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Modern Aspects of Dietary Food Treatment of Gastroduodenitis after Coronavirus Infection

Namozov Farrukh Jumaevich

Bukhara State Medical Institute

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Summary

In some patients, the first signs of covid are not sore throat and cough, but nausea and gastrointestinal disturbances. The symptoms are similar to rotavirus and easy to confuse, but this is how the coronavirus also begins. Entering the body through the gastrointestinal tract, the infection causes inflammation - gastritis, enteritis. Chronic diseases - cholecystitis, pancreatitis can become aggravated. According to various authors, its frequency has increased by 2–2.5 times in recent years, which is associated both with a true increase in the number of patients with inflammatory lesions of the upper digestive tract, and with the use of new diagnostic techniques [1, 3]. No matter how trite, but inflammation can be defeated with the help of medications and while observing the diet. Diet for gastroduodenitis is the most important component of treatment. The theoretical method of research was used. Many articles and dissertations by international scientists were analyzed, which were based on various books, dissertations, as well as electronic journals.

Relevance. The emergence and rapid spread of a new coronavirus (SARS-CoV-2) has posed challenges for healthcare professionals related to rapid diagnosis and provision of medical care to both patients infected with SARS-CoV-2c and patients with chronic diseases of various organs and systems. On February 11, 2020, the World Health Organization (WHO) officially named the infection caused by the novel coronavirus COVID-19 ("Coronavirus disease 2019"). Information on the epidemiology, clinical features, prevention, and treatment of COVID-19 is currently limited. There is even less data on the course and outcomes of chronic pathology, including diseases of the digestive system against the background of COVID-19. The risks are associated not only with the infection itself or with the risk of decompensation and exacerbation of chronic diseases of the digestive system, but also with the need for an emergency reorganization of the medical service in order to cope with all the problems in a pandemic.

"In addition to the coronavirus itself, the treatment of covid also seriously affects the organs of the gastrointestinal tract. Antibiotics, antiviral and hormonal drugs put a heavy burden on the gastrointestinal tract, says Maria Lyapina, a gastroenterologist at the Tyumen Cardiology Research Center. - As a result, drug-induced hepatitis, dysbacteriosis, diarrhea develop, patients complain of pain in their right side. And if someone already had problems with the digestive organs, then exacerbations occur." (Smirnova A., 2020)

Duodenitis is an inflammation of the mucous membrane of the duodenal wall. There are acute and chronic forms of the disease, they differ in the severity of symptoms. Timely treatment of acute duodenitis avoids structural changes in tissues, while in chronic cases, frequent exacerbations can be observed, and emerging foci of inflammation lead to a restructuring of the mucosal structure. Therefore, a timely visit to a doctor with severe severe symptoms often helps to avoid unwanted changes.

Depending on the form of the disease, the following symptoms may be observed: pain in the upper abdomen, especially when hungry and at night; digestive disorders (diarrhea, constipation); bloating, rumbling, flatulence; "bitter" belching, incessant hiccups; nausea, rarely vomiting; heartburn, discomfort. In very rare cases, bleeding from the gastrointestinal tract occurs, which is associated with the formation of ulceration of the mucous membrane.

Various reasons may be involved in the formation of duodenitis. The main ones include: diet errors (love for spicy, smoked, fatty foods); bad habits, frequent coffee consumption; food and drug poisoning; invasions (parasitic diseases); concomitant pathologies of the gastrointestinal tract (gastritis, stomach ulcer, inflammation of the gallbladder, etc.); Helicobacter pylori infection; diseases and conditions that cause disruption of the blood supply to the tissues of the intestine.

With any of these symptoms, it is important to contact a gastroenterologist in order to be diagnosed and receive timely help.

The tactics of treating duodenitis is chosen by a specialist depending on the severity, clinical form and general condition of the patient. So, when the bacterium Helicobacter Pylori is detected, therapy is based on the destruction of the pathological flora, the protection of the mucosa (drugs are used to reduce the production of gastric juice, means for "enveloping"). Normal digestion is restored with the help of enzyme-based products.

The acute phase requires active intervention. It is important to strictly follow the doctor's prescriptions and a special diet: exclude foods that are poorly digested and take a long time, irritate the mucous membrane (salted, peppered, smoked). Chronic is also subject to effective correction. The specialist will pay special attention to the restoration of normal intestinal flora. It is necessary to eat right even with relief and achieving a stable remission.

In the event that duodenostasis occurs - a violation of the motor activity of the intestine - it is necessary to eliminate the cause of the disease. Functional disorders are corrected conservatively: the doctor will prescribe a special diet, you need to eat in small portions, and you should also refuse products that stimulate the production of bile. Duodenal sounding with bowel lavage can be performed. In extremely rare cases, surgery is required.

So far, there is not much data. The results of monitoring patients are as follows: the incidence of gastrointestinal lesions in COVID-19 is different. Thus, diarrhea occurred in 34% of cases, vomiting was observed in 3.9% of cases, abdominal pain bothered 1.9% of patients. More data is needed for a more accurate picture, as this study was conducted with 204 patients. If we talk about diarrhea as the most common symptom, then it most often developed already during hospitalization. The researchers hypothesized that dry cough and shortness of breath are predominantly characteristic of the first wave of cases of coronavirus infection, and the symptoms of the gastrointestinal tract are characteristic of the second wave. But we must understand that this is a hypothesis: it is premature to talk about defining clear diagnostic criteria and describing the gastrointestinal form of covid. The appearance of symptoms of damage to the gastrointestinal tract needs to be assessed by a specialist gastroenterologist, and only after confirmation of the presence of infection with a new coronavirus can they be attributed to the manifestation of COVID-19.

People with liver disease may be at risk for severe COVID-19 disease. The U.S. Centers for Disease Control and Prevention (CDC) notes that some people hospitalized with COVID-19 have had elevated levels of liver enzymes such as alanine aminotransferase (ALT) and aspartate aminotransferase (AST). This indicates that the patients' livers are, at least temporarily, damaged. In addition, liver damage is more common in patients with severe disease. However, to date, it is not known for sure whether this increase in liver enzymes is directly related to the virus

that causes COVID-19 (SARS-CoV-2) in the liver, or whether liver damage is the result of other factors. (Boris Matyunin, Alexandra Kurchatova, 2020)

With exacerbation of gastritis, a sparing diet is necessary. Patients with gastritis are contraindicated in chocolate, coffee, carbonated drinks, alcohol, canned food, concentrates and surrogates of any products, spices, spices, as well as fast food products, dishes that provoke fermentation (milk, sour cream, grapes, black bread, etc.), smoked, fatty and fried foods, pastry products. At the same time, nutrition should be varied and rich in proteins and vitamins. At the end of the acute state, nutrition should become complete with the observance of the stimulating principle during the period of remission in patients with low acidity. Fractional meals are recommended, 5-6 times a day.

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