

THE STUDY OF THE DYNAMICS OF THE INCIDENCE OF ALLERGIC RHINITIS  
AMONG CHILDREN IN TASHKENT

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**Introduction.** Tashkent is the largest industrial city in the country. Almost a fifth of the republican volume of the country's industry falls on Tashkent. The city has the country's largest aviation, rail and road hubs. All this worsens the ecology of the area and thus contributes to the development of NCDs among the population of the city, including AZ, especially among children under 18 years of age.

Among allergic diseases in children, allergic rhinitis is most often recorded. The prevalence of AR in various climatic, geographical and economic regions of the world varies from 10 to 25% of the total population. AR symptoms occur in 8.5% (1.8–20.4%) of 6–7 year olds and 14.6% (1.4–33.3%) of 13–14 year olds (International Bronchial asthma and allergies in childhood: International Study of Asthma and Allergy in Childhood (ISAAC) [1].

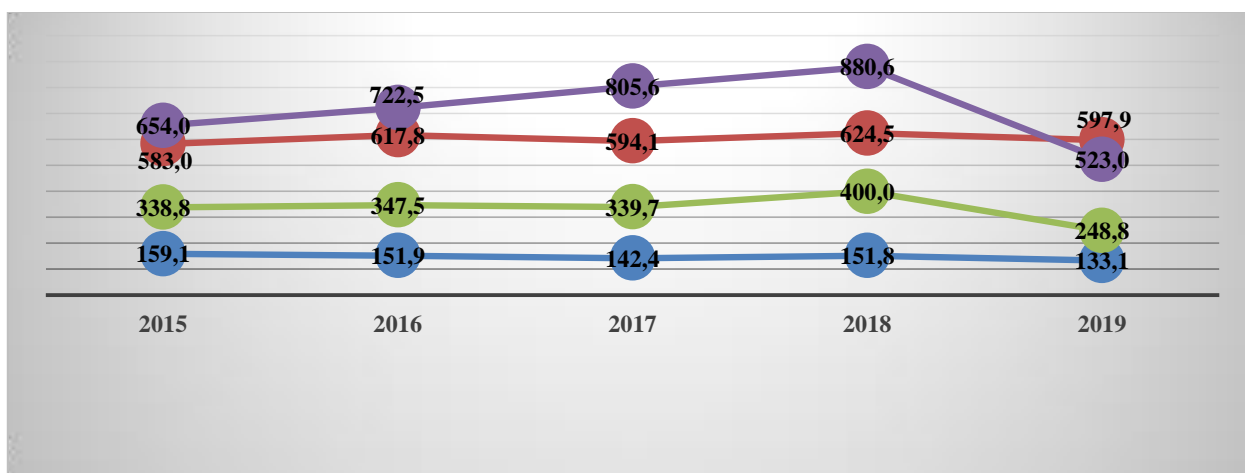
**Materials and methods of research:** to study the dynamics of general and primary morbidity of AZ in Tashkent, we used the statistical data of the city health department presented in the annual reports "On the number of diseases registered in patients living in the service area of medical facilities" (Form No. 12) according to areas of the city. Based on the data obtained, the indicators of primary and general morbidity per 100,000 children aged 0 to 14 years and adolescents aged 15 to 18 years were calculated, the structure of morbidity by diagnosis and age group was determined.

**Results and discussion:** for the period from 2015 to 2019 in Tashkent, the average period rate of primary incidence of AR among children was  $147.7 \pm 4.8$  per 100,000 children. The overall prevalence of AR in the city on average for the same period was  $603.5 \pm 9.7$  per 100,000 children.

It should be noted that the levels of general and primary morbidity in the regions have different levels. In areas where the primary morbidity rate is relatively higher, the general morbidity rate is much lower. In other areas, the reverse pattern can be seen, where the level of primary morbidity is low relative to the high level of general morbidity. The highest average period rates of primary and general incidence of AR among children under 14 years of age were observed in Uchtepa district ( $543.1 \pm 26.9$  and  $855.0 \pm 33.7$ , respectively), while in Mirabad district the level of primary incidence exceeded the average city level in 1.7 times, while the overall incidence of AR ( $112.2 \pm 19.6$ ) was one of the lowest in the city. The highest level of general incidence of AR was noted in Yunusabad district ( $2089.8 \pm 47.9$ ), where it exceeded the average city level by 3.5 times, while the primary incidence in this region was quite low  $132.1 \pm 12.2$ . The lowest indicators of both primary and general morbidity were noted in Almazar  $47.8 \pm 7.1$  and  $149.1 \pm 12.5$ , respectively, M-Ulugbek  $28.9 \pm 6.6$  and  $218.3 \pm 18.0$ ,

respectively, Sergilin  $47.9 \pm 9.6$  and  $227.6 \pm 20.8$ , respectively, and Yakkasaray  $53.8 \pm 15.9$  and  $124.2 \pm 24.2$ , respectively, districts.

The disproportionality between the indicators of general and primary morbidity observed in some districts of the city - Yunus-Abad, Mirabad, Yashnabad, Shaykhantakhur, Sergeli and Chilanzar is probably associated not so much with success in the treatment of children with AR, but with defects in medical examination, the outflow of patients to private clinics or deficiencies in statistics.



*Fig-1. Dynamics of primary and general incidence of AR per 100,000 children and adolescents for the period 2015-2019 in Tashkent*

The prevalence dynamics in general in Tashkent for both primary and general morbidity among both groups under consideration generally tends to decrease (Figure-1). For five years, the primary incidence among children has decreased by 1.2 times, while the overall incidence has remained almost at the same level. Among adolescents, primary and general morbidity decreased by 1.4 and 1.3 times, respectively.

Thus, the prevalence of the main forms of AZ among children and adolescents in Tashkent for the period from 2015 to 2019 is much less than the similar incidence in Europe and Russia. The highest incidence rates were observed in Uchtepa, Mirabad Yunusad, Chilanzar, Bektemir and Yashnabad regions.

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