

**Congenital malformation as a cause of child disability**  
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**Врожденные пороки развития как причина детской инвалидности**  
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**Abstract:** *acquiring data demonstrates a real socio-medical significance of pathology caused by congenital anomalies (birth defects), chromosomal diseases, and their role in prenatal pathology and childhood disability.*

**Аннотация:** *полученные данные демонстрируют реальную социально-медицинскую значимость патологии, обусловленной врождёнными аномалиями (пороки развития), хромосомными болезнями и их роль в перинатальной патологии и детской инвалидности. Для предотвращения и снижения уровня болезней, врождённых аномалий необходимо усилить профилактику этих болезней, в двух направлениях – генотипическом и фенотипическом.*

**Keywords:** *family congenital anomalies, children.*

**Ключевые слова:** *семья, врожденные аномалии, дети.*

Currently, in the structure of the child disability and mortality of infants increasingly important purchase birth malformations (CDF), which occur in 4.0-6.0 % infants, and their contribution to the structure of the infant Mortality rate is more than 20.0 %. Many of the children with abnormalities of dying in the first months and years of life, and most of the survivors need ongoing health and social care [1, с. 6-10, 2, с. 32, 3, с. 259].

**The aim of the study:** Defining the role of the birth malformations in the structure of child disability in Surkhandarya region.

**Materials and methods .**

Learning the structure of childhood disability carried out in the dynamics of a continuous method with using ICD-10. Data from the state statistical agencies have been entered into a special «accounting journal, dynamics, and changes in the level and cause of disability».

The study of the main causes of childhood disability was carried out by a continuous method in family health centers located on the territory of Surkhandarya region. Selection of areas with different levels of child Disability is dictated by the need to identify factors defining these differences and reserves to reduce child disability.

**Results and discussion.**

Congenital anomalies, being the most important cause of disability of the child population, and its prevalence indicator amounted to 21.2 per 10 thousand of children population. It should be noted that if the cause of child disability in 78.5 % are 5 classes of diseases, but at the same time, nearly 60 % of the causes of childhood disability are falling by only 2 class of diseases: diseases of the nervous system and congenital anomalies (birth defects) Despite significant advances. in the study of the genetic basis of the emergence and spread of congenital anomalies (birth defects) in the population, they remain one of the most important public health problems CDF consistently rank third among causes of infant mortality in the past 10 years.

First, the lower the frequency of somatic diseases in the structure of causes of prenatal and neonatal morbidity and mortality significantly increased the proportion of congenital anomalies [2].

Secondly, in the children's disabilities make significant contributions congenital and hereditary diseases. Congenital anomalies (malformations, chromosomal abnormalities) in the structure of the causes of childhood disability ranked second (21.0 %). The level of prevalence of congenital pathology in Tashkent amounted to 21.2 %. Significant differences among people of different sex: for boys, the figure was 24.1 in girls - 23,9 %. The structure and level of nosological forms of congenital anomalies, causing the child's disability, etc are represented follow.

Leading the first place is occupied by congenital dislocation of the hip (5.3), followed by cleft lip and palate (cleft lip), cleft palate (3.1), Down syndrome and chromosomal diseases (3.0), congenital anomalies of the eye and ear ( 2.5), microcephaly (2.2), congenital heart disease (2,3).

All of these forms of the disease are mainly installed between the ages of 0 and 4 years, with the exception of congenital anomalies of the eye and ear are generally detected at the age of 5-6 and 7-14 years. It should be noted that if the congenital hip dislocation, microcephaly, split lips and palate (cleft lip), cleft palate often been the cause of disability in girls, the congenital anomalies of the ear and the eye, congenital heart anomalies, Down syndrome and chromosomal diseases – among boys.

Therefore, the health authorities should carry out a set of preventive measures which aimed at early detection and prevention of congenital anomalies, through the introduction of monitoring programs, screening during pregnancy and delivery, health of fetus .

However, it should be noted that the vast majority somatoneurological disorders that lead to disability and death of newborn children, can be removed without the use of complex and costly care.

Active detection and rehabilitation of children with intellectual disabilities should be carried out in the maternity hospitals through the implementation of compulsory treatment and rehabilitation of all newborns at risk forces neuropsychiatric profile in the neonatal period and early childhood, as a older ages rehabilitation measures are no longer effective.

#### **Conclusion.**

1. Acquiring data demonstrates a real socio-medical significance of pathology caused by congenital anomalies (birth defects), chromosomal diseases, and their role in prenatal pathology and childhood disability.

2. To prevent and reduce disease levels, congenital anomalies is necessary to strengthen the prevention of these diseases, in two directions - genotypic and phenotypic. There must be included: a) early warning and elimination of consanguineous marriages, increasing intergenetic intervals (up to 3 years); b) the restriction of births in cases of high-risk the heredity and congenital pathology; c) the elimination of genetically the affected fetus in early pregnancy when possible prenatal diagnosis of fetal abnormality. This approach aims to regulate itself the couple reproductive function by limiting or complete rejection of procreation; d) increasing the medical knowledge of parents, the introduction of healthy living habits, improvement of the human environment.

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