

PNEUMONIA IN CHILDREN BORN WITH HEART DEFECTS

**YURAK PAROKLARI BILAN TUG'ILGAN BOLALARDA PNEVMONIYA
KECHISHI
ТЕЧЕНИЕ ПНЕВМОНИИ У ДЕТЕЙ РОЖДЕННЫХ С ПОРОКАМИ
СЕРДЦА**

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Annotatsiya: Pnevmoniya – bu har qanday yoshdagi odamlarga, shu jumladan chaqaloqlarga ta'sir qiladigan keng tarqalgan nafas yo'llari infeksiyasi. Biroq tug'ma yurak nuqsonlari bilan tug'ilgan chaqaloqlarda pnevmoniya rivojlanishi ayniqsa og'ir. Ushbu maqolada biz tug'ma yurak nuqsonlari bilan tug'ilgan chaqaloqlarda pnevmoniya bilan bog'liq xavf omillari, belgilari, diagnostikasi, profilaktika choralarini o'rganamiz.

Kalit so'zlar: Taxikardiya, hansirash, tromboz, infeksiya, sianoz, virus, stenoza, gipervolemiya, bronx obstruksiya, gipoksemiya

Аннотасия: Пневмония – распространенная респираторная инфекция, поражающая людей всех возрастов, включая младенцев. Однако у детей, рожденных с врожденными пороками сердца развитие пневмонии особенно тяжелое. В этой статье мы рассмотрим факторы риска симптомы диагностику профилактические меры связанные с пневмонией у детей рожденных с врожденными пороками сердца

Ключевые слова: Тахикардия одышка тромбоз инфекция цианоз вирус стеноз гиперволемиа бронхиальная обструкция гипоксемия

Annotation: Pneumonia is a common respiratory infection that affects people of all ages, including babies. However, the development of pneumonia in babies born with congenital heart defects is particularly severe in this article. We will study the risk factors, symptoms, diagnostics, preventive measures associated with pneumonia in babies born with congenital heart defects.

Key words: Tachycardia, short of breath, thrombosis, infection, cyanosis, virus, stenosis hypervolemia, bronchial obstruction, hypoxemia

Congenital heart defects

Congenital heart defects are anatomical defects of the heart, characterized by chromosomal disorders, gene mutations, and heart and hemodynamic disorders caused by various viral diseases, radiation, and drugs during pregnancy. In the origin of defects, chromosomal disorders account for 5%, genes mutation can be 2-3%, environmental influence 1-2%, polygenic factors 90%. In children with heart defects, symptoms such as sweating, tachycardia, shortness of breath, cyanosis, pulsation in veins, refusal of the breast and fatigue during sucking are shown. These defects vary in severity, ranging from minor problems that may not require treatment to complex conditions that require emergency medical intervention. Such children are more susceptible to various infectious diseases, including pneumonia. There are several types of defects according to the effect on blood circulation in the lungs:

Pulmonary circulatory disorders: Open Batalov path, child-like aortic coarctation, Lutambashe syndrome, tricuspid atresia with a large defect of the interventricular septum

Pulmonary malformations: Triad of Fallot, small ventricular septal defect, Ebstein's anomaly

Varicose veins causing changes in the small blood circulation: aortic valve insufficiency, aortic stenosis, mitral insufficiency, pulmonary artery valve insufficiency, mitral stenosis, coronary artery and heart conduction system defects.

Risk factors: Several factors increase the risk of pneumonia in children with congenital heart defects. These factors include immune system disorders, anomalous cardiac anatomy, respiratory dysfunction, and the presence of other relevant medical conditions. In addition, hospitalization, surgery, and the use of medical devices may increase the risk of pneumonia in these children.

Symptoms: Pneumonia is an acute infectious disease that occurs in all structural and functional units of the lung parenchyma and is manifested by damage to the lower part of the respiratory tract. Pneumonia occurs in 5-20 of every 1,000 children in early childhood, and in 3 of every 1,000 children in children older than 3 years. Pneumonia is the single biggest cause of death in children, accounting for 14% of deaths in children over 5 years of age and 22% of deaths in children between 1 and 5 years of age. Among infants, pneumonia is caused by influenza, parainfluenza, and measles viruses. , among children under 1 year old, mainly pneumococci, in preschool age, proteus, klebsiella, blue pus bacillus, golden staphylococcus cause. As a result of damage to the alveoli, gas exchange is disturbed, hypoxemia, respiratory acidosis and hypercapnia occur, as a result of which respiratory failure develops. In children, high and prolonged body temperature, weak, deep cough, rapid breathing, wheezing, cyanosis in the nasolabial triangle, tachycardia, swelling of the nasal wings, swelling of the joints, refusal to eat,

loss of body weight are observed. According to the form and localization of the inflammatory process:

§ Focal – the affected area is clearly demarcated, not less than 1 cm, can be single or multiple

§ Segmental – several segments of the lung are affected

§ Kruposis – damages a part of the lung

Interstitial – damages the connective tissue of the lungs

Diagnosis: The diagnostic process often includes a complete physical examination, analysis of clinical symptoms, chest x-rays, blood tests, and other studies.

Conclusion: As a result of pneumonia, the entry of bacteria into the blood and other organs can lead to dangerous complications such as accumulation of pus in the lungs, exudative pleurisy, and shortness of breath. Recognizing symptoms, making an accurate diagnosis, and implementing appropriate treatment are important to ensure the best outcomes in these children. By understanding risk factors and taking preventive measures, health care providers and parents must work together to minimize the occurrence and impact of pneumonia.

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