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CARDIOVASCULAR DISEASES IN CHILDREN AND THEIR PREVENTION.

***Abstract:** this article, cardiovascular diseases and their prevention in children, thinking about cardiovascular system and blood diseases in children and their prevention.*

***Keywords:** cardiovascular diseases, congenital heart disease, anticonvulsant, pregnancy, Antiepileptic drugs , cardiovascular system.*

If most cardiovascular diseases in adults are associated with changes in coronary vessels, in childhood these are mainly congenital defects. The term "congenital heart disease" is generalized to various diseases that occurred before birth due to a disorder in the development of the heart. Congenital heart disease in children is rare. Rather, it is the most common of birth defects. Of the 1,000 newborns, 8-10 are born with a heart defect. If you look closely at these numbers, it turns out that in cases of stillbirth this frequency is much higher, the data changes to 79 per 1,000 births.

A heart defect can be obvious at birth, but sometimes not noticeable for several years. With the help of ultrasound, heart defects in the fetus are detected from the 16th week of pregnancy. However, a reliable examination is possible only from the 20th week. Ultra-sound research is determined by the obstetrician-gynecologist. Further research is carried out in specialized centers. The procedure is prescribed after detailed advice from parents.

In the first weeks of life, the fetus forms an atrium, a heart chamber and an arterial system. There are two ventricles of the heart and the formation of two

atria. Since the Septa separates the muscle spaces, this leads to complex rotational processes. A violation of this stage of fetal heart development is caused by a birth defect, as a result of which in most cases a person does not know the real reason for its appearance. Most congenital heart defects (about 80%) occur without specific causes. Eight percent of newborns have a genetic defect. It is believed that viral diseases (blood infections during pregnancy), excessive use of alcohol and certain medications can cause fetal heart defects early dates pregnancy.

Most often, heart defects occur against the background of antiepileptic therapy. Of every 300 women with epilepsy, 1 is dependent on medication. If the mother takes anticonvulsant drugs, the risk of heart defects in the child increases by one and a half times. Retinoids and lithium also affect the development of the heart.

Antiepileptic drugs

Some known causes are evils-infectious diseases during pregnancy. Rubella, cytomegalovirus and herpetic infection transplanted in the first three months of pregnancy are associated with the development of congenital heart defects. Maternal diabetes leads to malformation of the fetus in 2-16 percent of cases. depends on the metabolic state. Very important optimal blood glucose level control. Metabolic disorders can also cause heart defects in 15% of cases. In addition to mental retardation, growth delays and the appearance of typical facial dimorphisms, about 29% of cases of alcoholism during pregnancy lead to malformations of the heart. Contrary to popular misconception, cigarette smoke does not cause heart muscle defects. Knowing the symptoms is important for early detection of defects. In some children, they become noticeable immediately after birth: cyanosis, difficulty breathing or drinking, and in others, the defect is detected only after a few days or weeks, months or even a year.

Some heart defects are associated with severe cyanosis after birth. Other congenital heart defects lead to lighter cyanosis later in life. Separately, a group

of congenital heart defects is distinguished, in which severe cyanosis does not develop. strong cyanosis lower extremities child

Other typical symptoms of heart disease include rapid heart rate and respiration, edema (accumulation of fluid in tissues), rapid fatigue, hyperhidrosis of the extremities, and weak growth. For children with diseases, the cardiovascular system needs more care. However, many children with small defects have no or almost no symptoms.

Often, the reason for the appointment of a referral to a pediatric cardiologist is a heart that worries parents. After birth, the baby must get used to the new conditions of life outside the mother's body. It is often heard at this stage, which may indicate a heart defect. Sometimes noise appears in the first days of life. Therefore, after the initial examination, about a week later, it is important to carry out a second examination.

In 33% of all infants, heart noise is abnormal in the first 24 hours, while in 70% it is absent. During the first six months of life, any heart noise should disappear. If in the next life the heart noise is heard by the pediatrician, this indicates serious abnormalities in the development of the child's cardiovascular system (CVS). Children have a wide variety of heart defects. Statements about the type of prognosis and therapy are allowed only if an individual heart defect is known for certain.

The most common heart disease (22% of all heart defects) is . A small defect in the muscular part of the septum can close on its own does not lead to youthful and functional disorders. But the defect can be so large that it poses an acute danger to the child, then surgery is needed to restore the integrity of the septum.

Solitary heart defects such as ventricular or atrial septal defects have relatively low mortality, while rare malformations are associated with increased risk. A child with a heart defect will not be able to be treated with just one drug,

but they are used as adjuvant therapy. Effective correction of a heart defect is often possible only with surgical intervention.

Some common heart defects:

Deficiency interventricular septum (DMP) is the most common congenital heart defect. In 30-50% of cases, DMP closes on its own in the first years of life. Adult VSDs undergo surgery within the first six months after birth. Medium and small clinical signs that do not give need medical intervention;

(ASD) is also a common malformation, accounting for six to eight percent of all congenital anomalies. according to scientific research. up to operative correction school age is a mandatory measure for the treatment of children.

Open aortic canal. It is more common in girls and premature babies. In the first years of life, it is treated surgically.

Congenital and acquired heart defects are similar in their effect. Among the acquired defects, the heart valve is the most common aortic diseases and mitral valve. Due to antibiotic prophylaxis of rheumatic complications, mitral and aortic valve defects became less common.

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