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A MODERN APPROACH TO STUDYING THE PREVALENCE OF MENTAL DISEASES IN CHILDREN BORN OF CLOSE-KINDED MARRIAGES.

Muminov R.K., Agranovskiy M.L., Azimova G.A., Karimov A.Kh.

Andijan State Medical Institute

✓ ***Resume,***

Children born in closely related marriages with and without hereditary burdens have a high percentage of neuropsychiatric complications, while children born outside of a close relationship suffered from minor deviations due to perinatal factors.

Key words: children, mental disorders, closely related marriages, hereditary burden.

СОВРЕМЕННЫЙ ПОДХОД К ИЗУЧЕНИЮ РАСПРОСТРАНЕННОСТИ ПСИХИЧЕСКИХ ЗАБОЛЕВАНИЙ У ДЕТЕЙ, РОЖДЕННЫХ ОТ БЛИЗКОРОДСТВЕННЫХ БРАКОВ.

Аграновский М.Л., Муминов Р.К., Азимова Г.А., Каримов А.Х.

Андижанский государственный медицинский институт

✓ ***Резюме***

У детей, рожденных в близкородственных браках с наследственной отягощенностью и без таковой, отмечается высокий процент психоневрологических осложнений, в то время как дети, рожденные вне близкого родства, страдали незначительными отклонениями, обусловленными перинатальными факторами.

Ключевые слова: дети, психические расстройства, близкородственные браки, наследственная отягощенность.

YAQIN QARINDOSHLAR ORASIDAGI NIKOHLARDAN TUG‘ILGAN BOLALARDA RUHIY KASALLIKLARNING TARQALISHINI O‘RGANISHGA ZAMONAVIY YONDASHUV

Agranovskiy M.L., Mo'minov R.Q., Azimova G.A., Karimov A.X.

Andijon davlat tibbiyot instituti

✓ ***Rezyume***

Irsiyati og’irlashgan, yaqin qarindoshlar nikohdan tug'ilgan bolalarning asab-psixiatrik asoratlari yuqori foizga ega, yaqin qarindoshlar nikohisiz tug'ilgan bolalar esa perinatal omillar tufayli kamroq psihonevrologik o’zgarishlarga duch kelishgan.

Kalit so'zlar: bolalar, ruhiy buzilishlar, yaqin qarindoshlar nikohi, irsiyat og’irlashishi.

Relevance

Scientists from Northern Ireland argue that compared to the general population, children born in a marriage between cousins have a significantly increased risk of developing depression and schizophrenia [3].

The ban on closely related marriages (between blood relatives of the first line) is rooted in antiquity. Such a ban sharply reduces the likelihood of miscarriage, stillbirth and the development of hereditary diseases in offspring [1]. On the other hand, marriages between cousins (fourth-line relatives) are not uncommon in many countries - but children from such marriages are at increased risk of developing mental illness in adulthood [2].

In European countries, cousin marriages are not uncommon, however, according to researchers from Queen's University Belfast, among children born in the marriage of "cousins" and "cousins", clinical depression and schizophrenia [4].

Published April 4 in the online journal JAMA Psychiatry, the authors analyzed data on the health status of living Northern Irish citizens who were born between 1971 and 1986.

In a cohort of 363,960 people, 0.2% were children born in related marriages [3].

After adjusting for other risk factors, the researchers found that, compared with the general population, children of cousins and siblings were much more likely to take antidepressants and anxiety medications (35.8% in the study group and 26.0% in the general population) [2].

In addition, the children of cousins and cousins were more often prescribed antipsychotic drugs (8.5% of offspring of related marriages and 2.7% of the general population of the corresponding age took antipsychotics).

Scientists from Belfast determined that compared with the general population, the risk of developing schizophrenia in offspring of cousin marriages was 2 times higher, and the likelihood of developing depression in children born in such marriages increased 3 times [4].

However, the researchers found no increased risk of depression and schizophrenia in children born in second cousin marriages.

Purpose of the study. Analysis of the modern scientific base on the problem of kindred marriages, assessment of their impact on the development of a particular pathology in children.

Material and methods

From the number of patients registered at the Andijan Regional Psychoneurological Dispensary (AOPSD), 100 children were selected who were born in closely related marriages at the age of 3 to 15 years. Of these, 47 are boys and 53 are girls.

Group I surveyed consisted of 52 children from families from closely related marriages with hereditary burden.

Group II - 48 children from families from closely related marriages without hereditary burden.

The control group consisted of 50 children, whose parents were not related and did not have a hereditary history of mental illness. The group was selected on the basis of a 10% representative sample using the random number method.

Result and discussion

Mental disorders were observed in all children in the form of mental retardation, the presence of seizures, affective disorders, pathology of behavior, signs of organic brain damage, expressed in neurological deficits of varying severity

When examining children in case patients of group I in the presence of related marriages and hereditary burdens, the following mental disorders were revealed: the largest percentage is mental retardation of varying severity - 52%, the second most common pathology is epilepsy and non-epileptic seizures - 19%, behavioral disorders were observed in 15% of cases, children with organic lesions of the central nervous system accounted for 14% of cases.

Mental disorders of group II patients differed from the first group in the prevalence of convulsive syndromes and epilepsy (46%), as well as organic brain damage (28%), in the 3rd and 4th places, respectively, mental retardation (16%) and behavioral pathology (10%) ...

When examining children in the control group, the following mental disorders were revealed: mental retardation (PD) -40%, minimal cerebral dysfunction (MMD) -36%, mental retardation-3%, convulsive syndromes and epilepsy-9%, behavioral disorders-2%, organic damage to the central nervous system-10%.

When examining children in the control group, the leading positions are occupied by the MR (38%) and MMD (36%). In second place are organic brain lesions (10%) and epilepsy (10%). The smallest percentage is occupied by mental retardation (4%) and pathology of behavior (2%). It should be especially noted that children of I and II groups of nosologies MMD and ZPR are absent.

Thus, in children born in closely related marriages with hereditary burden, mental retardation is most common. Epileptic syndrome is leading in children born from closely related marriages without hereditary pathology, often against the background of organic lesions of the central nervous system. In children born out of closely related marriages and without hereditary burden, minimal cerebral dysfunction and mental retardation prevail.

Conclusions

Despite a number of positive social and economic aspects of consanguineous marriages, from the point of view of genetics and medicine, one should take into account the negative impact of consanguineous marriages, which consists in an increased genetic risk for offspring and a high incidence of congenital pathology in newborns. An assessment of the socio-demographic aspects of closely related marriages shows that their wider prevalence is in many cases explained by the poor economic situation, lack of education and low level of social security.

LIST OF REFERENCES:

1. Panakhian V.M. System of prevention and early detection of congenital malformations and hereditary diseases in otorhinolaryngology // Journal of ear, nose and throat diseases. 2008. No. 6. S. 32-36.
2. Kholmatov I.B., Ochilzoda A.A. Hearing loss due to family marriage as a factor of hereditary disease (literature review) // Bulletin of the

KSMA im. I.K. Akhunbaeva. 2014. No. 3 (appendix 1). S. 21-27.
3. Islam M.M. Effects of consanguineous marriage on reproductive behavior, adverse pregnancy outcomes and offspring mortality in Oman // Annals of Human Biology. 2013. Vol. 40, no. 3. P. 243-255.
4. Nouri N-s., Nouri N-h., Tirgar S., et al. Consanguineous marriages in the genetic counseling centers of Isfahan and the ethical issues of clinical consultations // Journal of Medical Ethics and History of Medicine. 2017. Vol. 10.P. 1-10.

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