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Rheumatism, Types of Rheumatism, Chronic and Acute, Etiology of Rheumatism, Treatment and Prevention

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Annotation. There are countless reforms and innovations in the field of medicine today. It is no exaggeration to say that improving the general reproductive condition of the population and providing them with medical care has become the only goal of our country. This article describes in detail about rheumatism and its types and treatment methods.

Key words: rheumatism, colds, medicine, doctor's advice, treatment methods, etc.

Rheumatism is a systemic inflammation of all tissues in the body, mainly localized in the pericardium. Especially the heart, joint and subcutaneous connective tissue in the body is prone to disease. Rheumatism can be caused by simple angina, which is common among people. Tonsillitis itself is acute, accompanied by fever, headache, and inflammation in rheumatic fever leads to chronic heart valve damage, which can lead to disability or death many years after the acute illness. can bring. Usually, rheumatism affects children between the ages of 5 and 15, but adults can also get sick. The first symptoms of rheumatism often begin to appear 1-5 weeks after angina. Rheumatic attacks usually last three months, rarely more than six months.

Acute rheumatism. This form of rheumatism occurs in people under 20 years of age. The causative agent of the acute form of rheumatism is streptococcus. When rheumatism is combined with an upper respiratory tract infection, a delay in symptoms (usually 14-21 days) is noted. A characteristic feature of acute rheumatism is the speed of its development. At first, patients are bothered by symptoms of general intoxication, such as in colds and flu. The similarity of these symptoms does not allow to immediately identify this disease. After some time, specific symptoms such as carditis, polyarthritis, rashes on the skin, and sometimes skin nodules begin to be felt. The acute period of the disease lasts up to three months. In some cases, acute rheumatism lasts up to 6 months. Chronic rheumatism. As for the chronic form of rheumatism, it is characterized by frequent relapses, even if the patient receives appropriate treatment in time. In particular, exacerbation of chronic rheumatism often occurs in the autumn-winter season, because cold is a serious provoking factor. In addition, staying (or living) for a long time in places with high humidity contributes to the exacerbation of the disease. As a rule, attacks of chronic rheumatism occur several times a year.

Cardiac form of rheumatism. In this form of the disease, the heart muscles are affected. In this case, the pain in the patients differs from each other: some have a pronounced pain, and others have a moderate pain. In the initial stages, the cardiac form of rheumatism is almost invisible and can be detected only by certain instrumental studies, for example, ECG. In the last stages of the disease, severe heart damage and acute heart failure develop, which leads to a decrease in the contractile ability of the heart muscle. Joint form of rheumatism. In the articular (articular) form of rheumatism, only the joints or joints with the heart can be



damaged. Usually, the articular form of rheumatism affects large joints, and in the last stages, the pathological process covers small joints as well. Gradually, damage to the joint bag and ankles occurs. Due to severe pain, it becomes difficult for the patient to move the damaged joint. In the acute form of joint rheumatism or during an attack, the body temperature can rise up to 39 °C. Neurological form of rheumatism. Rheumatic damage to the nervous system is less common than joint and heart damage. In the neurological form of rheumatism, the cells of the cerebral cortex responsible for movement are damaged. Therefore, involuntary movements of the patient's limbs or facial muscles are recorded. Pulmonary form of rheumatism. It is observed very rarely, accounting for about 1-3% of all cases of rheumatism. Usually, the pulmonary form of rheumatism manifests itself in the form of bronchitis or pleurisy. Cutaneous form of rheumatism. This form of the disease manifests itself in the form of skin rashes or specific rheumatic nodules. The skin form of the disease does not exceed 5% of the total number of patients with rheumatism. Ophthalmological form of rheumatism. This form of the disease is determined only in combination with the classic symptoms of rheumatism. Usually, the ophthalmological form affects the retina. The ophthalmological form of rheumatism can lead to partial or complete blindness.

Rheumatism is not a single disease. Often it "neighbors" with other pathologies, because harmful substances secreted by streptococci and immune antibodies damage many organs and systems, and all such manifestations can be considered forms of rheumatism. The first symptoms of rheumatism do not allow to identify the disease. They appear 2-3 weeks after an upper respiratory tract infection (pharyngitis, laryngitis, tonsillitis) transferred from a streptococcal head injury. The picture looks like a recurrence of a cold. Symptoms of acute rheumatism are manifested as an increase in body temperature, sometimes up to 40 degrees, rapid pulse, fever, profuse sweating, weakness, swelling and pain in the joints. First, the largest and most actively used joints are damaged. Then the inflammation often spreads symmetrically to other joints. Joints are strongly swollen, reddened, hot to the touch, painful when pressed or moved. Usually, the inflammatory process does not lead to permanent changes in the joints. The pulse is accelerated, arrhythmic, pain in the chest is noted, dilatation (enlargement) of the heart, sometimes the sound of friction of the pericardium is heard - this indicates heart damage. Specific symptoms appear only after 1-3 days. Sometimes there are signs of damage to the abdominal organs (pain under the right rib, etc.). This indicates that the disease is serious and requires immediate hospitalization. In children, rheumatism is much milder or chronic, without special symptoms. General weakness, pulse rate and pain in the joints are noted, pain is not felt when moving. If there are no signs of heart damage, the disease rarely ends in death, but with the development of carditis, the average life expectancy of patients in the future is significantly reduced.

Rheumatism is pathology of mixed immune-bacteriological nature. Therefore, it is difficult to treat rheumatism and it cannot be completely cured. Since the main source of the disease is streptococcal bacteria (and the immune reaction is a response to the "attack" of a secondary and foreign organism), the main goal of treatment is to eliminate the bacteria and quickly remove the substances released as a result of their life activity and decomposition. The main (and main) drug to fight this pathogen is bicillin. Bicillin is an antibiotic of the penicillin family and has a longer duration of action than regular penicillin. The first (active) stage of antibiotic treatment lasts from 10 to 14 days. Studies have shown that a shorter period is not appropriate, because the infection persists, and a longer period is useless, because the streptococcus begins to produce substances that break down the antibiotic, and the antibiotic itself harms the patient. After that, the second (passive) stage begins. Three weeks after the end of taking Bicillin orally, the same drug is injected into the patient. Such treatment should be continued for 5-6 years (1 injection every 3 weeks), which is necessary to reduce the likelihood of relapse and prevent the development of heart complications. If the disease is mild, half-bed rest for up to 10 days is prescribed. If the disease is serious, it is necessary to exclude any movement activity, because it aggravates the process. A bed arrangement is set for a period of up to one month. Laboratory analyzes are conducted to evaluate the effectiveness of treatment. When the indicators approach normal levels, the bed regimen can be canceled. If the disease is very serious, with significant heart rhythm disturbances, pain in the joints, inpatient treatment for up to two months is required.

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