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CLINICAL-EPIDCLINICAL-EPIDEMIOLOGICAL ASPECTS OF HYMENOLEPIDIOSIS IN PEDIATRIC AND EPIDEMIOLOGICAL ASPECTS OF HYMENOLEPIDIOSIS IN PEDIATRICS

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Abstract: According to statistics from the World Health Organization (WHO), more than 4.5 billion people in the world are infected with various parasites, many of which are helminths [1, 2]. According to WHO, of the 50 million people who die each year worldwide, more than 16 million die from infectious and parasitic diseases (WHO, 2005). In the structure of infectious diseases, the fourth place is occupied by parasitic diseases [3, 4]. An analysis of the distribution of patients by age showed that hymenolipidosis was recorded mainly in children from 4 to 11 years old. When comparing clinical signs in the patients studied in the article, memory loss, increased nervousness, depressed mood, eyelid cramps, and blinking due to astheno-vegetative symptoms were significantly higher (P<0.001) in patients with hymenolipidosis.

Key words: helminthiases, hymenolepiasis, children, clinic.

Target. To analyze the dynamics of the main clinical and laboratory parameters in children suffering from hymenolepiasis with allergic rhinitis against the background of antiallergic, antiparasitic and combination therapy

Materials and methods. To solve the tasks set, a clinical examination of 120 patients with intestinal parasitosis in children aged 4 to 18 years was carried out in the Bukhara Regional Infectious Diseases Hospital. The diagnosis of hymenolepidosis was confirmed by the detection of Hymenolepis nana eggs on triple coproscopy. Parasitological examination of the stool was performed 3 times with a break of 3-4 days. The diagnosis of hymenolepiasis was confirmed by the detection of helminth eggs in freshly excreted feces.

Results and discussion. To solve the tasks set, clinical and epidemiological examinations of 120 patients with intestinal cestodosis (hymenolipidosis) in children aged 4 to 18 years were carried out. Children were distributed as follows: from 4 to 7 years old - 52 children, from 8 to 11 years old - 33 and from 12 to 15 years old 19, 16 to 18 years old 16. Boys 54 (45.0%) and 66 girls (55.0%). Thus, the analysis of distribution by age showed that hymenolipidosis was recorded mainly in children from 4 to 11 years old.

Conclusions. Thus, the analysis of distribution by age showed that hymenolipidosis was recorded mainly in children from 4 to 11 years old. An analysis of the clinical manifestations showed that the astheno-neurotic symptoms that were noted in helminthiases were more pronounced in patients with hymenolipidosis. Hymenolipedosis in children leads to an increase in the occurrence and development of various secondary diseases, which is distinguished by a peculiar clinical course.

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It has a clear relationship with the severity of Hymenolipedosis and the frequency of development of various secondary diseases in children.

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