arpetol, interferon) were received by 13.4%. In hospital, all children received antiviral therapy (kagocel, arpetol, interferon). Antibacterial therapy - 80.6% (ceftriaxone, cefotaxime, clarithromycin, amoxicillin, macropen).

Conclusions. The main clinical symptom of acute respiratory diseases is high temperature, which is the reason for seeking medical care and an indication for hospitalization. The blood picture corresponds to the nosological form of the disease and, in combination with the clinical picture, determines the need for antibacterial therapy.

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CHARACTERISTIC OF THE VENTILATING FUNCTION OF RESPIRATORY IN CHILDREN, OFTEN AFFECTING ACUTE RESPIRATORY DISEASES

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Introduction. In recent years, there has been a clear trend in the deterioration of the somatic health of schoolchildren and youth in the world. Many authors have shown that multiple recurrences of acute respiratory infections per year weaken the immune system of children, disrupt the course of metabolic processes. All this is reflected in a decrease in the intensity of age-related development of the physiological systems of the body, in particular the respiratory system.

Objective. To study the nature of deviations in the ventilation function depending on the frequency of diseases of the upper respiratory tract of the lungs in children.

Materials and methods. We examined children, pupils of the 1st - 6th grades of schools in Tashkent, among whom were identified all frequently ill (4-5 times a year) acute respiratory infections. The standard method for examining respiratory function is to record the flow-volume

curve (VVC). The forced expiration test is a kind of functional load, against which even very minor deviations from the norm in the state of the bronchopulmonary apparatus become noticeable.

Results and discussion. In our studies, it was revealed that the majority (up to 80%) of the surveyed schoolchildren, who often suffer from acute respiratory infections, have 2 health groups. Many of them have chronic illnesses. It turned out that the differences in the average values of the indicators of the function of external respiration between frequently ill and healthy children are insignificant. However, according to the level of development of the ventilation system of breathing, most of the frequently ill children have a lower-than-average level. This follows from the quantitative values of the minute volume of respiration, which are one of the main criteria for the age-related development of the respiratory system, which determine the formation of an optimal respiration regime at each stage of ontogenesis.

Based on the analysis of the data obtained, we can say that acute respiratory viral diseases, observed in children 4-5 times a year, lead to a general weakening of the body, a decrease in the level of functional maturity of the external respiration system; which undoubtedly affects their success in school.

Conclusion. The individual physiological characteristics of children, both often suffering from acute respiratory diseases and healthy ones, should be taken into account when teaching them at school, since excessive employment, educational overload leads to a general weakening of the body and, accordingly, to even more frequent diseases. Also, for the successful implementation of educational activities, which are leading for the student, a certain level of functional maturity is necessary.

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