

PREVALENCE OF RISK FACTORS FOR POST-COVID-19 ASSOCIATED GASTROINTESTINAL DISEASES IN DIFFERENT OCCUPATIONAL GROUPS

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Introduction

Currently, there is very little information on the epidemiology, clinical features, prevention and treatment of Post-Covid-19 Associated Gastrointestinal Diseases (Post-Covid-19 Associated Gastrointestinal Diseases) and none at all in Uzbekistan and, in particular, in the Fergana Valley. According to the scientific results obtained in clinical trials, there is every reason to believe that patients with digestive system diseases may be a risk group for severe disease and unfavorable prognosis when infected with the SARS-CoV-2 virus. [1].

Post-Covid-19 Associated Gastrointestinal Diseases can occur in two ways: first, through the direct effect of the virus itself, and second, in connection with drug therapy used to treat coronavirus infection. Therefore, it is necessary to take into account that in this type of disease (which reaches 40%) there is an iatrogenic risk factor, which makes it more beneficial to seek treatment methods from natural and folk medicine.

The target cells that the SARS-Covid-2 virus can enter are located in the mucous membranes of the upper respiratory tract, stomach and intestines, through which the gastrointestinal tract (GI) is damaged by viral infection. In particular, getting into intestinal cells, the virus increases the permeability of the intestinal wall, and thus reaches the liver, where it also causes inflammation. Extrapulmonary manifestations of COVID-19 are observed and even prioritized by the corresponding GI: Post-COVID-19 Ass HAC “the most common symptoms” (fever, cough, shortness of breath, myalgia and fatigue) and “relatively less common symptoms” (loss of taste and smell, anorexia, diarrhea, nausea, vomiting, abdominal pain) are detected in 2/3 of infected patients; 50.5% of patients are hospitalized; Diarrhea occurs in every 3rd patient; vomiting and abdominal pain are noted in 3.9 and 3%, respectively; 25% of patients develop isolated gastrointestinal symptoms; gastrointestinal and respiratory symptoms occur simultaneously in every 4th patient; diarrhea appears as the first symptom of COVID-19 in every 5th patient, lasts from 1 to 14 days, and the frequency of defecation reaches 4-6 times a day; as a sign of complete recovery from the disease, in such patients, it is necessary to take into account the negative virological analysis for SARS-COV-2 in the stool [2].

Early detection, prevention and safe treatment of this clinical manifestation in the post-COVID-19 Ass HAC population, which is characteristic of the shift from the traditional COVID-19 or Covid syndrome descriptions, is of great medical, economic and prognostic importance. Patients often present late and are diagnosed with Post-COVID-19 syndrome, which increases the incidence of mortality in the population. Therefore, it is advisable to conduct research in this area and, in particular, to prioritize epidemiological studies, which have a high potential for early detection of Covid-19 and/or POST-COVID-19 syndrome at the pre-nosodic stage, compared to clinical studies. To date, this scientific direction has not been widely implemented, and as a result, symptoms of damage to the digestive system in the new Covid-19/POST-COVID-19 are often overshadowed by respiratory symptoms and should not be ignored.

Purpose of the study. The aim of the study is to study the epidemiology of POST-COV-19-associated digestive system diseases, to radically improve prevention and treatment methods.

Material and methods. The object of the study was 1605 people aged ≥ 48 -60 years who had experienced Covid-19 infection and were registered and monitored in Fergana city polyclinics in 2022-2024.

The subject of the study was the results of blood serum and special questionnaires (questionnaires) to conduct epidemiological, clinical, biochemical and physical analyzes of the Post-Covid-19 population, to determine the effectiveness of screening and prevention methods.

Research methods. The study used questionnaire, biochemical, general clinical, physical and statistical methods. Anthropometric measurements, which assessed serum lactate dehydrogenase, interleukin, S-reactive protein, lipid spectrum indicators, and the WHO (1997) criteria were used to analyze common risk factors.

Results

The prevalence of risk factors in these three population groups is as follows: smoking 5.1%, 3.5% and 0.0%; hereditary factors 17.9%, 13.3% and 14.3%; physical inactivity 7.7% and 13.2% and 14.3%; low consumption of fruits and vegetables 12.8%, 6.8% and from 0.0%, mental factor from 20.5%, 13.4% and 14.3%; dyslipidemia from 17.9%, 14.0% and 14.3%, obesity from 5.1%, 9.2% and 28.6%, GKa from 5.1%, 13.0% and 0.0%; GMa from 7.69 %, 13.5 % and 14.3 %.

The prevalence of total risk factors, which are the effects of various work activities, is 0.6% in people engaged in mental labor, 99.2% in people engaged in physical labor, and 0.1% in pensioners/disabled people [RR = 1.15; UU = 1.24 – 1.07; X² = 85.3; r⁺⁺ = 0.99; P > 0.05].

Conclusion

Risk factors for post-Covid-19 associated gastrointestinal diseases are characterized by the following frequencies: smoking 3.8%, genetic factor 12.5%, physical inactivity 12.4%, low fruit and vegetable consumption 12.1%, psychological factor 12.7%, dyslipoproteinemia 13.2%, obesity 17.2%, hypokalemia 24.4% and hypomagnesemia 25.3%. Total risk factors are detected at frequencies of 49.7% in women and 50.3% in men.

LITERATURES

1. Арутюнов Г.П., Тарловская Е.И., Арутюнов А.Г. и др. Международный регистр «Анализ динамики коморбидных заболеваний у пациентов, перенесших инфицирование SARS-CoV-2 (АКТИВ SARS-CoV-2)». Кардиология. 2020;60(11):30-34.
2. Барановский А.Ю., Беляев А.М., Кондрашина Э.А. По-казатели заболеваемости и смертности от болезней органов пищеварения в СЗФО России и меры, принимаемые по их снижению. Рос. журн. гастроэнтерологии, гепатологии, колопроктологии. 2019;29(1):36-46.
3. Схиртладзе М.Р., Тимофеева А.А., Буеверова Е.Л. и др. Боль в животе как первое проявление новой коронавирусной инфекции COVID-19. Российский журнал гастроэнтерологии, гепатологии, колопроктологии. 2020;30(6):57-62. <https://doi.org/10.22416/1382-4376-2020-30-6-57-62>.
4. Топчий Т.Б., Минушкин О.Н. Эпидемиология хронического гастрита и некоторые лечебные подходы. Мед. алфавит. Прак. гастроэнтерология. 2016;4(34):5-11.
5. Циммерман Я.С. Язвенная болезнь: критический анализ современного состояния проблемы. Эксперим. и клин. гастроэнтерология. 2018;149(1):80-9.
6. Шевченко С.С., Тихонова Н.К., Левина И.С. и др. Мнение студентов о профилактике Covid – 19 // Профилактическая медицина. – 2024. – Т. 27 - №1. – С. 45 – 49.
7. Шептулин А.А. Диарея у пациентов с инфекцией COVID-19. Российский журнал гастроэнтерологии, гепатологии, колопроктологии. 2020; 30(6):51-56. <https://doi.org/10.22416/1382-4376-2020-30-6-51-56>.
8. Abbasi J. Younger Adults Caught in Covid – 19 Crosshairs as Demographics Shift. JAMA. 2020;324(21):2141 – 2143. <https://doi.org/10.1001/jama.2020.21913>.