

DIABETES AND CHILDREN

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Abstract. This article provides general information about the clinic for children with diabetes.

Key words: type 1 diabets, insulin, pancreas, glucose, dehydration, thirst, frequent urination, headache, blurred vision, frequent feeding, fatigue, weight loss, nervousness.

ДИАБЕТ И ДЕТИ

Аннотация. В статье дана общая информация о клинике для детей с диабетом.

Ключевые слова: диабет 1 типа, инсулин, поджелудочная железа, глюкоза, обезвоживание, жажда, частое мочеиспускание, головная боль, нечеткость зрения, частое кормление, усталость, потеря веса, нервозность.

Introduction: Diabetes is a disease caused by insulin deficiency and damage to the body.

Diabetes has been known for a long time in the history of Eastern folk medicine. Abu Ali ibn Sina pays special attention to this pain. "Water comes out the way you drink it," he wrote. The patient's drinking a lot of water also produces another builder, and the patient loses a lot of weight.

Diabetes is a chronic, metabolic disease characterized by elevated levels of blood glucose (or blood sugar), which leads over time to serious damage to the heart, blood vessels, eyes, kidneys and nerves. The most common is type 2 diabetes, usually in adults, which occurs when the body becomes resistant to insulin or doesn't make enough insulin. In the past 3 decades the prevalence of type 2 diabetes has risen dramatically in countries of all income levels. Type 1 diabetes, once known as juvenile diabetes or insulin-dependent diabetes, is a chronic condition in which the pancreas produces little or no insulin by itself. For people living with diabetes, access to affordable treatment, including insulin, is critical to their survival.

Nowadays, the number of children with diabetes is increasing. Type 1 diabetes is often diagnosed in patients under the age of 30, and the peak of the disease occurs at the age of 14. Type 1 diabetes occurs when the pancreas cannot produce insulin, and the disease progresses very quickly. At such a time, we need to know the symptoms of the disease in order to provide timely help to the child.

Materials and methods The first type of diabetes develops suddenly, how, gradually.

There is also an asymptomatic type of the disease. Both types of diabetes have different symptoms, but they also have common symptoms:

constant dry mouth, constant thirst, sometimes the patient can drink from seven to ten liters of water a day;

a lot and frequent urination (polyuria);

appetite (polyphagia);

register, soreness/dryness of direct use, the appearance of purulent lesions on the skin and regeneration;

severe fatigue, insomnia, consequences of physical and mental activity;

poor eyesight;

seizures.

When there is too much glucose in the blood, the body may try to pass it through the urine.

Dehydration occurs in the body and the child becomes thirsty.

The higher the level of sugar in the blood, the more often the child has a headache. In addition, the eyesight deteriorates in adolescents. All children can eat a lot, because the growing organism requires more nutrients. This is due to the lack of insulin, glucose accumulates in the blood, does not enter the cells and does not participate in energy production. That is why the child always feels hungry. If there is no glucose in the cells, not enough energy is produced. As a result, fatigue increases in the body. You may not have enough energy for the tasks you used to perform.

Most people think that people with diabetes are overweight. But this is not always the case.

Glucose-starved cells destroy muscle tissue and fat reserves to provide energy, and the patient begins to lose weight. Of course, mood swings are normal for most teenagers. A small study conducted by the American Diabetes Association in 2007 found that children became more moody and irritable when their blood sugar levels were high.

Conclusion: If we pay attention to the above signs, we will detect type 1 diabetes early.

By starting treatment in time, we can prevent complications of the disease and prolong life.

REFERENCES

1. Rajabova Oygul Islomovna.(2024). VIRUSLI GEPATITLAR VA TUG'RUQDAN KEYINGI ERTA QON KETISHLARNI KAMAYTIRISHNING YANGI TEXNOLOGIYALARI. ОБРАЗОВАНИЕ НАУКА И ИННОВАЦИОННЫЕ ИДЕИ В МИРЕ, 39(5), 99–106. <https://www.newjournal.org/index.php/01/article/view/11723>
2. Rajabova Oygul Islomovna .(2024). A Comparative Analysis of the Effectiveness of Vaginal Progesterone, Cervical Pesar, and Their Combination for Preventing the Risk of

- Premature Labor in High-Risk Pregnant Women BEST JOURNAL OF INNOVATION IN SCIENCE, RESEARCH AND DEVELOPMENT, 3(3), 440-446.
<http://www.bjisrd.com/index.php/bjisrd/article/view/1849/1700>
3. Rajabova Oygul Islomovna.(2024). MODERN CONCEPT OF RECURRENT VAGINAL INFECTIONS IN WOMEN OF REPRODUCTIVE AGE, 3(04), 128-131.
<https://jhlsr.innovascience.uz/index.php/jhlsr/article/view/518/455>
 4. Rajabova Oygul Islomovna.(2024). METHODS OF PHARMACOTHERAPEUTIC TREATMENT OF ABNORMAL UTERINE BLEEDING IN GIRLS, 3(5),193-197
<https://mudarrisziyo.uz/index.php/pedagogika/article/view/945>
 5. Rajabova Oygul Islomovna.(2024). Method Stopping Atonic Bleeding From the Uterus after Childbirth Using Balloon Tamponade International Journal of Alternative and Contemporary Therapy with U.S. ISSN 2995-5378 In Volume 2, Issue 9 (2024)
<https://medicaljournals.eu/index.php/IJACT/article/view/965>
 6. Rajabova Oygul Islomovna.(2024). Tactics for carrying women at high risk of recurrent miscarriage. New renaissance journal ResearchBib IF-2023: 11.01, ISSN: 3030-3753, Volume 1 Issue 8 Pp:509-514 <https://doi.org/10.5281/zenodo.13982730>
 7. Farida Farkhodovna, K. ., Umida Rakhmatulloevna, N. ., & Mokhigul Abdurasulovna, B. (2022). ETIOLOGY OF CHRONIC RHINOSINUSITIS AND EFFECTIVENESS OF ETIOTROPIC TREATMENT METHODS (LITERATURE REVIEW). Новости образования: исследование в XXI веке, 1(4), 377–381. извлечено от <https://nauchniyimpuls.ru/index.php/noiv/article/view/1367>
 8. Numonova, A., & Narzulayeva, U. (2023). EPIDEMIOLOGY AND ETIOPATHOGENESIS OF CHF. Наука и инновация, 1(15), 115-119.
 9. Орипова Озода Олимовна, Самиева Гулноза Уткуровна, Хамидова Фарида Муиновна, & Нарзулаева Умида Рахматуллаевна (2020). Состояние плотности распределения лимфоидных клеток слизистой оболочки гортани и проявления местного иммунитета при хроническом ларингите (анализ секционного материала). Academy, (4 (55)), 83-86.
 10. Umida Rakhmatulloevna Narzulaeva, & Xamrayeva Muxlisa Farmon qizi. (2023). ETIOPATHOGENESIS OF HEMOLYTIC ANEMIA. Web of Medicine: Journal of Medicine, Practice and Nursing, 1(1), 1–4. Retrieved from <https://webofjournals.com/index.php/5/article/view/26>

11. Нарзулаева, У., Самиева, Г., & Насирова, Ш. (2023). Гемореологические нарушения на ранних стадиях гипертензии в жарком климате. Журнал биомедицины и практики, 1(1), 221–225. <https://doi.org/10.26739/2181-9300-2021-1-31>
12. Umida Rakhmatulloeva Narzulaeva. (2023). Important Aspects of Etiology And Pathogenesis of Hemolytic Anemias. American Journal of Pediatric Medicine and Health Sciences (2993-2149), 1(7), 179–182. Retrieved from <https://grnjournal.us/index.php/AJPMHS/article/view/817>
13. Нарзулаева, У. Р., Самиева, Г. У., & Насирова, Ш. Ш. (2021). ИССИҚ ИҚЛИМДА КЕЧУВЧИ ГИПЕРТОНИЯ КАСАЛЛИГИНИНГ БОШЛАНГИЧ БОСҚИЧЛАРИДА ГЕМОРЕОЛОГИК БУЗИЛИШЛАР. ЖУРНАЛ БИОМЕДИЦИНЫ И ПРАКТИКИ, 6(1).
14. Нарзулаева, У., Самиева, Г., Лапасова, З., & Таирова, С. (2023). Значение диеты в лечении артериальной гипертензии . Журнал биомедицины и практики, 1(3/2), 111–116. <https://doi.org/10.26739/2181-9300-2021-3-98>
15. Narzulaeva Umida Rakhmatulloeva, Samieva Gulnoza Utkurovna, & Ismatova Marguba Shaukatovna (2020). SPECIFICITY OF THE CLINICAL COURSE OF THE INITIAL STAGES OF HYPERTENSION IN ARID ZONES OF UZBEKISTAN AND NON-DRUG APPROACHES TO TREATMENT. Кронос, (4 (43)), 15-17.
16. Umida Raxmatulloeva Narzulaeva, & Mohigul Abdurasulovna Bekkulova (2023). Arterial gipertenziya etiologiyasida dislipidemiyaning xavf omili sifatidagi roli. Science and Education, 4 (2), 415-419.
17. Narzulaeva, U. R., & Samieva, G. U. (2021). Nasirova ShSh. Hemoreological Disorders in The Early Stages Of Hypertension In Hot Climates. Journal of Biomedicine and Practice, 6(1), 221-225.
18. Dilsora Nuriddinova Juraeva, Umida Rakhmatulloeva Narzulaeva, & Kurbonova Gulbahor Aslamovna. (2022). GENDER DIFFERENCES IN THE PARACLINICAL FEATURES OF THE COURSE OF TRIGEMINAL NEURALGIA. World Bulletin of Public Health, 8, 186-190. Retrieved from <https://www.scholarexpress.net/index.php/wbph/article/view/751>
19. Narzulaeva, U. (2023). PATHOGENETIC MECHANISMS OF MICROCIRCULATION DISORDERS. International Bulletin of Medical Sciences and Clinical Research, 3(10), 60–65. Retrieved from <https://researchcitations.com/index.php/ibmscr/article/view/2811>
20. Narzulaeva Umida Rakhmatulloeva and Rakhmatova Fotima Ulugbekovna, “PATHOGENETIC MECHANISMS OF DISORDERS IN THE HEMOSTASIS

SYSTEM OBSERVED IN PATIENTS INFECTED WITH COVID-19”, IEJRD - International Multidisciplinary Journal, vol. 7, no. ICMEI, p. 3, Feb. 2023.

21. Халимова, Ю. С., & Хафизова, М. Н. (2024). КЛИНИЧЕСКИЕ АСПЕКТЫ ЛИЦ ЗЛОУПОТРЕБЛЯЮЩЕЕСЯ ЭНЕРГЕТИЧЕСКИМИ НАПИТКАМИ. *Modern education and development*, 10(1), 3-15.
22. Tog'aydullayeva, D. D. (2024). Embrional Davrda Gemopoez Va Unda Jigar Va Talloqning Roli. *Journal of Science in Medicine and Life*, 2(6), 132-134.
23. Tog'aydullayeva, D. D. (2024). Occurrence of Combination Diseases in Ischemic Heart Disease and Metabolic Syndrome and their Diagnosis. *Journal of Science in Medicine and Life*, 2(6), 126-131.
24. Tog'aydullayeva, D. D. (2024). Occurrence of Combination Diseases in Ischemic Heart Disease and Metabolic Syndrome and their Diagnosis. *Journal of Science in Medicine and Life*, 2(6), 126-131.