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The clinical and laboratory characteristics of congenital pneumonia in newborns

Shamsiev Furqat Muxitdinovich
Ministry of Health of the Republic of Uzbekistan Republic of specialized pediatrics scientific-practical head of the pulmonology department of the medical center, Ph.D., professor

Musajanova Ra'no Anvarbekovna
Ministry of Health of the Republic of Uzbekistan Republican specialized pediatric scientific and practical medicine leading researcher of the center's pulmonology department, Ph.D.

Ismoilova Shamsiya Soxibnazar qizi
ismoilovashamsiya4@gmail.com
Assistant of the Department of Pediatrics, TMA Termiz Branch, Children's Diseases Propidevology, Children's Diseases and Family Medicine

Xudoynazarov Haydarqul Soxibnazar o'g'li
Assistant of the Department of Medical Biology and Histology, TMA Termiz branch

Abstract: It is said that the newborn a clinic for pneumonia in babies with a number of features and only with a hearth and breathing without signs of systemic inflammation can be manifested with a violation.Some researchers fever and tachypnea presence in newborns an important diagnostic sign of pneumonia they believe that. Pneumonia is inflammation of the lungs, an infectious disease of the lungs, an independent disease or a complication of other diseases.

Keywords: Congenital pneumonia, Newborns, Clinical features, Laboratory characteristics, Diagnosis, Treatment,Respiratory distress

Congenital hypothyroidism is one of the most common and serious pathologies among newborns, with a high mortality and morbidity rate. This disease can be transmitted from mother to child before or during birth. The purpose of the article is to review the clinical and laboratory characteristics of congenital zoster and to highlight diagnostic and treatment strategies. According to WHO, pneumonia the "gold standard" of diagnosis infiltrative on X-ray are changes. Born in our country features of the pneumonia clinic studies have not been conducted.According to WHO, the fetus.The infection causes the death of children the first among infections takes place. Congenital on examination infections in dead fetuses and premature births children occur in 82%. In particular modern technological treatment implementation of methods. This morphological and functional development backward, with uterine infection. A newborn with profound respiratory failure treatment, care in babies provides an opportunity for It's early neonatal infection vertically from the mother transmitted, and subsequently nosocomial in the form of infection, including horizontal is taken Clinical Features.Clinical signs of congenital zotiljam appear in the first days of the life of babies, and it is important to determine their severity.

1. Changes in Breathing - Tachypnea: An increase in the baby's breathing rate (above 60 breaths/minute). - Intercostal and Suprasternal Retractions: Retraction of the ribs and neck area during breathing.

2. Cyanosis.- Central Cyanosis: Blueness of the skin and mucous membranes, a sign of oxygen deficiency.- Peripheral Cyanosis: Bluishness in arms and legs.
3. Grunting on Exhalation.- The baby makes a sound when exhaling, which indicates the presence of resistance in the airways.
4. Body Temperature.- Hyperthermia: High body temperature. - Hypothermia: Low body temperature, which indicates the presence of infection.
5. Signs of the Nervous System.- Lethargy: The baby is very passive.- Irritability: frequent crying and agitation of the baby.
Laboratory Features
Laboratory diagnosis of congenital zotyljam is important for confirmation of the disease and initiation of treatment.
1. Blood Gas Analysis.- Hypoxemia: Decreased oxygen in the blood.- Acidosis: A drop in blood pH, which is an indicator of oxygen deficiency.
2. Blood Analysis.- Leukocytosis: Increase of white blood cells, response to infection.- Leukopenia: reduction of white blood cells, signs of serious infection.- CRP (C-Reactive Protein): An inflammatory marker that indicates the presence of infection.
3. Radiological Examinations. - Chest X-ray: infiltrates or consolidations are detected in lung tissues.
4. Bacteriological Analysis- Blood Culture: Detection of pathogenic microorganisms in blood samples.- Microbiological Analysis: Detection of pathogens from lung secretions, nasal lavage and other fluids.
5. Serological Analysis- Detection of antibodies against viruses, which helps to determine the etiology of the disease. Diagnosis and Treatment Several directions are used in the diagnosis of congenital zotyljam: - Initial assessment based on clinical signs. - Evaluation of laboratory and radiological results.Treatment Methods:- Antibiotics: Broad-spectrum antibiotics are used to manage the infection.- Oxygen Therapy: Reduce hypoxemia by giving the baby extra oxygen.- Mechanical Ventilation: In case of respiratory failure, artificial respiration. Croupous pneumonia is caused by pneumococci. In addition to microbes, pneumonia appears only when certain factors that make the body susceptible to disease (for example, a cold) are also affected. Therefore, croupous pneumonia is more common in winter. People who are addicted to alcohol (alcoholics) are more prone to pneumonia . Croupous pneumonia usually begins suddenly: the temperature suddenly rises to 39.5-40°, the patient has severe shivering, frequent cough, pain in the groin, chest, and pain (pain) increases when breathing, coughing, and coughing. This is because the pleura, which covers the inflamed part of the lung, may also be inflamed. The patient often breathes shallowly (halos), lungs are red. Cold sores around the lips and nostrils, acute cardiovascular failure is observed, the patient's condition worsens. pneumonia is very severe in babies, especially in children suffering from low birth weight, premature birth, rickets, anemia, and hypotrophy, and if timely medical assistance is not provided, it can often cause unconsciousness.

Respiratory failure The assessment is based on 5 criteria made on the scale: skin cyanosis of the lining of the chest tightening of the corresponding areas, breathing wheezing, crying, breathing while taking speed, each indicator from 0 to 2 points was assessed. Statistical analysis SPSS 17.0 software of two independent samples using mean, T-tests comparing q performed, where p is the error probability. Error probability $p<0.05$ significant (5% level of significance - 95%), $p<0.01$ very significant (1% level or 99%), $p<0.001$ maximum significant (0.1% level or

99.9%). Results and its discussion. Current stage congenital pneumonia clinic is polymorphic and has a number of properties was found to be. And so, in most patients on examination a slow reaction is detected (75.5%, $p<0.05$), 8.5% of children ($p<0.01$) became comatose have. In addition, this Clinical manifestations of the disease are severe level is more clear and noticeable is often observed. X-ray In the picture, severe pneumonia of the lungs more extensive inflammation in the tissues characterized by changes. they are as well as more of the disease until death has a complex result.

If the disease is severe, the patient is treated in a hospital. Proper patient care is important, as is the proper use of antibiotics. Cool, clean air improves sleep and breathing, so it is important to ventilate the room where the patient is lying. Drinks (tea, fruit juice), liquid food (soup, boiled eggs, porridge, milk, butter, yogurt, kefir, jelly, etc.) are given frequently. When the patient sweats, wipe with a dry towel, cologne with vodka or an equal amount of water. It is necessary to look at his bowel movements and urination. When the cardiovascular system does not work well, drugs are prescribed to increase its activity, oxygen is breathed, etc. Mustard is placed on the back, drugs that improve cardiovascular activity (for example, corglucon, strophantin) and expectorants are recommended, etc. If irritation occurs, the patient's head should be elevated. The patient should follow a hygienic regimen, walk in the open air, and do therapeutic gymnastics

Summary: Congenital birth defects can cause serious complications in newborns. Early diagnosis and treatment are important to save the baby's life. By correct assessment of clinical and laboratory characteristics, timely detection of congenital malformation and treatment measures can be taken. Therefore, it is necessary to seek medical help as soon as the symptoms of this disease appear in babies. Innate at this stage Features of pneumonia in children many dangers that threaten life clinical manifestations with signs is a polymorphism. The course of the disease depending on the severity, slow to the examination in the clinic reaction dominates. Very rarely, in the form of hyperthermia protective response against inflammation is determined. Physiological reflexes are severe until it is completely suppressed in the course weakens, and in some children – swallowing reflex. The most characteristic of the disease appearance - depression, agitation in children and with convulsion syndrome (92.45%) will pass. Acrocyanosis in many patients, and in severe cases, central cyanosis there is. Muscle up to complete atony characterized by a decrease in tone.

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