MINISTRY OF HEALTH OF THE REPUBLIC OF UZBEKISTAN

Tashkent Medical Academy

Young Scientists

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Only English “Advances in Medical Research and Practice Conference”

Tashkent

May 23, 2023

Ministry of Health of the Republic of Uzbekistan

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ALLERGIC RHINITIS AND ITS COMBINED FORMS IN CHILDREN

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Aim: Due to the increase in the weight of allergic diseases in the general pathology of childhood, the diagnosis and treatment of allergic rhinitis in children and the management of these patients at the outpatient stage have not lost their relevance. The period of preschool and school age is characterized by a high incidence of acute respiratory diseases of the upper respiratory tract, especially acute rhinitis, nasopharyngitis, rhinosinusitis. This daily sets the district pediatrician the task of differential diagnosis of allergic rhinitis and acute rhinitis with a protracted course. Allergic rhinitis most often does not require hospitalization and, with timely diagnosis, does not lead to serious consequences. It is known that children prone to allergies suffer from acute respiratory viral infections more often and more severely than their peers. An integrated approach to the diagnosis and treatment of such children with the participation of an allergist, an otorhinolaryngologist, under the constant supervision of a local pediatrician, the rational use of drug therapy can reduce the duration of the disease, improve the patient's quality of life. The article provides generalized principles for managing patients with allergic rhinitis from the point of view of domestic and international recommendations, the rules of life for children with allergic rhinitis are described in detail, the role of the local pediatrician in teaching parents to ensure a hypoallergenic environment for the child is emphasized. The authors present a clinical example of the effective use of a combined decongestant and antihistamine for the treatment of acute respiratory viral infections in a child with allergic rhinitis.The aim of the work is to study allergic rhinitis and its combined forms in children.

The objectives of the study are to identify the frequency of symptoms of allergic rhinitis and its combined forms in children based on the International ISAAC program in dynamics over three years.

Conclusions: Cause-significant factors influencing the development of combined forms of allergic rhinitis were identified: atopic dermatitis lasting up to three years, rhinoconjunctival syndrome, urticaria, Quincke's edema, high IgE levels and the presence of endotoxemia. Based on the identified adverse factors in the formation of combined forms of allergic rhinitis and bronchial asthma, it is possible to timely predict this pathology, aimed at identifying risk groups and conducting timely primary prevention of the manifestation of bronchial asthma and allergic rhinitis. The presence of endotoxemia was established in allergic rhinitis, characterized by a high level of endotoxin during the period of exacerbation [(1.88+0.3) EU/ml, control (0.002+0.001) EU/ml, $p<0.001$)], and its decrease during remission - (0.25+0.2) EU/ml, $p<0.001$. The level of endotoxin is characterized by its high value in the combination of allergic rhinitis and bronchial asthma and depends on the severity of the disease and the duration of the process. A direct correlation was established between the content of plasma endotoxin and the level of total IgE in the blood, $r=0.59$ ($p<0.001$) and with the number of eosinophils in the blood $r=0.36$ ($p<0.05$), which confirms the pathogenetic significance of endotoxin in combined forms of allergic rhinitis. Positive data on the clinical efficacy of the use of Lactofiltrum preparations as an enterosorbent and Korilip in the complex therapy of the acute phase of allergic rhi-

nitis have been obtained. At the same time, an 8-fold decrease in the level of endotoxemia was achieved, which contributed to the early relief of symptoms of allergic rhinitis. The use of a mixture based on goat's milk in children with early altered reactivity, who are on artificial and mixed feeding, reduces the risk of developing an atopic march by 1.7 times.

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RENEWABLE ENERGY SOURCES AS A MEASURE TO PREVENT THE DEPLETION OF THE OZONE LAYER

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Aim:: We all know that since the 20th century, the level of air and environmental pollution is increasing as a result of the development of industrial technologies and climate change. The air contamination compromises the ozone layer and consequences in the formation of the Ozone Hole, resulting in greater incoming radiation to earth it potentially disrupts the biological life and processes. Ozone layer depletion resulted from rapid industrialization, high consumption of chlorofluorocarbons (CFCs) and halons, and global warming have further worsened the problem towards more destruction. The industrial exhaust gases and automobile fuel gases produced as a result of urbanization create a greenhouse effect and this is the main factor leading to depletion of the ozone layer which causes damaging by excess ultraviolet lights. Reducing the fossil fuel contribution to the global energy system, and in particular doing so with renewable energy sources, is a great challenge for the world community. Main part: Among the renewable energy sources, hydropower is presently the most important source for electrical power generation. It also provides grid stability and reliability, as well as balancing support to intermittent renewable energy, such as wind and solar power. The global contribution of hydropower, in a 40-year perspective, is estimated to be around double that of today.

Bioenergy is an all-round energy source, which can be used for production of electricity, heat, and fuels. The major future biomass energy option is expected to be residues from forestry and agriculture, along with organic wastes. By 2050, the bioenergy contribution is expected to be about 20% of the global energy supply and 10% of global electricity production.