



## Basic Symptoms of Infectious Diseases

*Gulsara Saidovna Muratova, Dilovar Rustamovna Qarshiyeva*

*Lecturers of Bukhara State University, Uzbekistan*

**Abstract:** *The article discusses the types of airborne infectious diseases, the spread of fluids (saliva droplets) from the respiratory tract of a sick person in the room (speaking, coughing), the spread of infectious diseases in the respiratory tract of other healthy people through this contaminated air. The main tasks of the medical service are the prevention of infectious diseases and the preparation of timely treatment measures.*

**Keywords:** *Infection, infectious diseases, intestinal infections, respiratory tract, infectious diseases.*

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### Introduction

Infection (Latin infectio – infection) is the penetration and development of microorganisms, which then develop a complex relationship between them, which can be a complete manifestation of the disease or become a carrier of the disease. Archaeological excavations and manuscripts that have come down to us show that even in ancient times, the factors that spread infectious diseases and the measures to combat them were clear. Because of the prevalence of infectious diseases and the rising mortality rate, they viewed the disease as a disease that is spread by wind and is transmitted by all (12). In history, there have been many people who have contracted such diseases in order to testify scientifically to rashes and recurrent typhoid fever by devotees of science. In natural conditions, there are four ways in which human beings are infected with infectious diseases: fecal (feces (feces) - through the mouth); through air and droplets; transmissible (direct, blood transfusion, through needles); through communication. In the human body, the routes of transmission and the location of the causative agent are constantly interrelated. For example, in the intestines, pathogens are excreted in the feces, enter the food in various ways, and the disease occurs when consumed without washing them, i.e., it is a fecal-route infection.

### Materials and Methods

Airborne forms of infectious diseases are diseases in which the fluids (saliva droplets) released from the respiratory tract of a sick person are spread in the room (speaking, coughing), and other healthy people breathe through these contaminated air. Prevention of infectious diseases and preparation of timely treatment measures are among the main tasks of the medical service. In such cases, in areas where there is a possibility of infectious diseases, it is necessary to conduct a good sanitary education, and if any disease is detected, the patient should be immediately separated from others. One of the organizational foundations of such a service is emergency diagnosis and preliminary investigation. During the initial examinations, patients are referred mainly to physicians with general medical experience, and to the infectious disease room physician in the outpatient setting. If there is a suspicion or obvious signs of the disease, it is sent to special treatment facilities. With the

return of such a chain circle in a timely manner, treated patients can again refer to physicians with general medical information. The scientific approach of specialists in the field plays an important role in the detection and treatment of infectious diseases (10).

Scientific advances in epidemiology, virology, immunology and parasitology are of great importance in infectious disease clinics.

Measures against infectious diseases are characterized by prophylactic, i.e., the prevention of the disease without symptoms, and measures to combat it during an epidemic. Rabies is an acute viral, severe infectious disease of the brain transmitted from animals, characterized by the length of the developmental stage of the disease and the factors leading to death. The disease is transmitted to humans by touching the injured areas of the skin with the saliva of infected animals or directly by biting animals. Viruses do not pass from one person to another. The most dangerous biting areas include the neck, thumb, and thumb areas (8).

In the convulsive phase, patients develop a state of hydrophobia (fear of water), that is, convulsions as a result of the splashing of the water poured into the patient, the contraction of the muscles of the larynx when the patient is told about the water. Such a situation can also occur due to the following reasons-aerophobia (fear of the wind), photophobia (fear of light rays), acousticophobia (fear of loud noises) and others. Gradually, patients hear suicides in their ears, horrible events appear in their eyes, and they fall into extreme militant states.

### **Results and Discussions**

The patient sweats a lot, produces a lot of saliva, but spit a lot because he can not swallow, the body temperature rises slightly (subfebrile), the heart rate increases, this stage can last 2-3 days, in some cases up to 6 days. The stage of paralysis begins with the passage of a state of hydrophobia (fear of water), in which the patient becomes helpless, paralyzed by paralysis of the legs, paralysis of the muscles of the face and tongue. Death results from cardiovascular failure due to paralysis of the respiratory center.

The susceptibility to the disease is the same in all people, in children older than one year, in places where people gather in groups. Seasons also play a major role in the spread of hepatitis A, with the disease being more common in summer and autumn. When jaundice appears on the skin surface, the general detoxification of the body is relieved, headaches are reduced, body temperature is normalized, and patients feel much better. The artificial routes of transmission of the disease include factors that cause viruses to enter through the injured skin during examinations (injections, surgeries, blood transfusions, endoscopic, retroscopic, and tooth extractions) to diagnose the disease. This group of diseases includes influenza, parainfluenza, adenovirus and rhinovirus diseases. These diseases are characterized by their short-term development and inflammation of the respiratory organs. The carriers of the disease are patients, mainly through droplets and airways (6).

**Clinic:** The development period of the disease lasts from several hours to 1.5 days. The disease is characterized by sudden symptoms of severe intoxication - fever, headache, pain in the muscles and joints, back, and eye movements during movement, fear of light, helplessness, lack of mobility. From the first day of the disease, the body temperature rises above 38–40°C. The higher the body temperature, the shorter the heating phase. If the body temperature is 40°C and above, antipyretic drugs can be used. If the febrile phase of the flu is uncomplicated, it usually lasts 1–8 days, followed by a rise or fall in temperature. When the body temperature rises, redness is observed in the eyelids and mucous membranes (conjunctivitis and scleritis). Soft and hard palate, redness in the mucous membranes of the throat, and sometimes may be bluish. When mild to moderate manifestations are uncomplicated, the disease is satisfactory and can last for 5-7 days. If the stages of fever, general intoxication, and redness are prolonged, then the diagnosis of primary influenza is

denied and you have to think about secondary, additional, and complicated experiences. Complications of influenza: One of the most severe among influenza complications is infectious-toxic shock, the clinical course of the disease includes several syndromes: acute cardiovascular failure, tumors of the lungs and brain tissue, massive intravascular coagulation syndromes.

One of the most common complications of the flu is inflammation of the lungs. Common complications include bacterial mastoiditis (inflammation of the mammary gland), otitis (inflammation of the ears), and inflammation of the sinuses of the brain (2). Diphtheria is a disease characterized by complications such as local infectious inflammation of the glands and nerve tissue, general severe intoxication, and paralysis of organs of the nervous and cardiac systems. The causative agent is diphtheria corynebacteria, which is in the form of poisonous (toxic) inactive rods. Diphtheria bacilli are very resistant to the effects of the external environment. A drop of diphtheria microbe can be stored in saliva, door handles and children's toys for up to 15 days. It can live in water and milk for 6-20 days. They are adversely affected by sunlight and high temperatures, decomposing in a minute when boiled. The carriers of the disease are patients who are ill at any stage of the disease and people who carry bacteria.

Diphtheria-causing bacteria are mainly located in the respiratory tract and throat areas. The disease is transmitted through airborne droplets and airborne dust. When a patient or bacterial carrier coughs, sneezes, or speaks, small particles are released into the air through saliva droplets containing the diphtheria bacterium from the respiratory tract and larynx. It is precisely because these particles fall into the upper respiratory tract and larynx of a healthy person that the disease develops. Household items and toys are also of minor importance due to the type of saliva that gets into them. It is sometimes transmitted by eating an apple together. The most common type is the oropharyngeal appearance (85–90%). The development period of the disease is 2-10 days. In this case, there are cases of weakness, headache, decreased mobility, in some cases, vomiting, fever up to 39°C, severe poisoning. Along with normal redness in the throat glands, a gray patch appears in the form of swelling and a spider's web. This curtain moves easily and a hemorrhage is formed, which is replaced by a solid curtain. Such a curtain is very difficult to move. When transplanted, it can be re-formed. Simultaneously, the local lymph nodes become enlarged and painful to the touch. In some cases, swelling of the subcutaneous fat layer is also observed. Local changes in the respiratory tract occur mainly in the larynx (local croup), while diffuse manifestations occur in the trachea, bronchi, and bronchioles (lower croup). Shortness of breath (suffocation) and cough are observed in true croup. The patient's breathing is wheezy, audible from a distance. Difficulty breathing lasts from a few minutes to half an hour. In the postoperative period, patients experience bruising, paleness in the nasal "triangle" due to lack of air, severe sweating and palpitations (4). The most serious complications of asthma include cases of infectious-toxic shock, tracheal stenosis, myocarditis and polyneuropathy.

Prevention: When a diagnosis is made, the patient should be hospitalized immediately, limiting contact with others, and isolated until complete recovery is confirmed by bacteriological examination. All people who come in contact with patients should be examined and isolated for 7 days until the diagnosis is denied. Disinfection with 1% chloramine solution is performed after hospitalization of patients with diphtheria. Diarrhea is an infectious disease of humans, caused by Shigell bacteria, which mainly affects the lower part of the colon, accompanied by severe intoxication. The carriers of the disease are patients or carriers of various appearances. The disease is transmitted through fecal-oral, contact, water and food. Disease-causing factors include unwashed dirty hands, bacterially contaminated household appliances, toys, food and dairy products. Dysentery is equally developed everywhere and is more common in open water basins, mainly in enterprises where food preparation technology is disrupted. People of all ages can get sick with dysentery. It is more common in thin, weak, immunocompromised individuals, preschoolers, and

the elderly. Basically, it depends on the seasons-summer and fall-but when water or food is contaminated, there are likely to be epidemics, regardless of what time of year.

### **Conclusion**

To conclude, we all need to prevent ourselves against the types of airborne infectious diseases, the spread of fluids (saliva droplets) from the respiratory tract of a sick person in the room (speaking, coughing), the spread of infectious diseases in the respiratory tract of other healthy people through this contaminated air. Our main task should be focused on the prevention of infectious diseases and the preparation of timely treatment measures.

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