

# DIARRHOEA IS ONE OF THE COMMON DISEASES OF THE GASTROINTESTINAL SYSTEM

**Boltaboyev Murodiljon Umarovich**

*Assistant of the Department Infectious Diseases of Fergana Public Health Medical Institute*

**Annotation.** Diarrhoea is usually a symptom of an infection in the intestinal tract, which can be caused by a variety of bacterial, viral and parasitic organisms. Infection is spread through contaminated food or drinking-water, or from person-to-person as a result of poor hygiene. Diarrhea can cause dehydration, which can be life-threatening if not treated. Dehydration is particularly dangerous in children, older adults and those with weakened immune systems.

**Keywords:** diarrhoea, dysentery, Norwalk, enteric adenovirus, Escherichia coli.

## Introduction

Interventions to prevent diarrhoea, including safe drinking-water, use of improved sanitation and hand washing with soap, can reduce disease risk. Diarrhoea should be treated with oral rehydration solution (ORS), a solution of clean water, sugar and salt. In addition, a 10–14 day supplemental treatment course of dispersible zinc tablets shortens diarrhoea duration and improves outcomes.

There are 3 clinical types of diarrhoea:

acute watery diarrhoea – lasts several hours or days and includes cholera

acute bloody diarrhoea – also called dysentery

persistent diarrhoea – lasts 14 days or longer.

A number of diseases and conditions can cause diarrhea, including:

**Viruses.** Viruses that can cause diarrhea include Norwalk virus, also known as norovirus, enteric adenoviruses, astrovirus, cytomegalovirus and viruses that cause hepatitis. Rotavirus is a common cause of sudden childhood diarrhea. The virus that causes coronavirus disease 2019 (COVID-19) also has been linked to gastrointestinal symptoms, including nausea, vomiting and diarrhea.

**Bacteria and parasites.** Exposure to certain bacteria, such as Escherichia coli, or parasites through contaminated food or water can lead to diarrhea. When traveling in developing countries, diarrhea caused by bacteria or parasites is often called traveler's diarrhea. Clostridioides difficile, also known as C. diff, is another bacterium that causes diarrhea, and it can occur after a course of antibiotics or during a hospital stay.

**Medicines.** Many medicines, such as antibiotics, can cause diarrhea. Antibiotics get rid of infections by killing bacteria that cause illness, but they also kill good bacteria that are helpful in the body. This disturbs the natural balance of bacteria in the intestines, leading to diarrhea or an infection such as C. diff. Other medicines that cause diarrhea are anticancer drugs and antacids with magnesium.

**Lactose intolerance.** Lactose is a sugar found in milk and other dairy products. People who have trouble digesting lactose often have diarrhea after eating dairy products. Lactose intolerance can increase with age because levels of the enzyme that helps digest lactose become lower as people get older.

**Fructose.** Fructose is a sugar found naturally in fruits and honey. It's sometimes added as a sweetener to certain beverages. Fructose can lead to diarrhea in people who have trouble digesting it.

**Artificial sweeteners.** Sorbitol, erythritol and mannitol — nonabsorbable sugars used as artificial sweeteners in chewing gum and other sugar-free products — can cause diarrhea in some otherwise healthy people.

**Surgery.** Partial intestine or gallbladder removal surgeries can sometimes cause diarrhea.

**Other digestive disorders.** Chronic diarrhea has a number of other causes, such as IBS, Crohn's disease, ulcerative

colitis, celiac disease, microscopic colitis and small intestinal bacterial overgrowth (SIBO).

Some common risk factors for diarrhea include: exposure to viruses, bacteria or parasites. This is a major risk factor for sudden onset of diarrhea.

Diet. Certain foods or drinks, including coffee, tea, dairy products, or foods containing artificial sweeteners can cause diarrhea in some people.

Medicines. Some medicines, such as antibiotics, laxatives, magnesium supplements, antidepressants, NSAIDs, chemotherapy and immunotherapy, can cause diarrhea.

Symptoms associated with loose, watery stools, also called diarrhea, may include:

Belly cramps or pain, bloating, nausea, vomiting, fever, blood in the stool, mucus in the stool, urgent need to pass stool.

Possible tests include:

Blood tests. A complete blood count, measurement of electrolytes and tests of kidney function can help indicate how bad your diarrhea is.

Stool test. You may have a stool test to see if a bacterium or parasite is causing your diarrhea.

Hydrogen breath test. This type of test can help determine if you have a lactose intolerance. After you drink a liquid that contains high levels of lactose, your breath is measured for hydrogen at regular intervals. Breathing out too much hydrogen indicates that you aren't fully digesting and absorbing lactose.

Flexible sigmoidoscopy or colonoscopy. Using a thin, lighted tube that's inserted into the rectum, a medical professional can see inside of the colon. The device also has a tool that allows the doctor to take a small sample of tissue, called a biopsy, from the colon. Flexible sigmoidoscopy provides a view of the lower colon, while colonoscopy allows the doctor to see the entire colon.

Upper endoscopy. A medical professional uses a long, thin tube with a camera on the end to examine the stomach and upper small intestine. They may remove a tissue sample to be checked in a laboratory.

Most cases of sudden diarrhea clear on their own within a couple of days without treatment. If you've tried lifestyle changes and home remedies for diarrhea without success, your healthcare professional might recommend medicines or other treatments.

**Antibiotics or antiparasitics**

Antibiotics or antiparasitic medicines might help treat diarrhea caused by certain bacteria or parasites. Most bacterial causes of diarrhea do not need treatment in most people. If a virus is causing your diarrhea, antibiotics won't help. Over-the-counter antidiarrheal medications are also available. These include loperamide (Imodium) and bismuth subsalicylate (Pepto-Bismol). Imodium is an antiperistalsis drug that reduces stool passage. Pepto-Bismol reduces diarrheal stool output in adults and children. It can also prevent traveler's diarrhea. There is some concern that antidiarrheal medications could prolong bacterial infection by reducing the removal of pathogens through stools.

**Treatment to replace fluids**

Your healthcare professional likely will advise you to replace the fluids and salts that you lose when you have diarrhea. For most adults, that means drinking water with electrolytes, juice or broth. If drinking liquids upsets your stomach or causes vomiting, your healthcare professional might give you IV fluids. Water is a good way to replace fluids, but it doesn't contain the salts and electrolytes — minerals such as sodium and potassium — that your body needs to function. You can help maintain your electrolyte levels by drinking fruit juices for potassium or eating soups for sodium. But certain fruit juices, such as apple juice, might make diarrhea worse.

**Probiotics**

There is mixed evidence for the role of probiotics in diarrhea. They may help prevent traveler's diarrhea, and in children, there is evidence to suggest that they might reduce diarrheal illness by 1 day. People should ask their doctor for advice, as there are numerous strains. Researchers have most studied probiotics based on *Lactobacillus rhamnosus* and *Saccharomyces boulardii* for antibiotic-associated diarrhea.

In conclusion, common causes of diarrhea include infections, food allergies, and food poisoning. It's often due to a virus infecting your gut, but it can also result from medications or dietary issues. Diarrhea causes loose or watery stool and can last from a day to several weeks. Treatment usually involves managing symptoms at home with plenty of fluids and changes to your diet. You can help avoid diarrhea by practicing good hygiene, getting vaccinated, storing food properly, and being cautious with food and drink.

## References:

1. Kamalovich, S. I. (2024). Congenital Esophageal Malformations in Children, Symptoms, Diagnosis and Treatment. *Miasto Przyszłości*, 53, 1241-1243.
2. Болтабаев, М. У. (2023). КОРОНАВИРУС (COVID-19) ХАМРОҶ КАСАЛЛИК БИЛАН КЕЧГАНДА КАСАЛЛИКДАН КЕЙИНГИ РЕАБИЛИТАЦИЯ ДАВРИДА АНИҚЛАНАДИГАН ЎЗГАРИШЛАР ВА УЛАРНИ БАРТАРАФ ЭТИШ ЧОРАЛАРИ. *Scientific Impulse*, 2(13), 178-182.
3. Zakhriddinovich, I. B. (2024, June). Migraine in Children and its Causes, Symptoms and Treatment. In *Interdisciplinary Conference of Young Scholars in Social Sciences (USA) (Vol. 7, pp. 29-32)*.
4. Zakhriddinovich, I. B. (2024, May). Febrile Seizure Disease and its Symptoms, Treatment. In *International Congress on Biological, Physical And Chemical Studies (ITALY) (pp. 121-124)*.
5. Алимова, И. А., Райимова, З. М., Бабаджанова, Х. М., & АКТУАЛЬНОСТЬ, В. (2022). РАННЕГО ВМЕШАТЕЛЬСТВА В СЕМЕЙНЫЕ ПОЛИКЛИНИКИ ДЕТЯМ РАННЕГО ВОЗРАСТА. *JOURNAL OF CLINICAL AND PREVENTIVE MEDICINE*, 2, 5-11.
6. Alimova, I. (2021, January). BOLA TARBIYASIDA OTA-ONALARNING PSIXOLOGIK BILIMLARNI SHAKLLANTIRISHNING AHAMIYATI. In *INTERNATIONAL CONFERENCES ON LEARNING AND TEACHING (Vol. 1, No. 1, pp. 131-132)*.
7. Анваровна А.И., Мелибаевна Б.Х., Максамаджоновна Р.З., Захриддиноич И.Б., Исломкулович У.М. (2023). Актуальность внедрения службы комплексного раннего вмешательства в семейных клиниках. *БиоГеско Журнал новозеландской герпетологии*, 12 (03), 1139-1145.
8. Anvarovna, A. I., & Melibaevna, B. K. (2022). JUVENILE IDIOPATHIC ARTHRITIS. *SCIENTIFIC JOURNAL OF RESEARCH IN MEDICINE (SJRM)*, 1(4), 6-8.
9. Melibayevna, B. X. (2023). Measures to Improve the Quality of Life of Patients with Comorbid Heart Pathology and Increase the Effectiveness of Their Treatment. *Scholastic: Journal of Natural and Medical Education*, 2(3), 34-36.
10. Kamalovich, S. I. (2024, May). CONGENITAL HEART DEFECTS IN CHILDREN. In *Proceedings of International Conference on Modern Science and Scientific Studies (Vol. 3, No. 5, pp. 65-71)*.
11. Rayimov, G. N., Tillaboldiyev, A. R., Saloxiddinov, N., & Sh, D. S. (2022). Actical Errors in Surgical Treatment of Strengthened Abdominal Hernias. *The Peerian Journal*, 5, 130-135.
12. Mahmudov, U. I. (2024). MANAGEMENT OF THYROID NODULES. *JOURNAL OF INNOVATIONS IN SCIENTIFIC AND EDUCATIONAL RESEARCH*, 7(4), 1-7.
13. Isakjonovich, S. M. (2024). Effectivness of Aromatherapy in Post-Covid Syndrome. *Miasto Przyszłości*, 49, 1239-1242.
14. Mahmudov, U. I. (2023). COMPARATIVE CHARACTERISTICS OF CLINICAL AND LABORATORY PARAMETERS OF PATIENTS OF THE DIABETIC FOOT DEPARTMENT, DEPENDING ON THE PRESENCE OR ABSENCE OF DIABETES MELLITUS. *SO 'NGI ILMIIY TADQIQOTLAR NAZARIYASI*, 6(12), 355-360.
15. Nazirtashova, R. M. (2023). XALQ TABOBATIDA MAKKAJO „RINING O „RNI. *Journal of Chemistry of Goods and Traditional Medicine*, 2(1), 210-216.
16. Mamadaliyevna, N. R. (2023). INSONIYAT O'ZINI O'ZI ZAHARLAMOQDA. " GERMANY" MODERN SCIENTIFIC RESEARCH: ACHIEVEMENTS, INNOVATIONS AND DEVELOPMENT PROSPECTS, 9(1).
17. Nazirtashova, R. M., & Kirgizov, S. M. (2021). Research Of Pentosal Hydrolysis Products Of Plant Waste. *The American Journal of Applied sciences*, 3(04), 126-130.
18. Matyakubov, R., & Nazirtashova, R. M. (2021). Valuable Raw Materials For Producing Furfural.

The American Journal of Interdisciplinary Innovations and Research, 3(06), 159-165.

19. Назирташова, Р. М. (2022). ДИНАМИЧЕСКОЕ ИССЛЕДОВАНИЕ КАРДИОРЕСПИРАТОРНОЙ СИСТЕМЫ УЧЕНИКОВ СПОРТИВНЫХ ШКОЛ К ОБУЧЕНИЮ В УСЛОВИЯХ ПОВЫШЕННОЙ СЛОЖНОСТИ. *BARQARORLIK VA YETAKSHI TADQIQOTLAR ONLAYN ILMIY JURNALI*, 90-94.
20. Анварова, З. (2024). СПИД/ВИЧ ИФИЦИРОВАНИЕ И ДЕТИ. *THEORY AND ANALYTICAL ASPECTS OF RECENT RESEARCH*, 2(22), 41-45.
21. Анварова, З. (2024). ЗАДЕРЖКА ВНУТРИУТРОБНОГО РАЗВИТИЯ ПЛОДА КАК ФАКТОР НАРУШЕНИЯ ГАРМОНИЧНОГО РАЗВИТИЯ ДЕТЕЙ. *THEORY AND ANALYTICAL ASPECTS OF RECENT RESEARCH*, 2(21), 234-237.
22. Qosimovna, A. Z. (2023). Factors that lead to asphyxia in babies. *American Journal of Pediatric Medicine and Health Sciences (2993-2149)*, 1(10), 740-743.
23. Абдуллаев, С. (2024). АКТУАЛЬНОСТЬ ПРОБЛЕМ РАЗВИТИЯ ОСТРЫХ ПНЕВМОНИЙ У ДЕТЕЙ. *THEORY AND ANALYTICAL ASPECTS OF RECENT RESEARCH*, 2(22), 29-33.
24. Mukhtarzhanovna, I. G. (2024, May). Development of Principles of Study and Treatment of Vaginal Dysbiosis During Pregnancy. In *International Congress on Biological, Physical And Chemical Studies (ITALY)* (pp. 112-115).
25. Mukhtorjonovna, I. G. (2024). Modern Surgical Methods of Placental Aggregation. *Web of Semantics: Journal of Interdisciplinary Science*, 2(5), 412-416.
26. Solijon o'g'li, A. S. (2024). BACTERIAL, VIRAL AND MUCOPLASMA PNEUMONIA IN CHILDREN. *American Journal of Pediatric Medicine and Health Sciences (2993-2149)*, 2(1), 273-280.
27. Абдуллаев, С. (2024). ПСИХОЛОГИЧЕСКИЕ ОСОБЕННОСТИ УЧЕБНЫХ ИГР В ПОДГОТОВКЕ СТУДЕНТОВ МЕДИЦИНСКИХ ИНСТИТУТОВ. *FORMATION OF PSYCHOLOGY AND PEDAGOGY AS INTERDISCIPLINARY SCIENCES*, 2(25), 222-224.
28. Александровна, А.Е. (2023). ОСНОВНЫЕ АСПЕКТЫ РЕСПИРАТОРНОЙ РЕАБИЛИТАЦИИ ПОСЛЕДСТВИЙ НОВОЙ КОРОНАВИРУСНОЙ ИНФЕКЦИИ У ДЕТЕЙ С БРОНХОЛЕГОЧНЫМИ ЗАБОЛЕВАНИЯМИ. *Всемирный бюллетень социальных наук*, 18, 81-83.
29. Abdullaev, S. S. (2023). TO THE QUESTION OF COMMUNITY-ACCOMPANIED PNEUMONIA IN YOUNG CHILDREN. *Journal of Social Sciences and Humanities Research Fundamentals*, 3(05), 51-53.
30. Худайназарова, С. Р., Курьязова, Ш. М., & Охунова, М. Ж. (2023). ОСОБЕННОСТИ БРОНХООБСТРУКТИВНОГО СИНДРОМА ПРИ ВНЕБОЛЬНИЧНОЙ ПНЕВМОНИИ У ДЕТЕЙ РАННЕГО ВОЗРАСТА. *Interpretation and researches*, 1(6).
31. Анварова, З. (2024). СПИД/ВИЧ ИФИЦИРОВАНИЕ И ДЕТИ. *THEORY AND ANALYTICAL ASPECTS OF RECENT RESEARCH*, 2(22), 41-45.
32. Анварова, З. (2024). ЗАДЕРЖКА ВНУТРИУТРОБНОГО РАЗВИТИЯ ПЛОДА КАК ФАКТОР НАРУШЕНИЯ ГАРМОНИЧНОГО РАЗВИТИЯ ДЕТЕЙ. *THEORY AND ANALYTICAL ASPECTS OF RECENT RESEARCH*, 2(21), 234-237.
33. Alexandrovna, A. E. (2023). Clinical and functional features of the bronchopulmonary system in chronic kidney disease. *Texas Journal of Medical Science*, 16, 57-59.
34. Qosimovna, A. Z. (2023). Factors that lead to asphyxia in babies. *American Journal of Pediatric Medicine and Health Sciences (2993-2149)*, 1(10), 740-743.
35. Kamoldinovich, X. D. (2024). INTRAVENOUS ADMINISTRATION OF CONTRAST AGENTS AND ITS CHARACTERISTICS. *Miasto Przyszłości*, 48, 119-131.

36. Kamoldinovich, X. D. (2024, May). MODERN CONTRAST AGENTS IN MEDICINE. In Proceedings of Scientific Conference on Multidisciplinary Studies (Vol. 3, No. 5, pp. 132-144).
37. Kamoldinovich, X. D. (2024, May). ULTRASOUND LEVELING AND ITS ADVANTAGES. In Proceedings of International Conference on Modern Science and Scientific Studies (Vol. 3, No. 5, pp. 59-64).