



ANALYSIS OF CLINICAL-EPIDEMIOLOGICAL FEATURES OF ACUTE INTESTINAL INFECTIONS

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Relevance of the Problem

According to the World Health Organization, acute intestinal infections (AII) rank among the leading infectious diseases affecting both children and adults. Analyzing the statistics of infectious diseases, respiratory diseases are the most common, followed by AII. Annually, approximately 1–1.2 billion people worldwide contract acute intestinal infections, with an estimated 5 million fatalities. The widespread nature of AII, diagnostic challenges, severe clinical courses, frequent complications, and economic losses make it a critical public health issue.

Research Objective

To analyze the clinical and epidemiological characteristics of patients with acute infectious intestinal diseases.

Materials and Methods

The study was conducted on patients hospitalized in the Samarkand Regional Infectious Diseases Hospital. Medical records, clinical, and laboratory data of patients were analyzed. Statistical methods used included Pearson's correlation coefficient and Fisher's exact test. Diagnostic standards involved general blood, urine, and stool analyses, as well as bacteriological examinations. Serological methods were also employed when necessary.

Results and Discussion

The study analyzed the epidemiological characteristics of 144 patients. The majority of cases occurred during the summer months, from May to November. Epidemiological surveys revealed that the disease was most commonly contracted through the consumption of salads, fruits, vegetables, and melons, as well as through contact with individuals exhibiting diarrhea. Epidemiologically linked cases accounted for 78.4%, while unlinked cases comprised 21.6%.



Age-specific analysis indicated that the disease was most prevalent among individuals aged 19–30 and 31–40 years. The distribution of hospital admission days was as follows:

- First day: 32 patients (22.2%)
- Second day: 63 patients (43.8%)
- Third day: 28 patients (19.4%)
- Fourth day: 14 patients (9.7%)
- Fifth day: 7 patients (4.9%)

Clinical symptoms included signs of intoxication, fever, nausea, vomiting, epigastric pain, and diarrhea without mucus in 78.4% of cases. The presence of mucus in stool was observed in 14.6%, and both mucus and blood in 7% of patients.

Regarding disease severity, moderate cases were found in 122 patients (84.7%), while severe cases were observed in 22 patients (15.3%). Mild cases were not observed among those admitted to the hospital.

Comorbidities such as hypertension, chronic cholecystitis, hepatitis B, pancreatitis, brucellosis, and fatty liver disease were noted in 24.7% of patients.

Laboratory tests revealed that all patients underwent coprological and bacteriological stool analyses. Pathogens were identified in 29.8% of cases, while 70.2% had an unknown etiology. Identified microorganisms included *Staphylococcus aureus*, *Proteus mirabilis*, and *Klebsiella pneumoniae*.

Conclusion

Acute intestinal infections predominantly occur during the summer months. Epidemiologically linked cases accounted for 78.4%, while unlinked cases comprised 21.6%. The highest incidence was observed among individuals aged 19–40 years. Bacteriological examination identified pathogens in 29.8% of cases, with the remaining cases having an unknown etiology. Comorbidities were present in 24.7% of patients.

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