



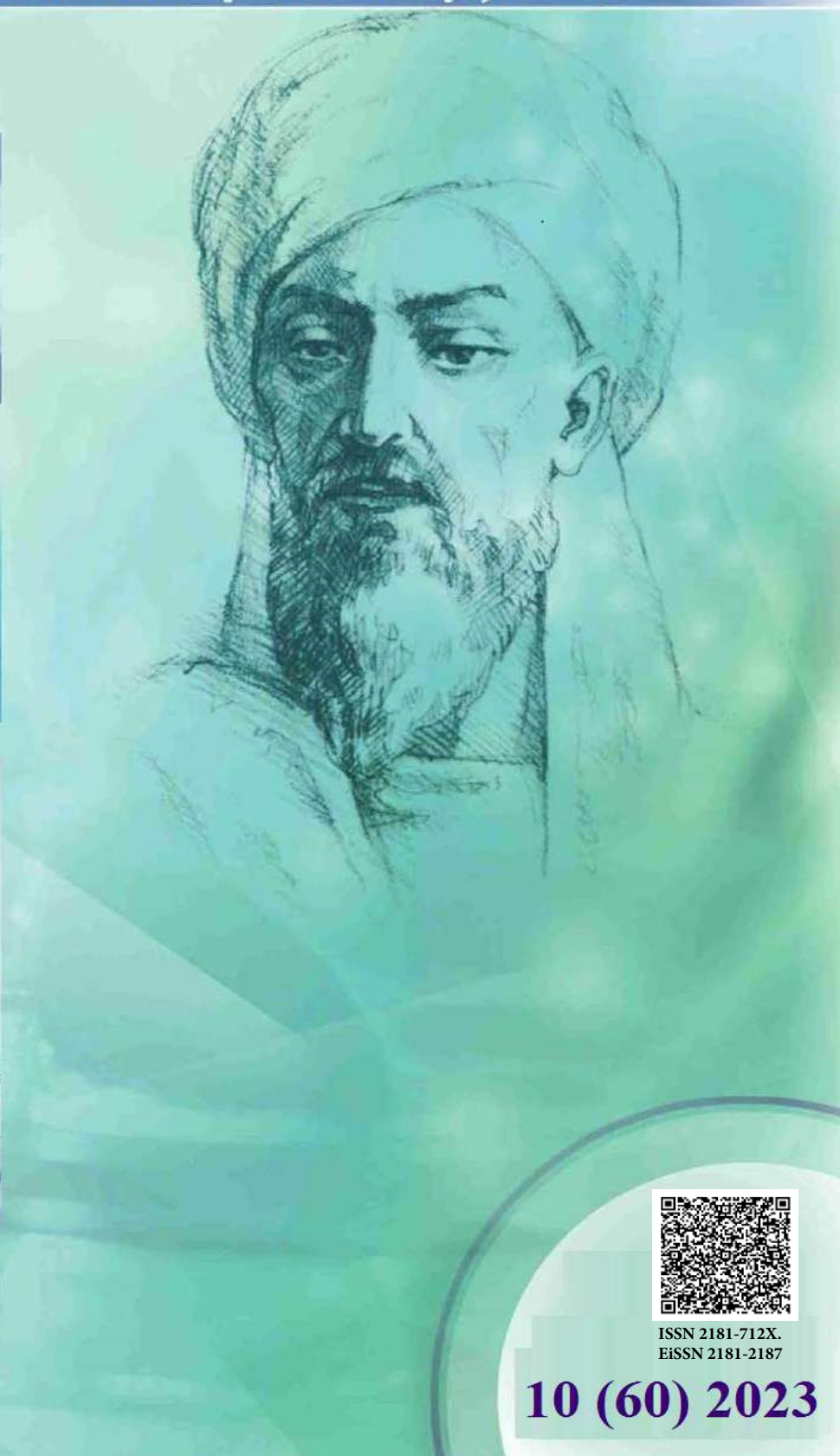
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OIV-INFEKSIYASI BILAN ZARARLANGAN VIRUSLI DIAREYALI BOLALARDA KLINIK-LABORATOR TAHLILLAR

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✓ Rezyume

Diareya sindromi OIV bilan zararlangan bolalarda keng tarqalgan asorat bo'lib, buning yuzaga kelishida ikkilamchi virusli va bakterial infeksiyalar shuningdek, OIVning o'zi muhim o'rinni egallaydi. Oshqozon-ichak traktining zararlanishi diareya, malabsorbsiya bilan namoyon bo'ladi, bu esa o'z navbatida energiya va vitamin yetishmasligiga olib keladi, natijada bolaning o'sishi va rivojlanishining kechikishiga olib keladi. Biz tadqiqotimizda OIV-infeksiyasi bilan zararlangan virusli diareya aniqlangan 60 nafar bemor bolada umumiy klinik va laborator tahlillari natijalari asosida muhokama qildik.

Tadqiqot maqsadi: OIV infeksiyasi bilan zararlangan virusli diareyali bolalarda klinik-laborator o'zgarishlarni o'rganish.

Kalit so'zlar: OIV infeksiyasi, virusli diareyalar, intoksikatsiya.

КЛИНИКО-ЛАБОРАТОРНЫЙ АНАЛИЗ ПРИ ВИРУСНЫХ ДИАРЕЯХ У ВИЧ-ИНФИЦИРОВАННЫХ ДЕТЕЙ

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✓ Резюме

Синдром диареи является частым осложнением у ВИЧ-инфицированных детей, причем важную роль в его возникновении играют вторичные вирусные и бактериальные инфекции, а также сам ВИЧ. Поражение желудочно-кишечного тракта проявляется диареей, нарушением всасывания, что в свою очередь приводит к недостатку энергии и витаминов, что приводит к задержке роста и развития ребенка. В нашем исследовании мы обсудили 60 детей с ВИЧ-инфицированной вирусной диареей по результатам общеклинических и лабораторных анализов.

Цель исследования: Изучить клинико-лабораторные изменения при вирусных диареях у ВИЧ-инфицированных детей.

Ключевые слова: ВИЧ-инфекция, вирусная диарея, интоксикация.

CLINICAL AND LABORATORY ANALYSIS FOR VIRAL DIARRHEA IN HIV-INFECTED CHILDREN

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✓ Resume

Diarrhea syndrome is a common complication in HIV-infected children, and secondary viral and bacterial infections, as well as HIV itself, play an important role in its occurrence. Damage to the gastrointestinal tract is manifested by diarrhea, malabsorption, which in turn leads to a lack of energy and vitamins, which leads to delayed growth and development of the child. In our study, we discussed 60 children with HIV-infected viral diarrhea based on the results of general clinical and laboratory tests.

Purpose of the study: To study clinical and laboratory changes in HIV infected children with viral diarrhea.

Key words: HIV infection, viral diarrhea, rotavirus, intoxication.

Dolzarbligi

Diareya butun dunyo bo'ylab bolalar nogironligi va o'limining asosiy sabablaridan biri bo'lib, har yili 5-10 million-kishining o'limiga olib keladi. Diareya oqibatida Osiyo, Afrika va Lotin Amerikasi bo'ylab 0-4 yoshdagi millionlab bolalarning o'limi qayd qilinadi [15].

Diareya sindromi OIV bilan zararlangan bolalarda keng tarqalgan asorat bo'lib, buning yuzaga kelishida ikkilamchi virusli va bakterial infeksiyalar shuningdek, OIVning o'zi muhim o'rinni egallaydi. Oshqozon-ichak traktining zararlanishi diareya, malabsorbtsiya bilan namoyon bo'ladi, bu esa o'z navbatida energiya va vitamin yetishmasligiga olib keladi, natijada bolaning o'sishi va rivojlanishining kechikishiga olib keladi [1,5,7].

Hazm sistemasi a'zolarining zararlanishi OIV-infeksiyasining barcha bosqichlari uchun xos bo'lib, OIV-enteropatiyasida qator morfologik o'zgarishlar: shilliq qavatlar infiltratsiyasi, kiprikchalar atrofiyasi, kriptalar giperplaziyasi kuzatiladi. OIV-infeksiyasining patogenezida zamonaviy qarashlar miqyosida kasallikning rivojlanishiga ma'sul bo'lgan muhim omil sifatida tizimli yallig'lanishli javob reaksiyasi sindromining rivojlanishi bilan immun tizimining yuqori faolligi fenomeni ko'riladi. [2,6,12]

Hozirgi kunda bir qancha qo'zg'atuvchilar OIV bilan zararlangan bemorlarda diareyaga sabab bo'lishi mumkin. Tadqiqotlar bo'yicha bolalarda ichak infeksiyalari etiologiyasida asosiy rolni viruslar 80%gacha egallaydi. Eng ko'p o'rganilgani rotavirus 50 % gacha, noravirus rivojlangan davlatlarda 30% gacha diareyaga sabab bo'ladi. Ichak infeksiyalarini keltirib chiqaruvchi viruslar ro'yxati doimiy o'sib bormoqda bu patogenlarni diagnostika qilganda astroviruslar, adenoviruslar, toraviruslar aniqlanadi [3,8,14].

Tadqiqot maqsadi: OIV infeksiyasi bilan zararlangan virusli diareyali bolalarda klinik-laborator o'zgarishlarni o'rganish.

Material va metodlar

Tadqiqot ishi 2021-2023 yillar mobaynida Toshkent shahridagi Maxsuslashtirilgan yuqumli kasalliklar shifoxonasida olib borildi. Tekshirish uchun 18 yoshgacha bo'lgan OIV-infeksiyasi bo'lgan virusli diareya aniqlangan 60 nafar bemor bolalar tanlab olindi.

Virusli diareya tashxisi O'zbekiston Respublikasi Sog'liqni Saqlash Vazirligining 2007 yil 21 sentyabrdagi № 420-sonli "O'zbekiston Respublikasida rotavirus infeksiyasining epidemiologik kuzatuv tizimini tashkil qilish" nomli buyrug'iga asosan, immunoxromatografik ekspress-test yordamida najasda virusga qarshi paydo bo'lgan antitelalarni aniqlash va najasni sifatli skriningi PZR orqali qo'yildi.

OIV bilan kasallangan bolalarda virusli diareyalarning og'irligini baholashda bemor bolalarda diareya natijasida yuzaga kelgan suvsizlanish darajasi (JSST ma'lumotlariga ko'ra suvsizlanish), diareyaning kunlik miqdori va davomiyligi, shuningdek, diareya darajasi baholanadi. Tashxis bemorning shikoyatlari, klinik, antropometrik, serologik, bakteriolitik, immunologik, virusologik va instrumental tadqiqotlar asosida belgilanadi.

Natijalar va tahlillar

Tadqiqot natijalari shuni ko'rsatdiki, tekshiruvdagi bemor bolalar yoshi bo'yicha quyidagicha taqsimlandi: 3-7 yosh 10 nafar (17%), 7-14 yosh 34 nafar (57%), 14-18 yosh 16 nafar (26%). Tekshiruvlardan ma'lum bo'ldiki kasallik asosan 7-14 yoshdagi bemorlar bolalar orasida uchradi (57%).

1-jadval. Bemorlarda kasallikning kechishi.

Kechishi	Jami N=60	
	Abs	%
Yengil	16	26,7
O'rta og'ir	38	63,3
Og'ir	6	10

Bemorlarda kasallikning kechishi o'rganilganda, kasallik og'irlik darajasiga ko'ra asosan o'rta og'ir kechishi kuzatildi (63%), 16 nafar (26%) bemorda yengil, 7 nafar (11%) bemorlarda og'ir holatda kechgani aniqlandi.

2-jadval. Bemorlarda intoksikatsiya belgilarining uchrashi.

Simptomlar	Jami N=60	
	Abs	%
Umumiy xolsizlik	60	100
Ishtaxasizlik	44	73
Isitma	15	25
Qusish	10	16

3-jadval. Bemorda najas tahlil natijalari.

Ko'rsatkichlar	N=60	
	Abs	%
Leykotsitlar (3 dan ko'proq k/m)	4	6,7
Shilliq (+ - +++)	31	51,6
Yodofil flora (+ - +++)	6	10,0
Neytral yog' (++ - +++)	15	25,0
Sovun (++ - +-1++)	39	65,0
Yog' kislotalari (-H- - +++)	38	63,3
Hazm bo'lmagan klechatka (+++++)	18	30,0
Mushak tolalar (++ - +++)	8	13,3
Kraxmal (+ - +++)	17	28,3

Bemor bolalarda kasallikning klinik kechishida intoksikatsiya belgilaridan umumiy holsizlik va ishtahasining pasayishi deyarli barcha bemorlarda kuzatildi (100%:73%). Isitma belgisi bemorlarning ¼ qismida 15 nafar (25%) aniqlangan bo'lsa, faqatgina 10 nafar (16%) bemor bolalarda qayt qilish kuzatildi. Bundan ko'rinib turibdiki, bolalarda intoksikatsiya belgilari boshqa diareya bilan kechadigan kasalliklarga nisbatan sust kechishi aniqlandi.

Barcha bemorlarda najas umumiy tahlili boshlang'ich bosqichida dastlabki kuni o'tkazildi va tahlil natijalari shuni ko'rsatdiki, bemor bolalarda hazm bo'lish va so'rilish buzilishlari: hazm bo'lmagan klechatka, yog' kislotalari, kraxmal. Yallig'lanish belgilari leykotsitoz, iodofil flora kamroq uchradi.

3-jadvaldan ko'rinib turibdiki, 39 nafar (65%) bemorda sovun, 38 nafar (63,3%) bemorda yog' kislotalari, 18 nafar (30%) bemorda hazm bo'lmagan klechatka, 17 nafar (28,3%) bemorda kraxmal qayd qilingan bo'lsa, leykotsitlar va iodofil flora kamroq uchradi (6,7%:10% mos ravishda).

Najas tahlili natijalaridan ma'lum bo'ldiki, bolalarda yallig'lanish belgilariga nisbatan hazm bo'lish buzilishi belgilari asosiy o'rin tutadi.

Xulosalar

1. Kuzatuvdagi bemorlarimizda kasallikning kechishi tahlil qilinganda, kasallik asosan o'rta og'ir kechishi 63% holatda kuzatildi, 26% yengil, 11% holatda og'ir kechgani aniqlandi.

2. Intoksikatsiya sindromining namoyon bo'lishi bo'yicha bemor bolalarda umumiy holsizlik va ishtahasining pasayishi barcha holatlarda aniqlandi. (100%:73%). Tana haroratining ko'tarilishi va qayt qilish nisbatan kamroq uchrangani qayd qilindi mos ravishda 25%:16%. Bundan ko'rinib turibdiki, bolalarda intoksikatsiya belgilari boshqa diareya bilan kechadigan kasalliklarga nisbatan sust kechishi aniqlandi.

3. Kuzatuvdagi bemorlarimizda najas umumiy tahlil natijalari bo'yicha yallig'lanish belgilari leykotsitoz, iodofil flora kamroq kuzatildi. Hazm bo'lish va so'rilish buzilishlari asosan aniqlandi.

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