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**O'ZBEKISTON RESPUBLIKASI SOG'LIQNI SAQLASH VAZIRLIGI,
TOSHKENT TIBBIYOT AKADEMIYASI,
KORYO UNIVERSITETI**

**"ATROF MUHIT MUHOFAZASINING DOLZARB MUAMMOLARI VA INSON
SALOMATLIGI"**

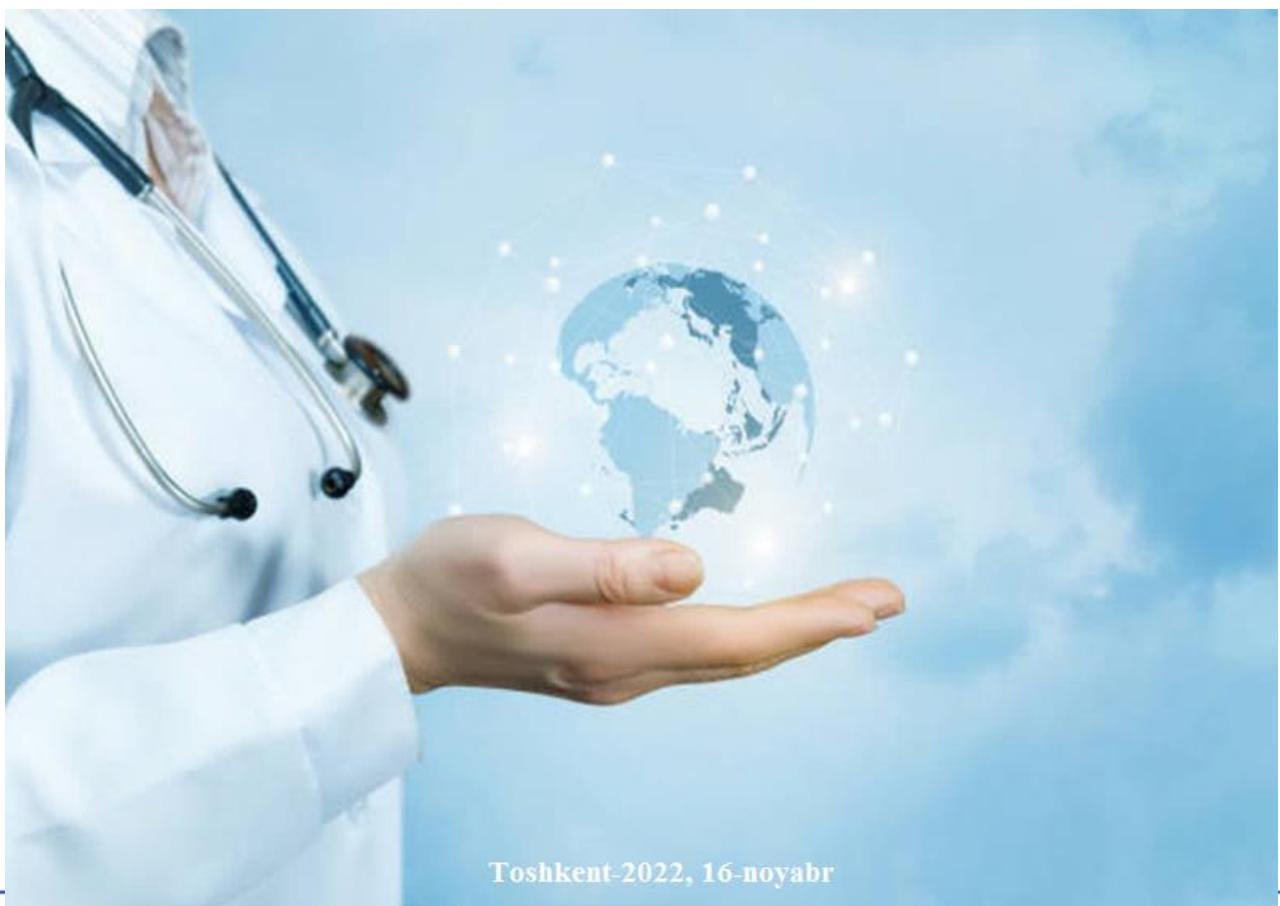
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HEALTH"**

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**«АКТУАЛЬНЫЕ ПРОБЛЕМЫ ОХРАНЫ ОКРУЖАЮЩЕЙ СРЕДЫ И ЗДОРОВЬЕ
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Хулоса. Оналарнинг ахлоқ-одоби ва уларнинг бола тарбиясидаги вазифаларига келганда Ибн Сино қўйидаги фикрларни олға суради: 1- болаларингизни диққат-эътибор билан тарбия қилинг. Фазилат, одоб ва гўзал ахлоқ ўргатиб, хулқларини гўзаллаштиринг;

2-болаларингиз кўп бўлса, севининг, уларнинг йиғлаганлари, шўхлик қилганлари учун аччиқланманг, кулиб, эркалатиб насиҳат қилиб шодлик билан тарбияланг; 3- уларни иссик сув билан тез-тез чўмилтиринг, тор кийимлар кийдирманг, улар боланинг соғлом ўсишига таъсир қиласди; 4- болалар тоза, хуш ҳавога жуда муҳтож бўлганлари учун уларнинг ётотхоналари тоза, хуш ҳаволи бўлиши кераклигини ёдингизда тулинг; 5- олти ойгача сутдан бошқа озиқ берманг; 6- хусусан ичкиликлардан буткил ҳазар қилинг, чунки ичкиликлар бола хулқи ва саломатлигига зарар етказади; 7- болаларингизни ҳаддан ташқари эрка қилиб ўстирманг. Ҳар нарсани уларнинг ўз ихтиёларига ташлаб қўйманг, қарши сўзлашга ўргатманг, улар олдида ўзингизни яхши тулинг. Сиз яхшибўлсангиз, улар ҳам сизга қаршилик кўрсатишга, сўкишга ўрганмайди; 8- баҳодир, мард бўлиб ўсишлари учун уларни кўрқоқ қилиб етиштирманг. Иллатлар билан курашишда буюк мутафаккир асарларидан фойдаланиш лозим.

DERMATOSCOPY AS A METHOD OF EARLY DIAGNOSIS SKIN NEOPLASMAS

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Relevance. Dermoscopy is one of the most effective methods for diagnosing any pigmented lesions on the skin and allows you to objectively assess the oncological risk and make recommendations for further management.

When examining the skin of a patient with a neoplasm it is necessary to note the pigment phototype, signs of photodamage, the approximate number of simple nevi, to identify dysplastic and congenital nevi.

Material and methods. This year, as part of the International Melanoma Day, at Republican Clinic of skin and venerology when any if you wish, you can show disturbing moles and suspicious skin growths dermatologist, 87 patients were examined aged 6 to 70 years. A survey was conducted prior to the examination.

Results. The survey results showed that 56% of respondents participated because have many moles. 44% - they note a change in the mole or the appearance of a new one, they decided to simply undergo an examination 28%. Sunscreens are used by 64% of the respondents, before the examination 48% had sunburn. At 100% cases, a complete dermatoscopic examination of applicants. Pigmented nevus were found in 96% of cases, of which 14% were dysplastic. The examination revealed: seborrheic keratomas in 38 (38%), solar lentigo in 35 (53%), basal cell carcinoma in 10 (6%), melanoma in 2 (2%). It should be noted that in most cases the neoplasm was found by the patient himself (74%), in 15% - identified by a dermatologist.

Conclusions. Based on the results of this action, a Project was developed, which should be draw the attention of dermatovenereologists, as well as doctors of all specialties to oncological alertness when examining the patient's skin and mucous membranes, regardless of whether he complained of a pathological change in the skin or any other disease.

O'CHOQLI ALOPESIYA BILAN OG'RIGAN BEMORLARNI KOMPLEKS DAVOLASH

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Tadqiqot maqsadi. O'A bilan og'rigan bemorlarni diprospan va fatiderm sprey bilan kompleks davolash samaradorligini o'rganishdan iborat.

Materiallar va tadqiqot usullari. 76 nafar bemor (48 erkak, 38 ayol) davolandi

16 yoshdan 45 yoshgacha, o'rtacha - $27,1 \pm 1,6$ yillar. Kasallikning davomiyligi 1 oydan 5 yilgacha yoki undan ko'p. 36 (37,5%) bemorda kasallikning yengil shakli (25% gacha soch to'kilishi maydoni) aniqlangan, o'rtacha daraja.

og'ir (alopesiya hududi ortiq 50%) — 21 (21,9%) da. Qo'llaniladigan davolash usuliga qarab, bemorlar 3 guruhga bo'lindi. Birinchi guruh (30 nafar bemor, 12 nafari yengil O'A, 13 nafari o'rtacha og'irlik darajasida) bilan davolanadi

o'choqlarda diprospan s / c, 8-10 kunda 1 marta, 6-7 bir marta. Og'ir darajada O'A diprospan bilan bemorlar mushak ichiga 1 marta 10-12 kun davomida, jami 5-6 marta yuboriladi. Uchinchi guruh (mos ravishda 36 bemor)

12, 13 va 11) — diprospan va pigmentinni birgalikda ishlatish

Tadqiqot natijalari. Qo'llaniladigan davolash usullarining samaradorligi mezonlari O'A bilan og'rigan bemorlarda O'A klinik belgilarining yo'qolishi (davolashning darhol natijalari) va remissiya davomiyligi 2 yil bo'lgan.yillik kuzatuv (davolanishning uzoq muddatli natijalari).Davolanishdan keyin (4-6 oydan keyin).boshlanishi) 3-guruuning 36 klinikasi 17 tasida (47,2%) tiklanishga erishildi.13 tasida (36,1%) sezilarli yaxshilanish, 4 tasida (11,1%) yaxshilanish, 2 tasida (5,6%) ta'siri yo'q, birinchi va ikkinchi guruhlarda — mos ravishda

8 (26,7%) va 9 (30%), 10 (33,3%) va 8 (26,7%), da 9 (30%) va 9 (30%), 3 (10%) va 4 (13,3%).

Murakkab (diprospan +fatiderm) davolash usulining darhol samaradorligi O'A bilan og'rigan bemorlar 83,3% ni tashkil etdi, bu esa ancha yuqori diprospan monoterapiysi natijalariga qaraganda (60%, p<0,05) va fatiderm (56,7%, p<0,05). Davolashning uzoq muddatli natijalari kompleks usulning muhim afzalligini ko'rsatdi Davolash: 66,7% bemorlarda dispanser kuzatuvidan keyin 2 yil davomida dermatozning klinik remissiyasi kuzatildi, bu ko'rsatkichdan sezilarli darajada ko'pdir. diprospan bilan monoterapiya bilan (bemorlarning 38,9% da, p<0,01) va fatiderm (47,1% da, p<0,02) nisbati darajasi quyidagicha bo'lgan.

FEATURES OF THE SPREAD AND EPIDEMIOLOGY OF ACUTE INTESTINAL INFECTIONS ON THE EXAMPLE OF THE ANDIJAN REGION, RUZ.

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Abstract. Acute intestinal infection (AII), despite the successes of medical science and practical healthcare, remains one of the urgent problems of our time. Every year in the world, according to the World Health Organization, more than 1 billion diarrheal diseases are registered, about 4 million people die, of which 65-70% are children under 14 years old. In recent years, there has been a problem of water safety and diseases associated with it. Despite the difficult epidemiological situation in the region, the proportion of bacteriological confirmation remains low, up to 76.3% of AII diseases remain unencrypted. There is practically no virological diagnosis of AII.

Purpose. To study the peculiarities of the spread of intestinal infectious diseases, long-term dynamics and spread in the Andijan region, RUz. To study the contamination of environmental objects and, in particular, the aquatic environment and to establish their role as factors of transmission of acute intestinal infections of bacterial and viral nature.

Materials and methods. The studied materials were statistical data of the Center for Sanitary and Epidemiological Welfare of the Population and Public Health of the Andijan region on intestinal morbidity for 2018-2022. Epidemiological and statistical research methods were used in this work.

The results of the study. Due to the geographical location and the predominance of the hot climate in Uzbekistan, the problem of intestinal infections has always been one of the most urgent. In the Republic of Uzbekistan in 2021-2022, about 62-63% of the population was provided with safe drinking water. Unsatisfactory quality of drinking water leads to additional deaths and additional cases of diseases of the population.