

**MODERN METHODS OF DIAGNOSTIC AND TREATMENT CLINIC OF
BOTALLOV WAY (OPEN ARTERIAL WAY) DISEASE**

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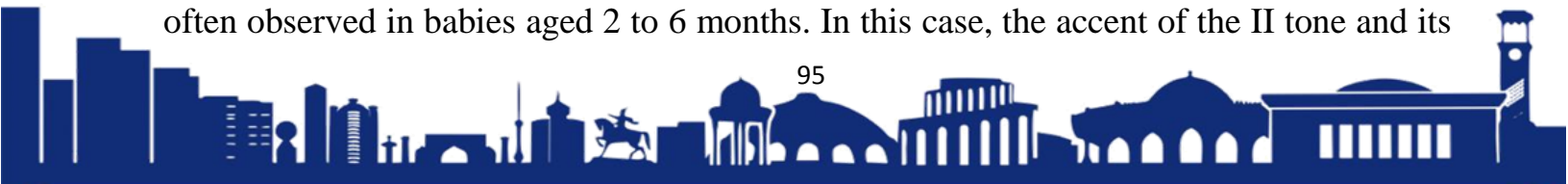
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The purpose of the study: to study the causes, clinical signs, diagnostic and treatment methods of the patency of the arterial path - the congenital non-closure of the connecting vessels of the aorta and pulmonary artery.

Research materials and methods: Botallo tract connects the pulmonary artery of the fetus with the aorta. During the development of the embryo in the mother's womb, the nutrients and oxygen necessary for the growth of the child go to the fetus through the mother's blood. Part of the oxygenated blood from the mother is poured into the right side of the heart, most of it goes to the left side through the oval hole, and the rest goes to the right ventricle and from there to the pulmonary artery. However, due to the fact that the lungs do not work in the fetus, the blood in the pulmonary artery flows into the aorta through the arterial path that appeared during the embryonic development of the heart and spreads throughout the body. With the birth of a child, independent blood circulation begins, oxygen exchange is carried out through the lungs, as a result, the arterial path shrinks and turns into a bundle of connective tissue. Sometimes, Botallo's path is blocked and blood circulation is severely disrupted. This defect makes up 20% of children born with a congenital heart defect, most often it occurs among girls. The name of the defect belongs to the Italian scientist L. Batallo, who gave information about this defect in the 16th century. When the patient's medical history was carefully examined, it was found that they often suffer from Acute Respiratory Viral Infection, acute bronchitis, and bronchitis. Burakovsky V.I., Kostantinova V.A. According to the authors, the clinical course of an open arterial path has 3 different options: 1. Symptoms of heart failure are observed in newborns and in the 1st days of life - high pulse pressure, i.e. height above 40 mm Hg; a short systolic murmur is heard at the base of the heart to the left of the sternum. 2. It is often observed in babies aged 2 to 6 months. In this case, the accent of the II tone and its



division into 2 are heard above the pulmonary artery; constant systolic murmur; Left systolic tremor between the II ribs; systolic pressure increases, diastolic pressure decreases. 3. It is often observed among children over 6 months old. A characteristic continuous systolic-diastolic murmur is heard over the pulmonary artery. This noise is carried in the veins of the neck and between the breasts. On the ECG, signs of left ventricular hypertrophy or signs of hypertrophy of both ventricles are observed. In FKG, systolic-diastolic murmur and expansion of the 2nd tone amplitude are observed in the space between the 2nd rib from the left. In EXOCG, there is an increase in the size of the left ventricle and the left ventricle. X-rays show signs of hypervolemia in the lungs, that is, an increase in the image of the lungs, an increase in the size of the left lobe and left ventricle; bulging of the arch of the pulmonary artery is observed. In aortography, contrast shows the passage of the substance from the aorta to the pulmonary artery. Cardiac glycosides - digoxin, diuretics are recommended in severe cases of open arterial path defect. It should be noted that when indomethacin is given to newborns, the Botalov tract is closed. Indomethacin is an inhibitor of prostaglandins, causing spasm of the tract and subsequent obliteration. Indomethacin 0.1 ml/kg, 3 times intravenously. Surgical treatment has been observed to give good results from 2 to 12 years of age. The average life expectancy of patients can be 39-40 years, very few people live up to 50-60 years.

The results of the study: the causes of Botalov's path, diagnosis of clinical signs, current methods of treatment were written.

Conclusion: The investigations showed that the open arterial path is not only a disease of the heart, but also a disease of the whole body, and its treatment should take into account the stages, form, and severity of the disease. In addition, toxico-allergic, infectious, immune pathological factors observed in the patient's body should be taken into account when carrying out treatment measures.

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