

Differential Diagnostics in the Activity of a General Practice Physician

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Annotation: A differential diagnosis is a list of possible conditions or diseases that could be causing your symptoms. This is based on your symptoms, medical history, basic laboratory results, and physical examination. This article provides information on differential diagnosis in the work of a general practitioner.

Keywords: Differential diagnosis, medical history, gastroesophageal reflux disease (GERD), minor examinations.

When you seek medical care, your doctor will use a diagnostic method to determine what may be causing your symptoms.

As part of this process, they will look at things like:

current symptoms

- medical history
- physical examination results

Differential diagnosis is a list of conditions or diseases that can cause your symptoms, based on this information. Today, a doctor in his professional activity relies on a progressive methodology in making a clinical diagnosis in three situations:-Syndromal diagnosis, -Diagnostic algorithm, -Diagnosis aimed at the optimal goal.

Stages of differential diagnosis

When making a differential diagnosis, the doctor first collects preliminary information about the symptoms and the history of the disease.

Some examples of questions your doctor may ask are:

- ➤ What are your symptoms?
- How long have you had these symptoms?
- > Is there anything that triggers your symptoms?

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- > Is there anything that makes your symptoms worse or better?
- Does your family have any specific symptoms, conditions or diseases?



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- > Are you currently taking any prescription medications?
- > Do you use tobacco or alcohol? If yes, how often?
- ▶ Have you had any major events or stress in your life recently?

The doctor may then perform some basic physical or laboratory tests. Some examples include, but are not limited to:

- measure your blood pressure
- ➢ heart rate monitoring
- auscultation of the lungs while breathing
- check the part of your body that bothers you
- ordering basic blood or urine laboratory tests

After gathering relevant facts from your symptoms, medical history, and physical examination, your doctor will make a list of the most likely conditions or diseases that could be causing your symptoms. This is a differential diagnosis.

The doctor may then perform additional tests or evaluations to rule out specific conditions or diseases and make an accurate diagnosis.

Examples of differential diagnosis

Simplified examples of what a different diagnosis might look like for some common conditions.

Chest pain John visits his doctor complaining of chest pains. Since a heart attack is a common cause of chest pain, the doctor's first task is to make sure Ivan doesn't have one. Other common causes of chest pain include chest wall pain, gastroesophageal reflux disease (GERD), and pericarditis.

The doctor performs an electrocardiogram to assess the electrical impulses of Ivan's heart. They will also order blood tests to check for certain enzymes that are linked to heart attacks. These evaluation results are normal. John tells his doctor that his pain is getting worse. It usually comes shortly after a meal. In addition to chest pain, sometimes there is a sour taste in the mouth.

From the description of his symptoms, as well as the simple test results, Ivan's doctor suspects that Ivan may have GERD. The doctor prescribes Ivan a course of proton pump inhibitors, which eventually relieves his symptoms.

Headache

Sue goes to the doctor because she has a constant headache.

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In addition to a basic physical examination, the doctor asks Sue about her symptoms. Sue reported that her headache pain was moderate to severe. Sometimes they are nauseated and sensitive to light when they occur. Based on the information received, Sue's doctor says the most likely cases are migraines, tension headaches, or perhaps post- suggesting a possible traumatic headache. John tells his doctor that his pain is getting worse. It usually comes shortly after a meal. In addition to chest pain, sometimes there is a sour taste in the mouth.

From the description of his symptoms, as well as the simple test results, Ivan's doctor suspects that Ivan may have GERD. The doctor prescribes Ivan a course of proton pump inhibitors, which eventually relieves his symptoms.

HeadacheSue goes to the doctor because she has a constant headache.In addition to a basic physical examination, the doctor asks Sue about her symptoms. Sue reported that her headache pain was moderate to severe. Sometimes they are nauseated and sensitive to light when they occur. Based on the information received, Sue's doctor says the most likely cases are migraines, tension headaches, or perhaps post-suggesting a possible traumatic headache.

First, only symptoms and surrounding diseases that form the leading syndrome (syndromal approach);

Secondly, conduct a reliable diagnosis on all the main minor signs, and prescribe minor examinations



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(diagnostics aimed at the optimal goal);

Thirdly, it is necessary to carry out a well-thought-out operation on diseases with the help of existing symptoms, perform differential diagnosis with similar diseases at each stage, and at the last stage proceed to the final diagnosis (diagnostic algorithm).

In practice, a symptom is identified, and a diagnosis is made by distinguishing it from similar diseases. The general scheme of differential diagnosis includes five questions to which the doctor answers, and compares the patient's complaints:

- probable cause (presumptive diagnosis)
- very dangerous diseases
- ➤ the basis of the approximate diagnosis

Is the cause of complaints not one of the insidious diseases? Can there be mental disorders and simulation? In his practice, a doctor should always rule out common diseases, he always needs to know about rare diseases and dangerous diseases, new products of poor quality, meningoencephalitis, sepsis, infectious endocarditis, HIV-infection, myocardial infarction, unstable angina. , arrhythmia, bronchial asthma, mental illness and brain trauma.

Diagnostic errors are observed when doctors ignore minor symptoms. In the diagnosis of urinary tract infection. careful examination is required. It may occur in children:

in a fever of unknown origin, in pregnant women - with pain in the back, in the elderly - weakness. In patients, these diseases can appear with many clinical symptoms and sometimes without clinical symptoms, these cases are called -simulator disease or simulation. The following seven diseases are difficult to diagnose simulating:

- 1. Depression
- 2. Diabetes
- 3. Additional effects of drugs and intoxication

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- 4. Anemia
- 5. Thyroid diseases
- 6. Diseases of the spine
- 7. Urinary tract infection

It is necessary to be a sensitive psychologist in the practice of a doctor. Often, undiagnosed problems are identified after the doctor's skillful treatment. It is necessary for the doctor to be able to determine the correct attitude with thinking in his general practice, and to learn how to behave in alarming situations. Hypertension

Raquel is at the doctor's office for regular exercise. When the doctor measures her blood pressure, it is high. Common causes of hypertension include certain medications, kidney disease, obstructive sleep apnea, and thyroid problems. Raquel's family does not have high blood pressure, although mother had thyroid problems. Raquel does not use tobacco products and drinks alcohol responsibly. In addition, she is not currently taking any medications that cause high blood pressure. Dr. Raquel then asks her if she has noticed anything else that seems unusual about her health lately. She reports that she feels like she has lost weight and often feels hot or sweaty. The doctor orders lab tests to evaluate kidney and thyroid function. The kidney test results are normal, but Raquel's thyroid results indicate hyperthyroidism. Raquel and her doctor begin discussing treatments for overactive thyroid.

Strike. A family member takes Clarence to the emergency room because they suspect he is having a stroke. Clarence's symptoms include headaches, disorientation, loss of coordination, and blurred vision. A family member also informs the doctor that one of Clarence's parents has had a stroke and that Clarence smokes a lot. Based on the presenting symptoms and history, the doctor suspects a stroke, but low blood glucose is also similar to a stroke. may cause symptoms. They will do an echocardiogram to check for an abnormal



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rhythm that can cause blood clots to travel to the brain. They will also order a CT scan to check for bleeding or tissue death in the brain. Finally, they run blood tests to assess how quickly Clarence's blood clots and his blood glucose levels. A CT scan shows bleeding on the brain, confirming that Clarence has suffered a hemorrhagic stroke. Because a stroke is an emergency, the doctor refuses to get all the test results. can start emergency treatment before.

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