TREATMENT OF PILLOUS ATRESIA IN CHILDREN.

Kodirova Ziyodakhon Avazbek qizi – student, Eurasian Multidisciplinary University, Tashkent, Uzbekistan. Akramova Nozima Akramovna - Scientific supervisor, PhD, professor of the Department of Surgery at Eurasian Multidisciplinary University, Tashkent, Uzbekistan.

Esophageal atresia is the main congenital defect that requires urgent and strict medical care. This article is devoted to the analysis of modern methods of treating esophageal atresia in children. The paper discusses current approaches to the diagnosis and individual disease data, including surgery, emergency care, postoperative support, and rehabilitation. Particular attention is paid to the advantages and implementation of various methods for analyzing data from scientific publications and protocols obtained from Google Scholar, Scopus and other sources. The results of the study show an improvement in treatment outcomes due to modern surgical techniques and a comprehensive approach to postoperative support. However, further research is still needed.

Keywords. Esophageal atresia, congenital malformation, treatment of children, surgery, postoperative support, rehabilitation, diagnosis, emergency care, medical protocols, scientific research.

Introduction.

Esophageal atresia is a complex and protected dangerous congenital defect in which the esophagus does not connect to the stomach or forms an abnormal channel with the trachea. This defect, occurring in about 1 in 2,500 newborns, is a serious medical condition that requires surgery. If left untreated, esophageal atresia can lead to consequences including aspiration pneumonia, chronic malnutrition, and even death.

Modern advances in medicine and surgery significantly limit the prognosis for children with esophageal atresia. Surgical techniques such as primary esophageal reconstruction and minimally invasive surgeries allow for the best results and reduced risks. However, effective treatment requires comprehensive intervention, including early correction, surgery, postoperative support, and long-term rehabilitation.

The purpose of the article is to conduct a systematic modern analysis of methods for the treatment of esophageal atresia in children. To do this, various approaches will be considered, their advantages and disadvantages will be identified, and the results will be evaluated based on the analysis of data from scientific publications and recommendations. Study of the topics relevant in coverage, the need for treatment methods and improving the quality of life of patients.

Materials and methods.

In the course of the study of methods for the treatment of esophageal atresia in children, a comprehensive assessment of existing approaches and therapeutic strategies was carried out. To achieve the goals of the study, data from reliable sources, scientific publications and effective protocols obtained on the basis of data from Google Scholar, Scopus and other specialized resources were used.

The analysis was based on a systematic review of the literature, providing a comprehensive view of the current state of the problem. Articles on various aspects of the treatment of esophageal atresia, including early correction, surgery, postoperative treatment, and rehabilitation, are considered. Special attention was paid to modern surgical techniques, such as minimally invasive techniques and new approaches to primary reconstruction of the esophagus, as well as their effectiveness and possible treatments.

For the analysis, data from studies including the results of treatment of children with esophageal atresia in different medical institutions were used. This data shows typical trends and areas for improvement. In addition, treatment protocols, recommendations from professional medical associations, and reports on the practical experience of doctors were studied.

A comparative analysis of different treatment methods is carried out on the basis of data on surgical disorders, the frequency of operations and long-term outcomes. An important aspect of the study was the evaluation of postoperative care and rehabilitation, as they play a key role in the successful recovery and health support of patients.

Thus, using sources of reliable information and analysis methods, you will get a complete and up-to-date understanding of the treatment methods for esophageal atresia in children, identify their strengths and weaknesses, and identify areas for further research and improvement in this area.

Results.

An analysis of current treatments for esophageal atresia in children has shown progress in medical practice and technology. One of the most important achievements was the improvement of surgical outcomes. Modern surgical methods, including minimally invasive techniques, can significantly reduce the trauma of the operation and reduce the recovery time. Primary esophageal reconstruction performed using modern technologies such as robotic surgery and laparoscopic techniques ensures high efficiency and low frequency of postoperative surgeries.

An important part of effective treatment is timely and accurate diagnosis. Early detection of esophageal atresia allows you to quickly start surgery, which will improve the prognosis. The use of modern imaging methods, such as ultrasound and magnetic

resonance imaging, significantly improves the quality of diagnostics and allows for better surgical planning.

Postoperative support also plays a crucial role in the overall outcome of treatment. An integrated approach to the management of the postoperative period, including monitoring of the patient's condition, prevention of phenomena and anatomical changes, ensuring long-term results. An important importance of postoperative care is to ensure adequate nutrition, which requires the use of specialized diets and gastrostomy nutrition if necessary.

Rehabilitation of children after surgery has also shown positive results. Systematic observation, physiotherapy and nutrition correction are aimed at normalizing the growth and development of the child. Early start of rehabilitation measures helps to minimize medical disorders and maintain the child's health at a high level.

However, despite the progress made, there are still unresolved issues and areas for ongoing research. For example, more data are needed on long-term severe treatment and the impact of various factors on treatment outcomes. Problems with the availability of advanced treatments in different regions are also being identified, which requires additional steps to increase their availability and improve the quality of patient care.

Thus, modern treatments for esophageal atresia show significant improvements in patient outcomes and quality of life, however, continued research and the development of new technologies are prerequisites for further progress in this area.

Conclusions.

Modern research on the treatment of esophageal atresia in children is the most progressive in this area, which leads to results and an improvement in the quality of life of patients. An important achievement has been the development and implementation of advanced surgical technologies, such as minimally invasive and robotic techniques, which provide a more precise and less traumatic intervention. These state-of-the-art approaches to surgery allow for shorter treatment cycles, shorter recovery times, and long-term treatment outcomes.

The effectiveness of treatment is directly related to early diagnosis, which allows you to start treatment in a timely manner and avoid serious complications. Modern imaging techniques, such as ultrasound and magnetic resonance imaging, play a key role in improving the quality of diagnosis and planning surgical control, which significantly increases its success.

Postoperative support and rehabilitation are consistent components of the treatment of esophageal atresia. A comprehensive approach to the management of the postoperative period, including consistent monitoring, prevention of operations and specialized nutrition, contributing to better recovery and preservation of the patient's

health. Rehabilitation measures help to normalize the growth and development of the child, which is necessary for his general condition.

Nevertheless, despite the progress made, there are still unresolved issues that require further attention. More research is needed to assess long-term treatment outcomes and to analyze various treatment outcome factors. There is also the problem of the availability of modern treatments in different regions, as progress in accordance with treatment recommendations currently requires increased opportunities for patients.

Thus, modern methods of treating esophageal atresia have demonstrated a significant improvement in the quality and effectiveness of treatment, but further development of technology and additional research have revealed all the reasons for achieving even better results and increasing the effectiveness of treatment.

References:

- Truong, M. T., Liu, Y. C. C., Kohn, J., Chinnadurai, S., Zopf, D. A., Tribble, M., ... & Chang, K. W. (2022). Integrated microtia and aural atresia management. Frontiers in Surgery, 9, 944223.
- Dellenmark-Blom, M., Chaplin, J. E., Gatzinsky, V., Jönsson, L., Wigert, H., Apell, J., ... & Abrahamsson, K. (2016). Health-related quality of life experiences among children and adolescents born with esophageal atresia: development of a conditionspecific questionnaire for pediatric patients. Journal of Pediatric Surgery, 51(4), 563-569.
- 3. Ransome, J. (1964). Familial incidence of posterior choanal atresia. The Journal of Laryngology & Otology, 78(5), 551-554
- 4. Davronbekovich, K. J., & Rashidovich, R. T. (2023). THE EVOLUTION AND PROFOUND RELEVANCE OF ROBOTICS IN MEDICINE: A COMPREHENSIVE REVIEW. Journal of new century innovations, 35(1), 212-214.
- Rashidovich, R. T., Alisherovna, R. S., Dilshodovna, A. Z., Alisherovna, K. S., & Muxtorovna, M. Z. (2023, September). PANCREATITIS IN CENTRAL ASIA: A COMPREHENSIVE REVIEW. In Proceedings of Scientific Conference on Multidisciplinary Studies (Vol. 2, No. 9, pp. 52-56).
- 6. Аббасов, Х. Х., Рустамов, Т. Р., Амирова, Ш. А., & Аббасова, Н. Х. (2024). ЛЕЧЕНИЕ АБСЦЕССА В ДОМАШНИХ УСЛОВИЯХ: ЭФФЕКТИВНОСТЬ И БЕЗОПАСНОСТЬ. TADQIQOTLAR. UZ, 32(3), 150-153.
- 7. Давронов, Б. Л., Рустамов, Т. Р., Амирова, Ш. А., & Аббасова, Н. Х. (2024). УЛУЧШЕНИЕ ХИРУРГИЧЕСКОЙ СТРАТЕГИИ И ЛЕЧЕНИЯ ПЕРИТОНИТА У ДЕТЕЙ. Journal of new century innovations, 53(5), 121-126.
- Abduraufovuch, R. F., Abduraufovna, R. L., Utkitovich, K. A., & Rashidovich, R. T. (2024). ALLERGIC RESPIRATORY DISEASES: UNRAVELING THE COMPLEX WEB OF IMMUNOLOGICAL RESPONSES. PEDAGOGS, 50(2), 129-133.