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cells, the hemolysis of red blood cells must be complete and concentrated. Lymphocytes and granulocytes can be distinguished. In the middle part of the leukocyte histogram there are monocytes, basophils and eosinophils. This method allows you to identify the disease during the latent period and treat it as an indication. 2.(MN)Ficoll solution-it is intended for the separation of lymphocytes, monocytes and neutrophils. This method also allows you to identify the disease during the latent period and treat it as an indication. 3.(PL) Detection of viruses in the blood serum. This method is used to carry out treatment measures based on the amount of the virus, indicating the activity of the disease. When examining anemia in hemoblastoses, it is important to jointly check the above methods to the standard.

Tuychiev L.N., Khudaikulova G.K., Sadikov X.M.A.

DEPENDENCE OF ADHERENCE TO ANTIRETROVIRAL THERAPY ON VARIOUS FACTORS

Tashkent, Uzbekistan

Assessment of adherence to ART among HIV-infected children and adolescents is an important component of medical care, but there is still no list of those personal characteristics of an HIV+ child and his relatives that contribute to high adherence. Considering that studies on adherence assessment among children are highly informative, but few in number, the goal was to study the main factors influencing adherence to antiretroviral therapy (ARVT) among HIV+ pediatric patients (0-18 years old). Depending on the goals set, sociological (questionnaire), general clinical, immunological (CD4 lymphocytes) and virological (HIV RNA) research methods were chosen. A study was conducted on the basis of a department of a specialized clinic at the Republican AIDS Center and the city AIDS center in the city of Tashkent, in which 112 children diagnosed with HIV were observed. The diagnosis of HIV infection was established on the basis of the order of the Ministry of Health of the Republic of Uzbekistan No. 277 dated April 30, 2018 "On the implementation of national clinical protocols for HIV infection". As the state of adherence to ART was studied, it was revealed that a low level was observed in 33.9% of patients, an average level of adherence was noted in 28.6% of children with HIV and a high level in 37.5%. When distributing patients by age, it was noted that the highest level of adherence to ART was found in the smallest age group (0-3 years) 58.3%, because it is this age category of patients that is extremely dependent on parents and guardians. After analyzing the subsequent groups, it can be seen that the high level of adherence decreases as the patient's age increases, because it was in the second group (3-7 years) that the high level of adherence was 40.4%, in the third group (7-14 years) the high level of adherence to anti-HIV therapy was detected only in 39.3% of patients, and the last age group (14-18 years) has the lowest high level of adherence - 15%.

It is worth noting that when analyzing the data of patients with the highest adherence rate, the following reasons were noted as the main factors affecting the intake of ARVT: the help of gadgets and software was noted in 89.3% of patients, the presence of motivation for therapy in 89.2% of patients, adequate perception of side effects is 50%, and planning of the day regimen and ARVT intake is 42.8%.

The main factors with a moderate level of adherence were

noted: the fear of a side effect of ARVT was 74%, the discrepancy between the schedule of taking the drug and the work schedule of the parent or guardian was noted in 67% of patients, dissatisfaction with the level of drug load was 48%, and distrust in ARVT was 39%.

The most frequently encountered factors with a low level of adherence were: lack of motivation for therapy 84%, distrust of ART 79%, low level of education of parents or guardians 63%, non-acceptance of HIV status 26%.

Based on the identified factors, it can be concluded that, in HIV-infected children, a high level of adherence was 37.5%. An unsatisfactory level of adherence to ART (moderate and low) was more often recorded among adolescent age groups - 7-14 years old and 14-18 years old.

The main factors influencing the level of adherence in childhood are: Education and awareness of HIV caregivers, the availability of volunteer assistance, the psychological state of the child at the time of initiation of therapy and readiness for treatment.

Tuychiev L.N.¹, Shokirov M.K.², Anvarov J.A.¹

EPIDEMIOLOGICAL CHARACTERISTICS OF FASCIOLIASIS IN FERGANA REGION

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According to the World Health Organization, fascioliasis is on the list of neglected tropical diseases, currently infecting about 2,6 million people annually (WHO, 2018). Fascioliasis is a zoonotic disease caused by the foodborne trematodes *Fasciola hepatica* and *Fasciola gigantica*. The life cycle of these parasites is very complex and takes place in the intermediate and primary host organisms. Parasites are transmitted by specific freshwater Lymnaeidae snails (intermediate host organism) and infect many mammals, mainly herbivorous but also omnivorous species, causing severe disease in domestic ruminants and humans (primary host organisms). The disease mainly occurs in areas where agriculture and animal husbandry are widespread, as well as in areas where rivers, canals and streams flow, which are widely used in agriculture and for household use (Afshan K., 2014).

The purpose of the study. To study of some epidemiological characteristics of fascioliasis in Fergana region this found during 2018-2021 years.

Materials and methods. We have analyzed epidemiological records for study the case of fascioliasis of Fergana Regional Department of Sanitary Epidemiological Welfare and Public Health this found during 2018-2021 years. Detailed patient data were obtained from clinical records, which were analyzed for demographic, epidemiological and clinical features, as well as laboratory values and imaging studies. The diagnosis of fascioliasis was confirmed on the basis of microscopic examination of stool sample or duodenal fluid, abdominal ultrasonography and macroscopic diagnosis of parasites detected during surgical intervention.

Results and discussion. During 2018-2021 years 103 cases of fascioliasis were registered in Fergana region. The distribution of disease by age and gender was as follows: the age of the patients was from 3 to 69 years old. Among them 27 (26,21%) were children under 18 years old (9 were boys

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