

Eurasian Medical
Research Periodical

Platelet deficiency disease among children and adolescents and measures to prevent it

Makhamatov Umidjon Shoirjonovich

Teacher of the Department of Nutrition children and adolescent hygiene of the Fergana public health medical institute

Khabibullayeva Moxichehra Abdulkhamidovna

Laboratory assistant of the Fergana doctor of the Republican scientific center for emergency care

ABSTRACT

This article discusses platelet deficiency disease among children and adolescents and measures to prevent it, as well as the health of adolescents, creating the necessary conditions for their full participation in society.

Keywords:

Thrombocytopenia, platelets, bone marrow disease, oncology, leukemia, chemical and radioactive.

Introduction

On the implementation of the State Program "Year of the Healthy Child" and the provision of medical care to pregnant and postpartum women, the development and strengthening of the system of maternal and child health, the development of a healthy generation. In order to further strengthen and increase the effectiveness of the ongoing work in our country to increase the role and responsibility of the health system: To approve the State program on further strengthening of reproductive health of the population, protection of maternal, child and adolescent health in Uzbekistan for 2014-2018 according to appendix 1 *:strengthening the reproductive health of the population, ensuring wide and uniform access to quality medical services to protect the health of mothers, children and adolescents at all stages of the health system; improving the quality of medical and social rehabilitation of abnormally developed

children, improving the health of children and adolescents with disabilities, creating the necessary conditions for their full participation in society;

The main part

Thrombocytopenia is a disease in which the level of platelets in the peripheral blood drops below 150,000 μ l. Therefore, the small vessels become brittle, any bleeding does not stop for a long time. Usually thrombocytopenia is a symptom of any pathology, but it can also act as an independent disease. The condition is equally common in men and women, often diagnosed in school children and middle-aged people. Platelets are the building blocks of blood. They are produced from megakaryocytes, which are processed by the bone marrow. Megakaryocytes are large cells with many long processes. When they are mature, they separate and enter the bloodstream. Up to 800 platelets are produced

from a single megakaryocyte cell. Platelets resemble flat plates without a nucleus, their size does not exceed 1-2 micrometers. Thrombopoietin is responsible for the production of megakaryocytes. It is a hormone produced in the liver, kidneys and muscle tissue. The more platelets in the blood, the slower the synthesis of the substance. This helps the body regulate platelet levels. If any malfunction occurs, the body stops producing thrombopoietin. The number of platelets in the blood is significantly reduced - and thrombocytopenia develops. Doctors distinguish the following forms of this pathology: Autoimmunity. The immune system begins to perceive its own platelets as foreign objects and attacks them. The body itself destroys these blood cells;

Important.

It is most common in people over 50 years of age. Often underwent iron deficiency, diseases of the internal organs, underwent surgery; Thrombocytopenic purpura. It is usually diagnosed in boys, mainly girls. Develops due to impaired blood clotting; Thrombocytopenia in newborns. Congenital anomalies, infections of infants, are formed due to premature birth. It is common to classify thrombocytopenia according to severity. It can be: Light. Platelet count is at the lower limit of normal, there is no manifestation of the disease. The disease is diagnosed accidentally, often during regular medical examinations; Average. The concentration of red blood cells is below normal. One may complain of light bruises, extensive bruising with nosebleeds. The greatest risk is associated with the threat of internal bleeding; Heavy. Significant deficiency of platelets in the blood. This is manifested by extensive bleeding in the internal organs. Causes of thrombocytopenia There are 3 main mechanisms of development of thrombocytopenia: impaired platelet formation, their redistribution in the spleen, or accelerated consumption. Therefore, the causes of this disease can be many. The following factors often influence the development of thrombocytopenia: Hereditary diseases that cause pathological bleeding: Bernard-Surya

syndrome, May-Hegglin, TAR; Pathologies that prevent the formation of new platelets: bone marrow diseases, oncology, leukemia, reactions to chemical and radioactive elements, alcohol consumption; Diseases in which the body rapidly consumes platelets: diffuse intravascular coagulation syndrome, impaired immunity; Enlargement of the spleen. The spleen is a storehouse for platelets. This is where they are stored. If the organ is enlarged, it removes a significant amount of red blood cells from the bloodstream. Bone marrow cannot compensate for this deficiency;

Autoimmune factors.

If the immune system is compromised, the body begins to destroy its own platelets on its own. Systemic lupus erythematosus can occur due to encephalomyelitis; Taking certain medications. The active ingredients of the drugs can destroy platelets and interfere with their production by the bone marrow. Long-term use of cytostatics always leads to a similar effect.

Forecasting and prevention

Thrombocytopenia is a dangerous disease that poses a great threat to the life and health of the patient. Anemia is common and vision loss can occur due to bleeding in the retina of the eye. Neglected forms can cause bleeding in the internal organs, the brain. In most cases, this leads to death. There is no specific prophylaxis for thrombocytopenia. Experts make the following recommendations: Have a general blood test every year, get a general medical examination; Eat right and complete: eat as much meat and fresh vegetables as possible; Exercise and lead an active lifestyle; Refuse self-medication: taking aspirin and steroids should be under strict medical supervision; Try to avoid any procedures that involve the risk of cutting (shaving, manicure); Timely treatment of any infectious processes; Follow precautions when working with chemicals; Avoid bad habits: Alcohol consumption slows down platelet production.

Conclusion

Thrombocytopenia is a disease that requires constant medical supervision. If you suspect you have it or know about the pathology and want to get rid of it, contact Medskan Medical Center. Experienced physicians will make the necessary diagnoses and develop an individual treatment regimen.

References:

1. Belokon N.A., Kuberger M.B. Bolezni serdsa i sosudov u detey. M.1987, p.303-338.
2. Belozеров Yu.M. Children's cardiology. M. 2004. 597 p.3. "Sick children of early age", - handbook for doctors under redaksiey A.A.Baranova, - M oskva-Ivanova, 1998, -p.241-257.
3. Denisov M.Yu. Prakticheskaya gastroenterologiya dlya pediatra. M.,2001.5. Kaganov S.Yu. Bronchial asthma in children and their classification. Vkn .: Bronchial asthma in children. Pod red. S.Yu. Kaganova. M: M edisina 1999;12-27.
4. Klinicheskaya medisina. Spravochnik prakticheskogo vracha. M.,1997, T. 1, pp.497-501.
5. Lasisa O.1., Lasisa T.S. Bronchial asthma in the practice of semeynogo vracha. - Kiev: ZAO "Atlant UMS". - 2001. - 263 p.
6. Moshich P.S., V.M.Sidelnikova, D.Yu.Krivchenya. "Cardiology children's age". Moscow, 2004.
7. Nazirov E G., Denisov LN., Ulumbekova EG. Reference guide Prakticheskogo vracha. 2000 god.