ANALYSIS OF ANTIBACTERIAL THERAPY OF ACUTE RESPIRATORY DISEASES IN CHILDREN.

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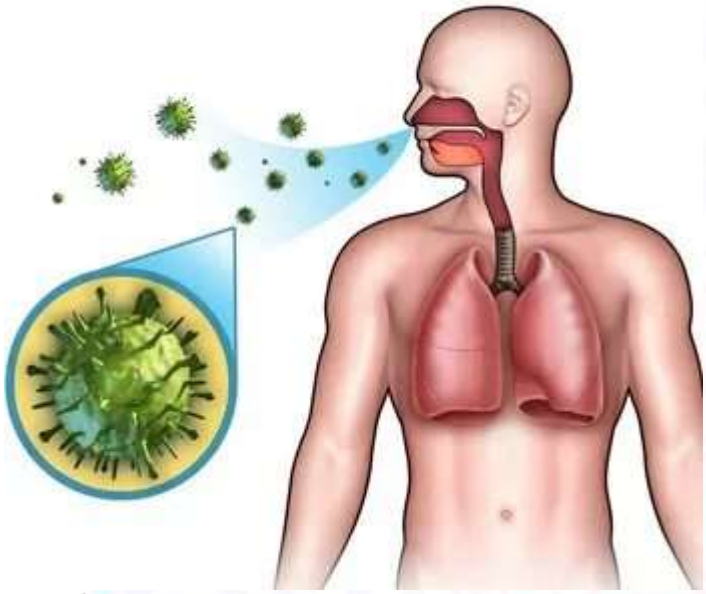
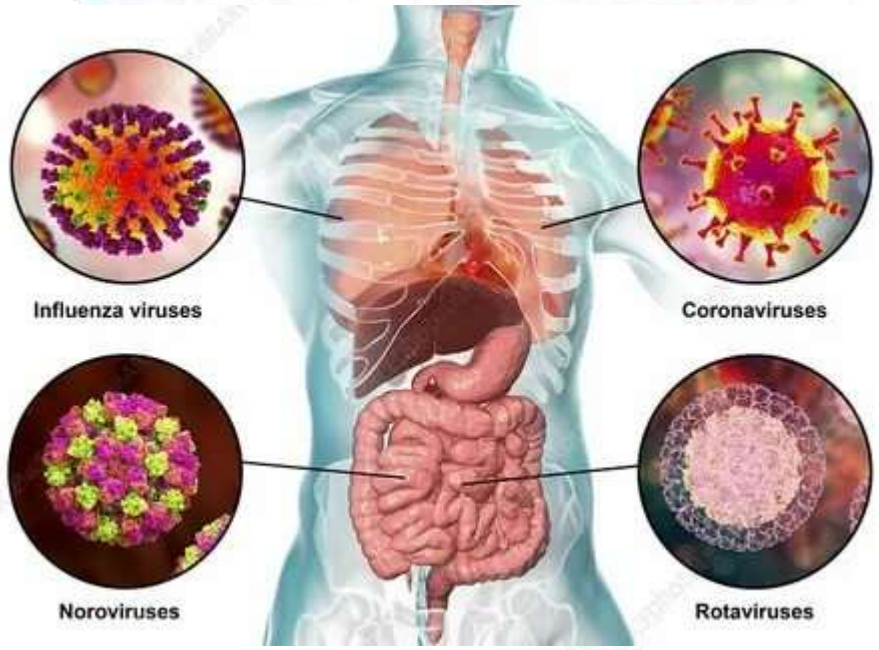
Abstract. ARI is an abbreviated name for a group of diseases, which stands for acute respiratory disease. It is characterized by an infectious lesion of the mucous membranes of the respiratory tract, regardless of the localization of the inflammatory process. It is popularly called a cold. ARI affects all age groups, but the disease is especially dangerous for young children and the elderly - among them, the incidence of respiratory infections and the risk of complications are higher. Some acute respiratory diseases can cause epidemic outbreaks with high morbidity and mortality rates. Such epidemiological outbreaks can constitute potential public health emergencies of international significance. Examples of such diseases include severe acute respiratory syndrome, avian influenza, and COVID-19. In such cases, early detection of cases of potentially dangerous diseases based on clinical and epidemiological factors, isolation and treatment of sick patients, and the transfer of information to health authorities play an important role. Potentially dangerous diseases may be suspected when a patient is diagnosed with a severe acute respiratory disease of unknown etiology with fever (from 38 °C), which may be accompanied, for example, by cough and shortness of breath, as well as when other severe diseases of unknown etiology are detected, for example, encephalopathy or diarrhea. Epidemiological signs may include visiting countries during the incubation period where cases of a potentially dangerous disease have been recorded, possible contact with suspected pathogens, and belonging to a group where the disease is spreading.
When cases of acute respiratory disease with fever are detected, the World Health Organization recommends that healthcare workers practice hand hygiene, wear protective medical masks, and, if there is a possible contact of biological fluids with the eyes, wear eye protection (protective glasses or face shields). If there are epidemiological signs of a potentially dangerous disease, it is recommended to wear personal protective equipment, place patients in individual wards for airborne infections, or conduct cohort isolation of patients, when, in the absence of re-infection, patients can be kept and served together (grouped by diagnosis), if the etiology is not clear.

Keywords: (ARI) acute respiratory disease, antibacterial therapy, pathogen, hospitalization, cephalosporins, drug.

Objective: to analyze antibacterial therapy for acute respiratory diseases in children hospitalized in a hospital.

Materials and methods: 82 patients diagnosed with acute respiratory infections who were hospitalized in the infectious diseases department of the Samarkand region, Payarik district, from October to December 2024 were included in the study using the continuous sampling method. Statistical analysis of data: descriptive statistics. Study type - cross-sectional.





Results: analysis of medical records showed that children under seven years of age were predominant, their proportion was 69%, boys were more often ill 60%.

In the first three days from the onset of the disease, 73% of children were hospitalized. In most cases (91%), patients were admitted in a moderate condition, in 8%, the condition was assessed as severe upon hospitalization.

In 52% of cases, antibiotics were used in the treatment of children with ARI. Indications for antibacterial therapy were inflammatory changes in the complete blood count and / or an increase in the level of CRP, the development of bacterial complications. However, antibacterial therapy for the first 4 days from the onset of the disease in the absence of inflammatory changes in the complete blood count and signs of bacterial infection was recorded in 3% of children admitted to hospital.

Analysis of antibacterial therapy showed that ampicillins were used more often (22%), the share of macrolides was 23%. The use of cephalosporins in hospital was due to the prescription of other antibiotics in the absence of their effectiveness at the outpatient stage. In general, cephalosporins were prescribed in 47% of cases, of which the second and third generations were prescribed in equal shares. In 13% of cases, children received two or more antibacterial drugs, of which 75% were replaced by β-lactam antibiotics with other groups of antibacterial drugs. **Conclusions:** thus, in patients with ARI, in 67% of cases, the infection proceeded without complications and inflammatory changes in the general blood test. Every third child (37%) with ARI needed to be prescribed antibacterial therapy, in half of the cases, β-lactam drugs were the starting antibiotics. In 9% of cases, two or more antibacterial drugs were required to treat ARI.

Literatures.

1. Boltayev Komil Sultonovich, and Davron Abdixakimovich Xo'Jaqulov. "PIYOZ–ALLIUM CEPA NEMATODALAR FAUNASI." *Academic research in educational sciences* 2.11 (2021): 1213-1218.
2. Хужакулов Даврон Абдихакимович. "Особенности течения пищевых токсикоинфекций." *Педиатр* 8.S (2017).
3. Abdikhakimovich K. D. (2023). ANTIMICROBIAL SUBSTANCES OF LACTIC BACTERIA AND PRACTICAL ASPECTS OF THEIR USE. *ОБРАЗОВАНИЕ НАУКА И ИННОВАЦИОННЫЕ ИДЕИ В МИРЕ*, *33*(1), 32-37.
4. Абдихакимович Х. Д. (2024). O 'TKIR RESPIRATOR KASALLIKLAR BILAN OG 'RIGAN BOLALARDA ANTIBAKTERIAL TERAPIYANI TAHLIL QILISH. *Ta'limning zamonaviy transformatsiyasi*, *10*(1), 211-213.
5. Хужакулов Д. А. (2018). ЭФФЕКТИВНОСТЬ ПРОБИОТИК" ЭНТЕРОЛ" В КОМПЛЕКС ЛЕЧЕНИЯ БОЛЬНЫХ С БАКТЕРИАЛЬНОМ ДИАРЕЯМИ У ВЗРОСЛЫХ И ДЕТЕЙ. In *Молодежь и медицинская наука в XXI веке* (pp. 221- 222).
6. Xudjaqulov D. A., Oripova, P. O., & Boboqandova, M. F. (2022). SURUNKALI

BRUSELLOZ KASALLIGIDA FIZIOTERAPIYA MUOLAJALARINI QOLLASH XUSUSIYATLARI. *Экономика и социум*, (3-1 (94)), 154-160.

7. Юсупов М. И., Одилова, Г. М., & Жамалова, Ф. А. (2021). Появление гемолитеческих свойств у кишечных палочек в зависимости от состава питательной среды. *Экономика и социум*, (3-2 (82)), 602-606.
8. Нарзиев Д., & Шайкулов, Х. (2023). Чувствительность к антибиотикам salmonella typhimurium, находящихся в составе биопленок. *Евразийский журнал медицинских и естественных наук*, *3*(1 Part 1), 60-64.