PREMATURE BABIES

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ABSTRACT

As we embark on this important task, I would like to emphasize that we are deeply aware that the goal we have set for ourselves can only be achieved through deep reform and modernization of the entire system of human health protection. The universally recognized principle in our country - "Healthy mother - healthy child", in essence, has become a priority state that unites and mobilizes the population and has risen to the level of the state and society.

KEYWORDS: Goal, childhood, protection, premature baby.

НЕДОНОШЕННЫЕ ДЕТИ

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АННОТАЦИЯ

Приступая к решению этой важной задачи, хотел бы подчеркнуть, что мы глубоко осознаем, что поставленная перед собой цель может быть достигнута только путем глубокого реформирования и модернизации всей системы охраны здоровья человека. Общепризнанный в нашей стране принцип «Здоровая мать – здоровый ребенок» является, по сути, объединяющим и мобилизующим состоянием, ставшим приоритетом для государства и общества.

КЛЮЧЕВЫЕ СЛОВА: Цель, детство, защита, недоношенный ребенок.

As we embark on this important task, I would like to emphasize that we are deeply aware that the goal we have set can be achieved only on the basis of deep reform and modernization of the entire system of protection of human health. birthdays ”is celebrated. It was founded in 2009 at the initiative of the European Foundation for the Care of Premature

Babies I. Every year, about 15 million children are born prematurely on our planet, in other words, every third child born in the world is born prematurely. Uzbekistan's premature birth rate in the world does not exceed 8-9%, of which less than 32% at 3 weeks and 1% at 28 weeks.

Pregnancy in Uzbekistan at 500 g and 22 weeks The transition to international standards of live births, the introduction of the "safe motherhood" program has led to radical changes in the organization of maternal and child health, which includes mothers, children and neonatal children. led to a steady decline in limes. According to many studies, the first year of a child's life is a special period in which changes in the development of the child due to pathological abnormalities in the neonatal period, especially in premature infants, lag behind their peers. There are several recommendations that developmental parameters should be monitored continuously until the premature infant is compared to its full peers [5,6].

The introduction of modern scientific advances in perinatal technology for infants born with low birth weight and very low body weight has made it possible to increase their survival rate and transition to the proposed new live birth criteria. Pregnancy management by WHO from 22 weeks of gestation; intensive care and care of newborns with low and very low body weight [1,2]. It is necessary to study the health status and psychomotor development of low birth weight and very low birth weight children, as infant mortality and early childhood disability are high among this contingent of children [3,4]. In very premature infants, there is a high risk of brain damage due to hypoxic ischemia, fetal growth retardation, and infections, which pass through the fibers of the descending pyramidal pathway that are responsible for lower motor function. According to international data, the frequency of delays in cognitive development is as follows:

14-39% of 24-week-old infants; 25 weeks -10-30%;

26 weeks 4-24%;

29 weeks 11-18%.

However, impairment of cognitive functions at an early age may not have a significant impact on future intellectual development. Cognitive activity of the child depends in many respects on psychamotor speech and socio-emotional development. About half of premature

children have speech development delays, and at school age there are difficulties in changing reading and writing [9,10].

Saxarova E.S. On the basis of ambulatory observation centers [7,8] recommend to help children born with extreme low birth weight and very low birth weight, whose tasks should include: assessment of psychomotor development and early birth of infants in the first 3 years of life dynamic monitoring of health status; diagnosis of organic pathology and functional disorders in premature infants; correction of detected deviations, treatment and examination taking into account the maturity of the nervous system. Early detection of delays in motor and neuropsychic development of the child and early correct intervention of specialists achieve the best results, because the reserve capacity of the central nervous system is highest in the first years of life [11,12].

The aim of the study: To reveal the features of physical and psychomator development in premature infants in the neonatal period. Materials and Methods: The study conducted a comparative assessment of the psychomotor development (PMR) of full-term and premature infants at the age of two:

the first week of life; 2) In the period from 2021 to 2022, children born in the Samarkand regional multidisciplinary medical center and breastfed for one month. The control group included 50 premature infants, while the main group included 50 premature infants with an average gestational age of 32.60 ± 2.67 (25 to 35 weeks). Dynamic monitoring and evaluation of psychomotor development was conducted in 40 preterm infants at one month of life. Evaluation of psychomotor development was carried out according to the scale of quantitative assessment of the child's age development, in the first two age groups recommended, in the main areas of development: motor, speech (before speech for newborns) and mental functions of the child, risk for central nervous system injury for early detection of developmental delay, taking into account factors.

Exception criteria for newborns were birth defects, birth defects of the central nervous system, and severe perinatal conditions. In analyzing the data obtained, we took into account that the reliability of the results of the assessment of psychomotor development in newborns may depend not only on the actual level of psychomotor development, but also on a number

of factors such as the level of biological comfort: daily biorhythm, mood of the child and the doctor. the environment under investigation, etc.

To minimize assessment deficits, we repeated assessments of the child's functions both during one examination and during follow-up examinations. With a short interval. Static data processing was performed using applications. The average value of the index and the standard deviation (M ± m) were calculated. An unpaired Stuudent t-test was used to compare the tools. Comparison of non-parametric data was performed using Fisher's exact test.

Conclusion.

Thus, observations in 1-week-old newborns suggest that the analysis of risk factors in all areas of psychomotor development suggests that developmental problems identified in preterm infants are not due to hereditary causes and are likely to be directly related to gray brain structures and the central nervous system have been shown to be associated with the maturity of pregnancy in early childbirth. A general assessment for all areas of development of newborns allows to determine the severity of the delay in their development.

In our study, in accordance with the methodology, a comparative assessment of the dynamics of motor, sensory-motor and pre-speech and communicative development of children in two age groups was performed. Quantitative assessment of the dynamics allows to create a "profile" of psychomotor development in premature infants, to determine the formation of age-related functions. It should be noted that these delays were not related to hereditary factors, but were directly related to the maturation of the brain and central nervous system during pregnancy, due to the peculiarities of their antenatal development.

Diagnosis of organic pathological and functional disorders in premature infants; correction of identified abnormalities, treatment and early initiation of examination, taking into account the maturity of the nervous system.

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