



## Features of the Clinical Course of Cystic Fibrosis in Children, Depending on the Type of Feeding

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**Keywords:** cystic fibrosis

**Relevance.** Of particular interest to modern researchers is the study of cystic fibrosis, which is a rare, but also the most common autosomal recessively inherited genetic pathology, which is a complex medical and social problem.

This disease is characterized by the involvement of almost all organs and systems in the pathological process, and is manifested primarily by pathology on the part of the gastrointestinal tract and respiratory system. At the same time, the generalized dysfunction of the exocrine glands that develops in cystic fibrosis leads to increased viscosity of the secretion of the endocrine glands, to the development of a chronic inflammatory process in the lungs and exocrine pancreatic insufficiency.

Despite the complexity and severity of this disease, its timely diagnosis and treatment allow sick children to reach adulthood with a full quality of life.

**The aim of the study** was to assess the particular clinical course in children with cystic fibrosis depending on the type of feeding.

**Materials and methods of research.** The study included 30 children with cystic fibrosis under the age of 3 years who were admitted for diagnosis and treatment in the Department of Gastroenterology and Pulmonology of the Republican Specialized Scientific and Practical Medical Center for Pediatrics (RSNPMCP, Tashkent). The diagnosis is verified on the basis of clinical and laboratory data. All children included in the study (n = 30), depending on the method of feeding, were divided into three groups. The 1st group included children (n = 6, 20%) who were naturally breastfed, the 2nd - children (n = 6, 30%) who were on mixed feeding (breastfeeding + artificial) and the 3rd - children (n = 15, 50%) who were on artificial feeding

The methods of clinical examination included: a survey, a general examination of patients by organs and systems according to the traditional scheme with detailed complaints.

Statistical analysis of the results was carried out using a package of statistical programs "Microsoft Office Excel" and "Biostatistics 4.03".



**Results of the study.** The results of the clinical examination made it possible to detect in 70% (n = 21) of children with cystic fibrosis the development of mixed, in 20% (n = 6) - pulmonary and in 10% (n = 3) - the intestinal form of the disease. At the same time, children with a pulmonary form were found to have a deformation of the chest, accompanied by shortness of breath and obsessive-compulsive cough with sputum, and children with an intestinal form of the disease had abundant fatty stools with a sharp fetid smell. At the same time, among children with a mixed form of cystic fibrosis, the above manifestations observed in the pulmonary and intestinal forms were detected simultaneously, which accordingly caused a more severe course of the disease.

In addition, some of the characteristics and clinical manifestations of the disease were also detected depending on the method of feeding. Thus, in most children of the 3rd group (n = 12, 40%) after their transfer to artificial feeding in comparison with children of the 1st group, a noticeable lag in their development was found, manifested by a delay in growth and body weight. At the same time, in children of the 2nd group (n = 9, 30%), who were on mixed (breastfeeding + artificial) feeding compared with the 1st group, constipation, vomiting, etc. were more often observed.

### References

1. In terms of the frequency of occurrence and severity of the course of cystic fibrosis, a mixed form (70%) of the disease is relative to it.
2. A more severe course of cystic fibrosis is observed among children who are on artificial feeding