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CLINICAL AND PATHOGENETIC FEATURES OF ACUTE DIARRHEA IN CHILDREN

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Relevance: Acute diarrhea is one of the leading causes of childhood mortality and morbidity worldwide, especially among children with constitutional anomalies. Children under 6 years of age with constitutional anomalies often have a weakened immune status and metabolic disorders, which can aggravate the course of the disease, increase the risk of complications and reduce the effectiveness of standard treatment methods. In conditions of high morbidity and mortality among this group of patients, the study of the clinical and pathogenetic features of acute diarrhea is of particular importance for the development of targeted and effective therapeutic strategies.

Objectives : To study the clinical manifestations of acute diarrhea in children under 6 years of age with constitutional abnormalities.

Results: The study involved 120 children under 6 years of age diagnosed with acute diarrhea, of whom 60 children had constitutional anomalies. Patients with constitutional anomalies had more pronounced clinical symptoms, including increased stool frequency, significant dehydration, and a longer recovery time compared to children without constitutional anomalies. Pathogenetic analysis showed decreased immune cell activity and intestinal microflora imbalance in children with constitutional anomalies, which contributed to decreased resistance to infections and slower recovery. The use of individualized therapeutic regimens, including aggressive hydration and immunostimulating drugs, led to a decrease in the duration of the disease and a decrease in the incidence of complications in the study group.

Conclusions: Children under 6 years of age with constitutional anomalies demonstrate specific clinical and pathogenetic features of the course of acute diarrhea, requiring adapted approaches to diagnosis and treatment. A comprehensive and individualized approach that takes into account the immune status and constitutional features of the child increases the effectiveness of therapy, shortens the recovery time and reduces the risk of complications. The results of the study emphasize the need for further research to improve clinical guidelines and improve prognosis for children with constitutional anomalies suffering from acute diarrhea.