

MODERN VIEWS ON INTESTINAL MICROFLORA IN CHILDREN

Oltiboyeva Mavsuma G'ulomovna

Samarkand State Medical University

Assistant at the Department of Pharmaceutical Organization

Bozorova Nigina Sobirjonovna

Samarkand State Medical University

Assistant at the Department of Pharmaceutical Organization

Abstract: *Dysbiosis is a syndrome characterized by a change in the balance between beneficial and pathogenic bacteria in the child's intestines. Diagnosis and treatment of the relevant problem is carried out by a pediatrician or family doctor. Dysbacteriosis is not a separate disease. This is a pathological syndrome that occurs against the background of primary pathologies of internal organs or exposure to provoking factors, accompanied by an increase in the number of harmful bacteria in the baby's intestines. It is worth noting that the term "dysbiosis" appears separately in the literature. Dysbiosis is a problem caused by an imbalance of exclusively bacterial flora, when dysbiosis is a violation of the relationship between all microorganisms (bacteria, fungi, and sometimes viruses).*

Key words: *dysbacteriosis, dysbiosis, bacteria.*

СОВРЕМЕННЫЕ ВЗГЛЯДЫ НА КИШЕЧНУЮ МИКРОФЛОРУ У ДЕТЕЙ

Аннотация: *Дисбактериоз – синдром, характеризующийся изменением баланса между полезными и патогенными бактериями в кишечнике ребенка. Диагностикой и лечением соответствующей проблемы занимается педиатр или семейный врач. Дисбактериоз не является отдельным заболеванием. Это патологический синдром, который возникает на фоне первичных патологий внутренних органов или воздействия провоцирующих факторов, сопровождающийся увеличением количества вредных бактерий в кишечнике малыша. Стоит отметить, что в литературе отдельно встречается термин «дисбиоз». Дисбактериоз – проблема, вызванная дисбалансом исключительно бактериальной флоры, когда дисбиоз – это нарушение соотношения между всеми микроорганизмами (бактерии, грибки, иногда и вирусы).*

Ключевые слова: *дисбактериоз, дисбиоз, бактерия.*

Relevance of the problem. An important and determining link in the process of microbiocenosis formation is the primary colonization of a newborn by bacteria, since in the future the individual's health status and resistance to a number of diseases largely depend on the nature of the intestinal microflora and its activity.

Until recently, it was believed that the formation of microbiocenosis begins at the moment of birth and is determined by the species composition of the microflora of the mother's birth canal. However, since the end of the last century, works began to appear in foreign literature demonstrating the contact of the mother's microflora with the fetus in utero. The discovery by domestic scientists of the "bacterial translocation phenomenon" further cast doubt on the belief that the fetal gastrointestinal tract is sterile. Recent studies have established the identity of the intestinal strains of the newborn and the maternal microflora. These facts indicate that the developing fetus in utero is not sterile, but receives a certain amount of indigenous microorganisms from the mother.

After collecting anamnesis and a thorough analysis of the patient's complaints, the pediatrician examines the little patient. During palpation, bloating and tenderness of the anterior abdominal wall may be noted. To confirm the diagnosis, the specialist prescribes additional tests, microscopic examination of stool, bacteriological examination of stool, and a set of traditional laboratory tests to assess the general level of health.

If the doctor believes that the patient's dysbiosis is a consequence of an exacerbation of some other disease, the child is additionally referred for consultation to related specialists. The state and composition of the children's intestinal microflora is influenced by many factors. One of the main roles in the formation of the gastrointestinal microflora is played by the type of feeding, that is, what a newborn eats: mother's breast milk or artificial formula. Breast milk is a source of many vital substances, including prebiotics - they stimulate the growth and metabolism of beneficial microorganisms in the intestines. In addition to prebiotics, breast milk contains probiotics (bifidobacteria and lactobacilli). They participate in the formation of organic acids, which suppress the development of pathogenic microorganisms in the baby's body.

Unfortunately, in bottle-fed children, the intestinal microflora is poorer and is represented mainly by *E. coli*. This can lead to consequences such as lactase deficiency, which negatively affects the production of lacto- and bifidobacteria. In recent years, in pediatric practice, the frequency of dysbiosis with excessive growth of fungi of the genus *Candida* has increased, and in 10.4% of patients signs of mycogenic sensitization are detected. The implementation of the pathological process in non-invasive intestinal candidiasis occurs due to the intensive reproduction of *Candida* spp. in the lumen of the digestive tube, which induces a stepwise deepening of the deficiency of obligate microbiota and the addition of a mixed infection (in this case, the anaerobic flora is inhibited against the background of the release of the UPM association). In the gastroenterology department of the same hospital, the probiotic was included in diet therapy in the complex treatment of children with gastroenterological pathology and atopic dermatitis. Since dysbiosis associated with *C. albicans* was identified in 77.3% of children, the author's drug "LL-complex" with antimycotic activity was included in

the treatment algorithm for children with this pathology. The following were identified: a main group - 33 children on the background of basic therapy, receiving the "LL-complex" 5 ml per day, and a comparison group - 33 people, on the background of basic therapy, receiving placebo.

REFERENCES:

1. Точилина А.Г., Белова И.В., Соловьева И.В., Жирнов В.А., Иванова Т.П., Мартюхина О.К., Чикина Н.А. формирование микрофлоры кишечника ребенка в онтогенезе и профилактика развития дисбиозов с помощью авторских пробиотиков группы «lb-комплекс» // Современные проблемы науки и образования. – 2016. – № 5.
2. Sobirjonovna B. N. New aspects of the genetic disposition of various forms of chronic nephritic syndrome in children //Journal of Universal Science Research. – 2023. – Т. 1. – №. 6. – С. 778-782.
3. Базарова Н. С., Зиядуллаев Ш. Х. Современные аспекты полиморфных генов матриксной металлопротеиназы и ее тканевых ингибиторов у детей с хроническим гломерулонефритом и прогноз заболевания //журнал гепато-гастроэнтерологических исследований. – 2022. – Т. 3. – №. 1.
4. Алтыбоева М. Г., Бозорова Н. С. СОВРЕМЕННЫЕ ВЗГЛЯДЫ НА КИШЕЧНУЮ МИКРОФЛОРУ У ДЕТЕЙ //Научный Фокус. – 2023. – Т. 1. – №. 5. – С. 109-112.
5. Gulyamovna A. M., Sadriddinovna A. S. Hypotensive properties of the plant salvia submutica //Eurasian Medical Research Periodical. – 2023. – Т. 19. – С. 51-52.
6. Mavsuma O. medicinal properties of sea buckthorn (Hippophae Rhamnoides L.) OIL PLANT //Horizon: Journal of Humanity and Artificial Intelligence. – 2023. – Т. 2. – №. 3. – С. 1-3.
7. Sadriddinovna A. S., Gulyamovna A. M. The relevance of the meaning of plantain in folk medicine //Eurasian Medical Research Periodical. – 2023. – Т. 19. – С. 49-50.
8. Tuychiyeva Sabohat Quraqbayevna. (2023). TOPINAMBURNINR DORIVOR XUSUSIYATLARI. Новости образования: исследование в XXI веке, 2(13), 281–284.
9. Abdukadirova N. B., Telmanovna X. S. Assessment of the Level of Immunoglobulins in the Blood Serum in Young Children Depending on the Type of Feeding //Eurasian Research Bulletin. – 2023. – Т. 17. – С. 164-166.
10. Нарзуллаева М. А. ОСОБЕННОСТИ СВОЕВРЕМЕННОГО ПОДХОДА К АНЕМИЯМ У ДЕТЕЙ //Научный Фокус. – 2023. – Т. 1. – №. 5. – С. 105-108.
11. Нарзуллаева М. А., Туйчиев Н. Х. РАСПОСТРАНЁННОСТЬ ОБЛЕПИХИ В ЗАРАФШАНСКОЙ ДОЛИНЕ //Горизонты биофармацевтики. – 2023. – С. 165-167.

12. Azizxonovna N. M. GULXAYRI OSIMLIGINING DORIVOR XUSUSIYATLARI //Journal of Universal Science Research. – 2023. – Т. 1. – №. 6. – С. 769-772.
13. Нарзуллаева М. А. АЛТЕЙ И ЕГО ПОЛЕЗНЫЕ СВОЙСТВА В МЕДИЦИНЕ //Journal of Universal Science Research. – 2023. – Т. 1. – №. 8. – С. 91-94.
14. Nabieva F. S., Narzullayeva M. A., Bo'Riyev M. G. YUQUMLI KASALLIKLARNI TASHXISLASHDA IMMUNOFERMENT TAHLILINING AHAMIYATI //Research Focus. – 2022. – Т. 1. – №. 4. – С. 161-164.
15. Ахмедов Б., Буриев З. ДОРИВОР АНОР (PUNICA GRANATUM L.) ЭКСПЛАНТЛАРИНИ ТАНЛАШ ВА СТЕРИЛИЗАЦИЯ ҚИЛИШ //Евразийский журнал медицинских и естественных наук. – 2023. – Т. 3. – №. 1 Part 2. – С. 131-134.
16. Akhmedov B., Buriev Z. SELECTION AND STERILIZATION OF MEDICINAL POMEGRANATE (PUNICA GRANATUM L.) EXPLANTS //Центральноазиатский журнал образования и инноваций. – 2023. – Т. 2. – №. 1. – С. 106-108.
17. Tuychieva Sabohat Quraqbоеvna. (2023). BOLALARDA SURUNKALI NEFRITIK SINDROM HAQIDA ZAMONAVIY QARASHLAR. JOURNAL OF UNIVERSAL SCIENCE RESEARCH, 1(6), 773–777.
18. Туйчиева, . С., Одилов, Ж., & Икрамова, Н. (2023). ПРИМЕНЕНИЯ ШИПОВНИКА КАК ПРИРОДНОГО АНТИОКСИДАНТА. Инновационные исследования в современном мире: теория и практика, 2(10), 14–15.
19. Quraqbоеvna T. S. QANDLI DIABETLAR ORASIDA MODY QANDLI DIABETNING TUTGAN O'RNI VA KLINIK TAVSIFI //Journal of Universal Science Research. – 2023. – Т. 1. – №. 8. – С. 85-90.
20. Tuychiyeva Sabohat Quraqbayevna. (2023). Topinamburninr dorivor xususiyatlari. Новости образования: исследование в XXI веке, 2(13), 281–284.
21. Куракбаевна, Т. С. (2023). Особенности диабетической нефропатии в хронических осложнениях сахарного диабета. Scientific Impulse, 1(7), 87–91. Retrieved from <http://nauchniyimpuls.ru/index.php/ni/article/view/5577>