

NEWBORN WITH CONGENITAL HEART DEFECTS DETERMINATION OF EXOCARDIOGRAPHIC INDICATORS IN CHILDREN

Saidova Sadokat Yoldoshovna

Bukhara State Medical Institute

Annotation: *In the presented scientific work, there are comments from the literature about the causes and complications of congenital heart defects in children.*

Key words: *heart, EXOCCG examination.*

RELEVANCE OF THE TOPIC

Congenital heart defects are one of the main problems of modern pediatrics. [4]. Congenital heart defects are the most common group of developmental defects in children and remain the leading cause of death today. [1].

Congenital heart defects, called congenital heart defects (CHD), result from abnormal formation of the heart or major blood vessels that are present at birth or present at any time after birth, or at all. It is among the systemic problems that may not appear. The overall rate of congenital heart defects in live births is 0.8%. [3]. Initial cardiac assessment for newborns includes cardiac auscultation, family history of cardiovascular disease, and pulse oximeter testing. ExoKG is performed s

imultaneously to evaluate the primary heart murmur [2]. Regardless of the low diagnostic potential, an electrocardiogram and a chest X-ray are performed as an additional assessment. [4]. This systematic examination is carried out using an ultrasound machine. Echocardiographic examination of the heart in all children is required to be performed by neonatologists [1,3].

THE PURPOSE OF THE STUDY.

Study of echocardiographic parameters of children from birth to 1 year with congenital heart defects in Bukhara region.

Research materials and methods: In this work, the analysis of echocardiographic examination of children born with congenital heart defects from birth to 1 year in Bukhara region is presented.

RESEARCH RESULTS

According to the results of the study, the width of the aorta (AO) varied from 9.0 mm to 12.0 mm and averaged 10.5 ± 0.2 mm in healthy girls from birth to 1 year of age. The width of the aorta (AO) varies from 7.0 mm to 13.2 mm and is 11.3 ± 0.5 mm on average in girls born with congenital heart defects.

In healthy girls from birth to 1 year of age, the width of the left ventricle (LV) varied from 9.0 mm to 13.1 mm and averaged 11.4 ± 0.2 mm, congenital heart and in

girls born with a defect, the width of the left ventricle (LV) varies from 7.0 mm to 14.1 mm, and the average is 12.6 ± 0.2 mm. In healthy girls from birth to 1 year, the thickness of the right ventricular (RV) wall varies from 6.1 mm to 11.8 mm, with an average of 10.8 ± 0.7 mm, and congenital heart defects at the same age. The thickness of the wall of the right ventricle (RV) varied from 8.8 mm to 12.8 mm in girls born with

The thickness of the wall of the interventricular septum (IS) in healthy girls varied from 4.5 to 6.9 mm, and averaged 5.5 ± 0.1 mm. The thickness of the interventricular septum (IS) wall in girls born with congenital heart defects varied from 4.0 mm to 7.1 mm, and averaged 5.7 ± 0.4 mm.

SUMMARY

According to the obtained results, it was found that the echocardiographic results of children born with congenital heart defects are higher than the echocardiographic results of healthy children.

REFERENCES:

1. Brite J, Laughon SK, Troendle J, Mills J. Maternal overweight and obesity and risk of congenital heart defects in offspring. *Int J Obes (Lond)*. 2014;38(6):878-882. doi: 10.1038/ijo.2013.244.
2. Saidova, S. Y. (2022). Echocardiographic and Anthropometric Analyzes of Children Born with Tetrad of Fallot. *Central Asian Journal of Literature, Philosophy and Culture*, 3(11), 369-373.
3. Yuldashevna, S. S. (2022). Analysis of Factors for the Occurrence Congenital Heart Defects in Children. *Miasto Przyszłości*, 24, 179-181.
4. Наврузова, Ш., Саъдуллоева, И. (2012). Особенности цитокинового статуса у детей с врожденным дефектом межжелудочковой перегородки сердца. *Журнал проблемы биологии и медицины*, (1 (68)), 85-86.