

THE IMPORTANCE OF HORSERADISH IN CUTE AND BRONCHIAL ASTHMA

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Annotation: This article provides some information about the importance of pepper in cough and bronchial asthma.

Keywords: dry and wet cough, bronchial asthma, chronic bronchitis, pulmonary tuberculosis, glaucine, ephedrine, aminophylline, shortness of breath.

Cough is one of the most common and common symptoms of respiratory illness. Direct itching of the airways (throat, larynx, larynx, bronchi) and the ends (receptors) of the pleural mucosa can cause coughing. Sometimes coughing occurs with discomfort and tension. . Cough is associated with the central nervous system (the center known as the cough center is located in the cerebellum). regulation of education ”. When you cough, you first take a deep breath, then the breathing muscles tense up, and the vocal folds in the throat close - high pressure builds up in the chest. A strong stream of air then blows out through the narrowed vocal folds with high pressure, expelling mucus or foreign bodies from the lungs.

Causes: Foreign bodies in the respiratory tract, as well as mucus, pus, and blood that are expelled when coughing.

Depending on the length and brevity of the cough, it is acute (in whooping cough), intermittent (in bronchitis), incessant, short (in pleurisy), according to the timbre of the sound - wheezing (when the throat is injured and hysteria), choking iq and voiceless (in inflammation and injury of the vocal cords), depending on the formation of sputum, cough is divided into 2 types:

1) Dry cough 2) Wet cough

Dry cough is common in laryngitis, tracheitis, bronchitis, bronchial asthma, dry pleurisy, and pneumosclerosis. This causes inflammation of the mucous membranes of the bronchial tubes, which makes it difficult to move sputum.

Cough with sputum:

1. Chronic bronchitis; 2. Sharp zotiljam; 3. Pulmonary tuberculosis; 4. Purulent lung tissue; 5. Bronchiectasis (dilation of the bronchial tubes)

At the same time, patients excrete 200.0-1000.0 mg of sputum per day.

Chronic cough: 1. In chronic laryngitis; 2. Taracheitis bronchitis; 3. In bronchiectasis;

4. In pulmonary tuberculosis

When the vocal cords are damaged (tuberculosis, trauma, paresis), the cough becomes muffled due to compression of the excitatory nerve fibers. When the vocal cords become inflamed or swollen, the cough becomes muffled.

Cough chemicals:

1. Broncholine Shalfey. The drug is in the form of a syrup, the active ingredient is ephedrine ($C_{10}H_{15}NO$), glaucine. Ephedrine dilates the bronchi and relieves swelling. Glaucin stopped coughing. Adults can take 1 tablespoon 3-4 times a day, children 3-10 years old can take 1 teaspoon 3 times a day.

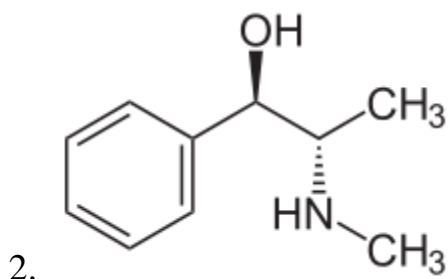


Figure 1. Structure of ephedrine.

2. Kodelak. It is the most effective cough medicine. Contains codeine ($C_{18}H_{21}NO_3$). Adults take 1 tablet 2-3 times a day, in the form of syrup for children and can take up to 5 ml per day.

3. Synecode. As an antitussive agent, the active ingredient butamirad ($C_{18}H_{29}NO_3$) blocks cough, but does not reduce respiration. Adults can take 15ml 3 times a day before meals, while children 6-12 years old take 1ml 3 times a day. Children aged 3-6 years can take 5ml 3 times a day.

The role of ground pepper in the treatment of cough.

Peel a squash, grate it and put it on the breast for 2 hours a day. • Take 300 g of the root of the meat grinder, pour a liter of boiling water and infuse for 24 hours. Pass through a sieve, add 300 g of honey and bring to a boil over low heat. Then put in a glass jar and store in refrigerator. Drink two tablespoons 3–4 times a day for half an hour before a meal.

Drink 1 tablespoon of juice 2 times a day with a tablespoon of water. Mix the juice with honey (1: 3 ratio) and drink 3-4 glasses a day. A teaspoon of sebar is poured over a flower with a glass of boiling water and infused for an hour. Drink 3-4 glasses a day with the addition of pepper and honey juice (1: 3 ratio).

300 g of peppers, 1 kg of tomatoes and 50 g of garlic are passed through a meat grinder. One tablespoon is taken three times a day before meals.

If left untreated, coughing can lead to bronchial asthma. Bronchial asthma (Greek suffocation means shortness of breath)

It is a disease caused by chronic recurrent infections and non-infectious (atopic) causes. During its development, the bronchi change in a reactive state and are expressed as immunological or non-immunological changes.

In the clinical course, the inner lining of the bronchi becomes inflamed and a large amount of mucus is released, which can lead to bronchospasm. ETHOLOGY: Heredity plays an important role in the origin of the disease. There are also factors that can cause the disease.

These are:

- Increased internal and external sensitivity of the bronchi
- Changes in the autonomic nervous system
- Disorders of the immune and endocrine systems
- Internal factors

Exposure to various foreign substances (allergens), climate change, agitation, severe fatigue are a group of external factors. At the same time, the amount of

foreign substances in the body varies. These include primarily infectious allergens (viruses, bacteria, fungi, yeast, etc.) or non-infectious (dust, drugs, odors, certain foods, wool odors, insect and ant bites, etc.), chemical and mechanical substances (iron). - odors, trees, cotton dust, alkali, the smell of acids, etc.). The presence of weather (wet, dry), changes in temperature and air pressure are of great importance.

PATHOGENESIS - substances that degranulate cells, increase vascular activity, narrow the bronchi and have toxic properties:

1. Histamine; 2. Serotonin; 3. Bradykinin is released in large quantities. Increases the permeability of small blood vessels, leads to edema, serous inflammation and narrowing of the bronchi.

CLINICAL VIEW: 1. Breathing; 2. Dry cough; 3. Cough with difficult sputum sticky sputum; 4. Difficulty breathing; 5. Rise in body temperature; 6. Occasional seizures.

Examination of the patient reveals a forced position, red rashes on the body (ass), inflammation of the eyes and gums, difficulty breathing, bruising of the lips, hands and feet. The patient's chest is swollen and sputum-like.

DIAGNOSIS. The spiograph should be used to quickly calculate the volume of air expelled and compare it to the vital capacity of the lungs. During remission of the disease, a method of determining the sensitivity of patients to various infectious and non-infectious iodine substances is used (allergological test).

CHEMICAL PRODUCTS USED IN BRONCHIAL ASTHMA.

1. Euphyllin This drug is in liquid form and has an active ingredient substance aminophylline ($C_{16}H_{24}N_{10}O_4$) This drug is administered in a dose of 2.4% to 5 ml in adults, depending on the patient's condition, the doctor prescribes a dose.

2. Dexamithasone This drug is a suspension, the active substance is dexamithasone ($C_{28}H_{37}FO_7$). Patients are prescribed 1 ml of 1% by a doctor.

The importance of pepper in bronchial asthma. Take 100 g of peppers and garlic, grind and mix in a porridge. 150 g of butter and 600 g of honey are heated in a

little water vapor and mixed well. Store in a cool, dark place, with the lid tightly closed. Take one tablespoon a day, one hour before meals. Duration of treatment - 2 months. If necessary, the treatment is repeated in a month. Take 100-150 g of it through a grater and put it in a bottle, add two lemon juices and thicken. Eating half a teaspoon of this mixture every morning and afternoon brings tears to your eyes. There will be less aging in the coming days. Doctors say that the fewer the tears, the less mucus remains in the body.

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