patient may complain of symptoms of primary infection. This is followed by long-term chronic HIV infection that can last for decades. AIDS is mainly characterized by opportunistic infections. Nurses' clinical care can be affected by their attitudes and prejudices towards HIV patients. The urgency of the problem. Nurses help alleviate the pain of the population by increasing medical literacy, preventing the spread of HIV infection, participating in treatment, following the necessary regimen and providing psychological support to patients, as well as providing social support to the families of people infected with HIV. The purpose of the study. Prevention of HIV infection consists in optimizing the ways of increasing the efficiency of nurses' work. Interprofessional management of patients with HIV infection is aimed at monitoring immune function and disease progression, prevention, detection and treatment of opportunistic diseases, treatment of symptoms of infection, prevention of complications and prevention of transmission of HIV to others. These goals can only be achieved through ongoing assessment, consistent patient engagement, education, and support. Nurses are involved in all these aspects of patient care. ART is treatment to reduce viral load, maintain CD4 count at acceptable levels, prevent HIV-related symptoms, slow disease progression, and prevent HIV transmission. Nurses play an important role in educating patients about medication regimens, including side effects and regimen adherence.

Nursing care for an unbalanced diet is more than the body needs.

1. Educate the patient about the side effects of the current treatment regimen. HIV drug therapy often causes altered taste, anorexia, nausea, and vomiting.

2. Create a comfortable environment for eating. Ensure continuous feeding, provide small, frequent meals and snacks, and remove odors to improve appetite and increase food intake.

3. Promotion of oral hygiene. Patients with HIV infection often develop mouth ulcers, which interfere with the patient's ability to eat. Good oral hygiene increases appetite and increases the desire to eat.

4. Injection of drugs according to indications. Antiemetics given before meals can help reduce nausea and vomiting and improve appetite. Appetite stimulants may also be prescribed to increase appetite.

5. Consult a nutritionist. Collaboration with a dietician

can ensure a balanced diet that prevents nutritional deficiencies in HIV patients.

Conclusions: Adequate management of nursing care within the care paradigm aims to facilitate the development of effective interventions to meet the needs of people living with HIV infection and their families in various domains that cross inpatient and palliative perspectives. Thus, the need to understand the patient and his family in aspects that go beyond the clinical complications of AIDS has been shown to ensure the control of the condition requiring hospitalization and the continuity of dynamic follow-up after hospital discharge. HIV infection is an incurable and life-limiting condition, often associated with low social support, and it is treated in lifelong care, therefore, taking into account the lifestyle characteristics and individuality of these individuals. It is necessary to take care of situations and understand their chronic condition, because they can certainly age with the virus, are vulnerable to the development and progression of the disease and require palliative care to alleviate suffering.

Rasulova Markabo Bakhtiyorovna

LABORATORY CHARACTERISTICS OF HERPESVIRUSES IN ANEMIA IN ONCOGEMATOLOGICAL CHILDREN

Republican specialized scientific and practical Medical Center for Epidemiology, microbiology of infection and parasitic diseases Research Institute of Virology, Tashkent, Republic of Uzbekistan.

The World Health Organization estimates that a quarter of the world's population suffers from anemia, including nearly half of preschool children. In recent years, there has been a significant increase in the number of patients with anemia, which occurs in adults and children, among oncogematological patients, against the background of immunodeficiency, the effect of chemotherapy and co-existing diseases. In the treatment of oncogematological diseases, mainly chemotherapy, the use of immunosuppressors and blood transfusions are carried out as the main treatment. The effect of viral infections (PVB19, EBV, CMV and HHV-6) as the cause of pancytopenia in oncogematological diseases and the condition of most common aplastic anemia? Studies of anemia associated with viruses (PVB19, EBV, CMV, and HHV-6) in hemoblastoses cited in the literature show that viral infections associated with aplastic anemia include Parvovirus (PVB19), Epstein-Barr virus (EBV), cytomegalovirus (CMV), varicella zoster virus (VZV), human herpes virus 6 (HHV-6), human immunodeficiency (HIV), Viral Hepatitis A and C viruses (HAV and HCV). Cytomegalovirus (CMV) and Epstein-Barr virus (EBV) infections are common worldwide. EBV is associated with a variety of hematological and autoimmune diseases, while CMV can play an important role in the development of chronic hematological diseases such as hemoglobinopathies, lymphomas, myelomas, hemophilia, aplastic and sickle cell anemia. The following methods are used to identify herpesviruses in the blood. Mainly because the habitat of herpesviruses is considered lymphocytes, it is examined by combining the following methods. 1.(WB) One important reagent for hematological research is lysing solution (hemolytic), which preserves leukocytes and causes erythrocyte lysis. To accurately calculate the number of white blood cells several times smaller than red blood

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