



CLINICAL-EPIDEMIOLOGY CHARACTERISTICS OF MEASLES IN CHILDREN

(EXAMPLE OF SAMARKAND REGION)

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Abstract

Measles with sick in children of illness main reasons being vaccination in the process to be medical and the child his parents by to be are limitations. Measles against vaccinated of children disease vaccination their work organize in reaching of violations result to be can Measles spreading and measles furnaces of existence reasons patients own on time determination and insulation to do delay as a result organized to groups of measles come in to go to be can Various age in children , both vaccinated and unvaccinated in children measles usually average heavy of forms superiority with continue did Belsky-Filatov-Koplik symptom of the disease catarrhal during measles of diagnosis main sign being remains , rash overflow during catarrhal syndrome with together spotted papulosis of rashes step by step appear to be and pigmentation of the disease main sign being remains

Keywords: measles, children, spotted papulosis rash, catarrh.

Introduction

Research purpose: Samarkand region in the area in children of measles clinical and epidemiological features determination.

Research method and materials: Samarkand region in the area residence who does and province contagious diseases in the hospital under the age of 17 treated has been in children 120 cases of measles studied retrospectively method through deep analysis done. Disease diagnosis immunoenzyme analysis method with approved.

Research results and discussion: Research during measles with those who are sick between the ages of 17 and up from 120 (100%) children to measles against 32 (26.6%) were not vaccinated did (Figure 1).



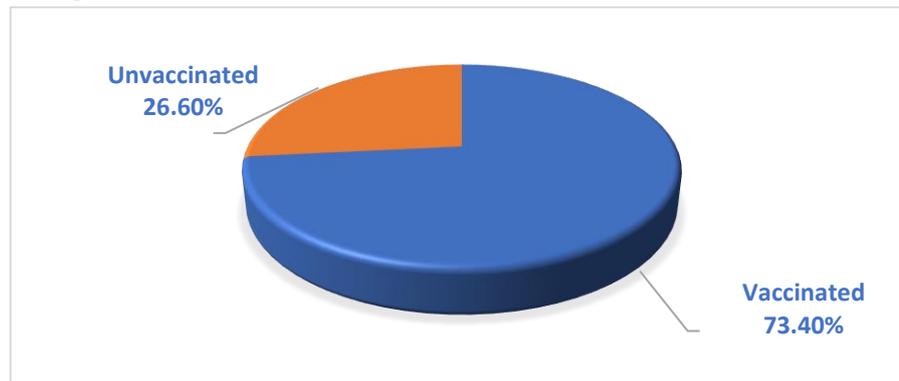


Figure 1. Measles with in patients' vaccination status status

Vaccination status this in the case the result indicator as in the child vaccination age period medical restriction presence, parents by refusal to vaccinate because of, moved walker children the number at the expense of observed. Above data that's it shows that measles with illness probability from 1 year small has been unvaccinated, family in the ovens in communication those who have, to measles against unvaccinated from 1 year old big in children more observed.

Measles catarrhal of the era main clinical in signs fever, mouth space mucus curtains, people and the eye of the conjunctiva hyperemia such as clinical characters superiority did and this clinical characters of the patient to his age depends without manifestation it has been. Laryngitis clinical signs expressed in 64 (53.3%) patients happen has been and one from the age small has been in children often developed, to tracheitis depends without dry cough observation while one from the age big to the children special were 56 (46.7%) (Fig. 2).

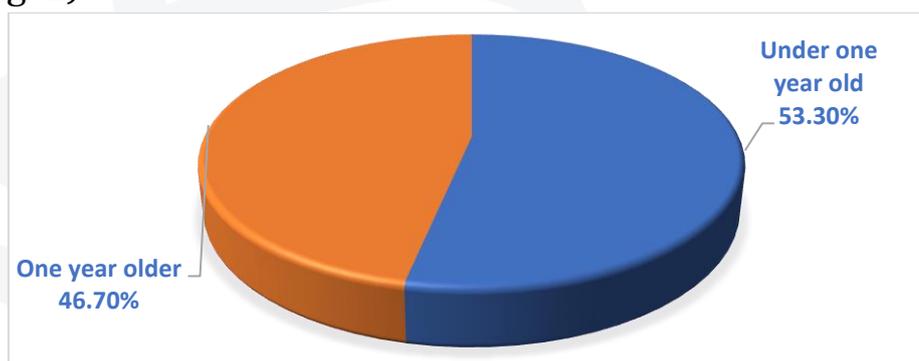


Figure 2. High breath ways damage to age dependence

Measles catarrhal of the era characteristic signs Belsky-Filatov-Koplik spots in 83 (69.2%), measles enanthema was found in 37 patients (30.8%). and them determination level asi big age in children high was (Fig. 3).

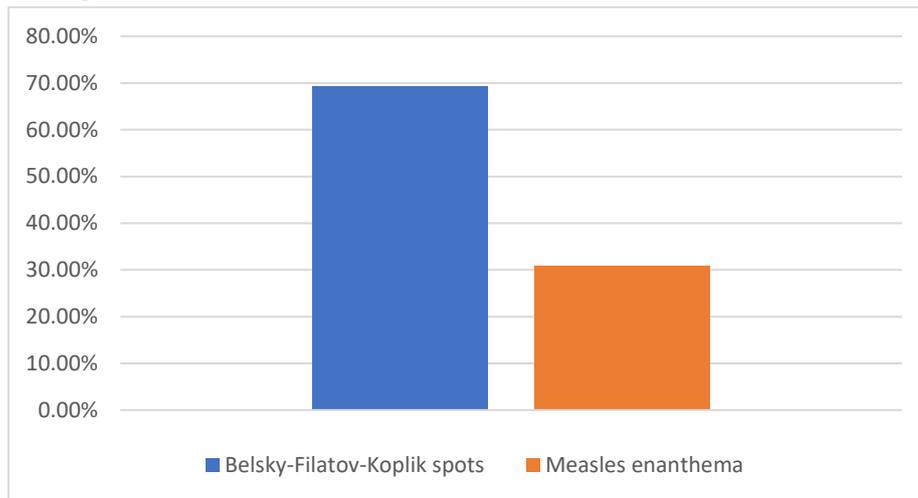


Figure 3. Measles catarrhal period characteristic signs

3 years old in 35 (29.2%) patients and from 4 years old increased in 17 (14.1%) patients enteritis in the clinic feces break up number 6.7 ± 2.5 times and duration 3.9 ± 1.5 days was

Rash overflow period body temperature rise with together was observed and this the condition is from 4 years old increased in children more manifestation that's it, word of mouth mucus on the floor catarrhal syndrome, cough increase, eye rejuvenation, light fear such as clinical characters obvious observed. Rashes overflow during rashes step by step overflowing, to each other to join tendency, spotted-papular in character overflow with manifestation it has been. in 105 (87.5%) patients of rashes nature spotted papulosis, in 15 (12.5%) patients rash small spotted and hemorrhagic in character observed.

Pigmentation period as usual continue did and noted in 87 of 120 patients (72.5%). done, one from the age small has been in children pigmentation light level observed. Measles smooth course in 95 (79.2%) patients, in 25 (20.8%) patients smooth didn't happen without pass observed. Measles smooth didn't happen of passing reasons of the following consists of: bronchitis - 11 (44%), pneumonia-7 (28%), companion somatic exacerbation of diseases -3 (12%), stomatitis-2 (8%), otitis - 2 (8%) in children observed. Complications difficult it didn't take long and complete get well with completed (Figure 4).

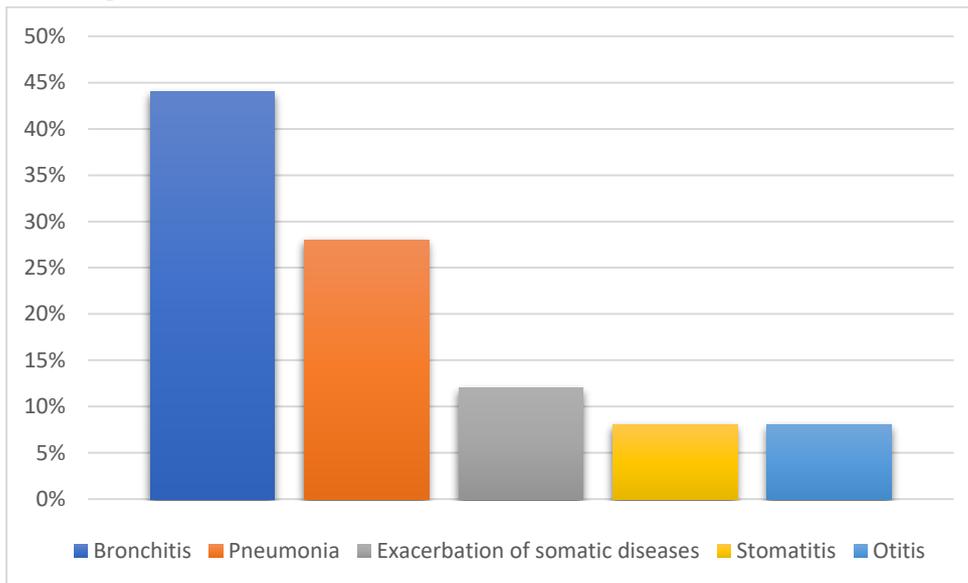


Figure 4. Measles smooth didn't happen without excuse me reasons

Conclusions:

1. Samarkand in the region measles with of illness young composition when studied to measles against unvaccinated 2-3 years old children and from 1 year old small non-vaccinating children superiority did
2. Measles with infected from 1 to 17 years was in children vaccination the effect lack of main reasons be medical restrictions, rarely cases from vaccination head drag as well another from the territories those who came for vaccination about of information not enough
3. Measles against vaccinated children of the disease reasons the following to be possible: the vaccine transport and storage of the rules violation, vaccination rules, measles against vaccination about official of information to the population completely arrived not going
4. Various age in children of measles clinical pass in those vaccinated light and in the unvaccinated usually o ' average heavy of forms superiority with continue did
5. Measles main diagnostic signs of the following consists of: Belsky - Filatov - Koplik symptom - of the disease catarrhal during the period, spotted - papulosis natural don't rush appear to be tiered rash - rash during and pigmentation period observation of the disease main diagnosis sign be remains
6. Measles with the sick own on time determination and insulation make, organized children to the teams measles with the sick to fall an exception do, in the hospital measles spread prevention get, children to measles against planned two times vaccination their work transfer (95%) and in those vaccinated immunity serological control to do need



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