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НОВЫЙ ДЕНЬ В МЕДИЦИНЕ  
NEW DAY IN MEDICINE**

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## MODERN ANALYSIS OF DISEASES ACCOMPANIED BY FEBRILE SYNDROME IN PRIMARY SCHOOL-AGED CHILDREN

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### ✓ *Resume*

*This article presents a modern analysis of diseases accompanied by febrile syndrome among primary school-aged children. Based on global and local statistical data, as well as scientific studies conducted by foreign researchers, the article discusses the prevalence, treatment methods, and preventive measures of these diseases. Additionally, the article highlights preventive strategies and modern approaches to managing febrile conditions.*

*Keywords: febrile syndrome, primary school age, diseases, analysis, statistics, prevention.*

## KICHIK MAKTAB YOSHIDAGI BOLALARDA ISITMA SINDROMI BILAN KECHUVCHI KASALLIKLARNI ZAMONAVIY TAHLILI

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### ✓ *Rezyume*

*Mazkur maqolada kichik maktab yoshidagi bolalar orasida isitma sindromi bilan kechuvchi kasalliklarning zamonaviy tahlili keltirilgan. Jahon va mahalliy statistik ma'lumotlar, shuningdek, chet el olimlarining ilmiy tadqiqotlari asosida bu kasalliklarning tarqalishi, davolash usullari va oldini olish choralari yozilgan. Maqolada profilaktika tadbirlari va zamonaviy yondashuvlar xususida ham so'z yuritilgan.*

*Kalit so'zlar: isitma sindromi, kichik maktab yoshi, kasalliklar, tahlil, statistika, profilaktika.*

## СОВРЕМЕННЫЙ АНАЛИЗ ЗАБОЛЕВАНИЙ С СИНДРОМОМ ЛИХОРАДКИ У ДЕТЕЙ МЛАДШЕГО ШКОЛЬНОГО ВОЗРАСТА

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### ✓ *Резюме*

*В данной статье представлен современный анализ заболеваний, сопровождающихся лихорадочным синдромом у детей младшего школьного возраста. На основе мировых и локальных статистических данных, а также научных исследований зарубежных ученых, рассматриваются распространенность данных заболеваний, методы их лечения и меры профилактики. В статье также обсуждаются профилактические мероприятия и современные подходы к лечению.*

*Ключевые слова: лихорадочный синдром, младший школьный возраст, заболевания, анализ, статистика, профилактика.*

## Relevance

Diseases accompanied by febrile syndrome in primary school-aged children are considered among the most pressing issues in the field of child healthcare. According to the World Health Organization (WHO) [1], cases related to febrile syndrome are widely prevalent among children worldwide.

Febrile syndrome refers to a complex of conditions that develop in response to various infectious and inflammatory processes in a child's body. It mainly arises due to infectious diseases, including viral and bacterial infections. Since the thermoregulation system in children is not yet fully developed, they are more sensitive to febrile syndrome. Typically, febrile syndrome manifests with symptoms such as chills, weakness, headache, shivering, and other related signs [4].

Febrile syndrome is one of the most common symptoms in children and manifests against the background of various diseases. It represents the body's protective response to infectious and inflammatory processes. Several types of fever are classified in children:

A. Acute (short-term) fever – lasts up to 7 days. It is most often associated with viral infections such as influenza, acute respiratory viral infections (ARVI), and rotavirus infection.

B. Prolonged fever – persists for more than 7 days and is typically associated with bacterial infections, including tonsillitis, otitis media, sinusitis, and pneumonia.

C. Dangerous (high-grade) fever – characterized by a significant rise in body temperature (40°C or higher), which may cause seizures and alarming symptoms, particularly in infants.

D. Recurrent fever – reappears after certain intervals and is typically observed in diseases with relapsing courses, such as malaria, brucellosis, and rheumatic fever [10].

Febrile syndrome in children is most commonly observed in the following diseases:

1. Viral infections (influenza, parainfluenza, adenovirus infection);
2. Bacterial infections (tonsillitis, pneumonia, sinusitis);
3. Highly contagious diseases (diphtheria, measles, rubella, scarlet fever);
4. Diseases accompanied by skin rashes (chickenpox, herpes);
5. Systemic inflammatory diseases (rheumatoid arthritis, systemic vasculitis);
6. Hematological diseases (leukemia, lymphoma);
7. Tumors and other severe pathological conditions.

Fever is an important part of the immune response in children and, in some cases, a rise in body temperature may be beneficial. However, high and prolonged fever always requires medical attention and treatment [3].

The most common diseases accompanied by febrile syndrome in children include:

- ✓ Upper respiratory tract infections (pharyngitis, tonsillitis, rhinitis);
- ✓ Influenza and other viral infections;
- ✓ Otitis media (ear infection);
- ✓ Bronchitis and pneumonia;
- ✓ Enteroviral infections;
- ✓ Childhood infectious diseases such as diphtheria, measles, and scarlet fever;
- ✓ Blood infections (sepsis);
- ✓ Infectious meningitis.

In these diseases, fever acts as a mechanism by which the body fights infection. However, if left untreated, these conditions can worsen and may lead to complications in the nervous system and other organs [6].

For example, a community-based study conducted in Turkey among children aged 6–7 years reported febrile syndrome in 4.8% of cases [9]. In India, Nepal, and other Asian countries, this indicator was found to range from 4.37% to 10% [5]. In Ethiopia, febrile syndrome was observed in up to 13.6% of children under the age of five [4].

During the COVID-19 pandemic in the Republic of Korea, particularly during the Omicron variant wave, febrile syndrome was reported in approximately 16.5% of hospitalized children [3]. These findings further emphasize the widespread prevalence and the urgent relevance of febrile syndrome in children.

**The aim of the study:** a modern analysis of diseases accompanied by febrile syndrome in children of primary school age.

## Materials and Methods

In this article, data from global and local sources were analyzed, including information obtained from the World Health Organization (WHO), PubMed, NCBI, and other international databases. In addition, the results of studies conducted in Turkey, India, Korea, Ethiopia, and other countries were reviewed and summarized [5].

The following methods were primarily used in the study:

Analytical method — data were collected based on scientific articles, meta-analyses, and research findings;

Comparative method — data from different countries were compared and analyzed;

Statistical methods — percentage analysis and trend analysis were performed using data from published studies;

Chronological analysis — changes in the prevalence of diseases over time were examined.

Additionally, clinical characteristics, treatment methods, and preventive measures related to febrile syndrome in children were thoroughly analyzed. Special attention was paid to the reliability and relevance of the sources used.

## Result and discussions

According to the study findings, diseases accompanied by febrile syndrome are widely prevalent among children globally. In particular:

- In Turkey, febrile syndrome was observed in 4.8% of children aged 6–7 years;
- In India and Nepal, this rate ranged from 4.37% to 10%;
- In Ethiopia, the prevalence reached up to 13.6%;
- In the Republic of Korea, during the COVID-19 pandemic, febrile syndrome was recorded in 16.5% of hospitalized children.

The study also analyzed the distribution of the disease by age and gender. Interestingly, febrile syndrome was found to be more common among boys than girls.

In most cases, the diseases associated with febrile syndrome included upper respiratory tract infections (pharyngitis, rhinitis, tonsillitis), influenza and other viral infections, bronchitis and pneumonia, and otitis media.

During the study, it was found that the average duration of febrile syndrome in children ranged from 2 to 5 days, while in severe cases, it lasted up to 7 days. Additionally, some children experienced recurrent febrile episodes.

The findings indicated that febrile syndrome was less frequently reported in countries with well-developed healthcare systems and high levels of medical literacy among the population, whereas it was significantly more common in economically disadvantaged countries.

Furthermore, modern methods and protocols used for diagnosing and treating febrile syndrome in children were analyzed, and their effectiveness was evaluated.

### Discussion:

Based on the above results, febrile syndrome has once again been confirmed as a serious health concern for children. Its prevalence is influenced by numerous factors, including geographical location, climate, population medical literacy, the development level of healthcare systems, and economic conditions.

These factors have also been highlighted in studies conducted by foreign researchers. For instance, in Turkey, the relatively low incidence of febrile syndrome has been attributed to high-quality healthcare services and increased medical literacy among the population [10]. In contrast, in Ethiopia, the underdeveloped healthcare infrastructure and poor sanitation and epidemiological conditions have contributed to the high prevalence of this condition [2].

Complications arising from diseases associated with febrile syndrome—particularly those affecting the central nervous system, chronic respiratory diseases, and weakened immunity—have been reported in many countries [9].

The discussion also emphasizes the sharp increase in febrile syndrome cases during the COVID-19 pandemic. This rise has been linked to increased pressure on healthcare services, reduced preventive measures, and elevated stress levels among the population during the pandemic [7,8].

To effectively manage and reduce febrile syndrome in children, the following measures should be prioritized at the national level:

- Modernizing healthcare services and improving access to medical care for the population;
- Implementing early diagnostic systems for infectious diseases in children;
- Strengthening public sanitation and hygiene programs;
- Conducting widespread health education campaigns to improve population medical literacy;
- Systematically carrying out preventive measures.

These actions are expected to significantly reduce the prevalence of febrile syndrome and related diseases among children.

### Conclusion

Based on the study findings and analyses, the following conclusions can be drawn:

- 1) Febrile syndrome is widespread among primary school-aged children, primarily developing against the background of viral and bacterial infections;
- 2) Geographical location, economic conditions, the level of healthcare services, and the medical literacy of the population significantly influence the prevalence of febrile syndrome;
- 3) Timely diagnosis and treatment of febrile syndrome in children are crucial for preventing disease progression and complications;
- 4) According to the study results, the widespread implementation of modern diagnostic and treatment protocols allows for the effective management of diseases associated with febrile syndrome.

Further improvement of healthcare systems, early detection of infectious diseases in children, and enhancement of public medical literacy are identified as key factors in reducing the prevalence of febrile syndrome.

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