

**CLASSIFICATION OF THE MOST COMMON DISEASES IN CHILDREN AT  
PRESENT**

**Nishonova Dilafruz Valijonovna**

Andijan State Medical Institute, Uzbekistan

**Annotation:** This article provides information on the most common diseases that are currently occurring in children. Hususan, diseases of the digestive system, syndromes and diseases resulting from biochemical changes are also reported.

**Key words:** Asperger syndrome, digestive system, blood, kidney, female, male.

---

Asperger syndrome, a neurobiological disorder characterized by autism-like abnormalities in social interactions but with normal intelligence and language acquisition. The disorder is named for Austrian physician Hans Asperger, who first described the symptoms in 1944 as belonging to a condition he called autistic psychopathy. Today, Asperger syndrome is considered an autism spectrum disorder, a category that includes autism (sometimes called classic autism) and mild autism-like conditions, in which affected persons exhibit some but not all symptoms of autism (previously recognized as pervasive developmental disorder not otherwise specified, or PDD-NOS).

Asperger syndrome is about three to four times more common in boys than in girls. Symptoms may be apparent after age three, though diagnosis is most frequent in children between ages five and nine. In contrast to patients with autism, individuals with Asperger syndrome usually do not have major cognitive difficulties—their IQ is in the normal or even high range—and they do not exhibit a delay in language acquisition. However, children with Asperger syndrome do display repetitive behaviour patterns similar to those observed in children with autism, and they often avoid eye contact, have poor control over fine motor movements, giving an impression of clumsiness, and have an obsessive interest in a single object, such as a computer or a type of car. This obsession generally manifests as a persistent desire to learn and to speak only about the object. Children with Asperger syndrome may become upset when instructed to focus on a task not related to their obsession and when their day-to-day routines are disrupted even in only minor ways, such as drinking from a cup that differs in colour or texture from the cup the child normally uses. Some individuals with Asperger syndrome also are affected by anxiety and depression in adolescence and adulthood. In many patients symptoms may go unrecognized for years. In the absence of a formal diagnosis, individuals affected by Asperger syndrome may be perceived as simply absentminded, socially and physically awkward, or highly intelligent.

The cause of Asperger syndrome is unclear; however, imaging studies have demonstrated the presence of structural and neuronal abnormalities in certain areas of the brain in Asperger patients. These abnormalities likely contribute to the unusual thinking patterns and behaviours associated with the disorder. Asperger syndrome is best treated through early intervention methods aimed at improving social skills, physical coordination, and communication. Many people affected by Asperger syndrome improve significantly with effective treatment programs. In addition, because people with Asperger syndrome may develop a high level of expertise in a

very specific area or about a single device, many are able to find jobs at which they can be successful.

group of neurobiological disorders that are characterized by deficits in social interaction and communication and by abnormalities in behaviours, interests, and activities.

In 1911 Swiss psychiatrist Eugen Bleuler coined the term autism (from the Greek autos, meaning “self”), using it to describe the withdrawal into the self that he observed in patients affected by schizophrenic disorders. However, in 1943 Austrian-born American psychiatrist Leo Kanner recognized autism as a disorder distinct from schizophrenia, giving autism its modern description. In the subsequent decades several autismlike disorders also were identified, resulting in the group of conditions known as autism spectrum disorders, or ASDs. The group of ASDs includes three distinct neurobiological disorders: autism (or classic autism), Asperger syndrome, and pervasive developmental disorder not otherwise specified (PDD-NOS). All three of these disorders are included under the broad classification of pervasive developmental disorders, a group of conditions characterized by early-childhood onset and impairment of language acquisition, communication, social behaviour, and motor function. Pervasive developmental disorder (PDD), any of a group of conditions characterized by early-childhood onset and by varying degrees of impairment of language acquisition, communication, social behaviour, and motor function. There are five types of PDDs. These include the three known autism spectrum disorders—autism, Asperger syndrome, and pervasive developmental disorder not otherwise specified (PDD-NOS)—as well as childhood disintegrative disorder (CDD) and Rett syndrome. Most PDDs are characterized by deficits in a child’s ability to interact socially and by one or more abnormalities of childhood development. For example, children with PDD-NOS typically suffer from an inability to interact with others and from abnormalities in either communication or behaviour patterns and interests. In addition, some PDDs such as Asperger syndrome have little or no adverse effect on intelligence, whereas other PDDs, such as Rett syndrome and autism, can result in severe intellectual disability. Symptoms of autism spectrum disorders and CDD usually first appear around age three. In contrast, symptoms of Rett syndrome can appear before age one. PDDs affect an estimated 30 in every 10,000 children. However, because the clinical definitions used to diagnose PDDs classified as autism spectrum disorders differ worldwide, the reported incidence of these specific disorders varies significantly. The most commonly occurring PDD is autism, which has been reported to affect as many as one in every 150 children in the United States. The least common PDDs are Rett syndrome and CDD, which appear to have a worldwide incidence of roughly one in 15,000 and one in 50,000–100,000 individuals, respectively. With the exception of Rett syndrome, which primarily affects females, PDDs occur more commonly in males than in females. There is no curative treatment for PDDs; however, early intervention may alleviate some of the social and behavioral symptoms associated with the disorders. Some examples of treatment approaches include speech therapy, behaviour modification therapy, and medications to reduce depression or anxiety.

**Pervasive developmental disorder not otherwise specified (PDD-NOS)**, a neurobiological disorder characterized by impairment in ability to interact with others and by abnormalities in either communication or behaviour patterns and interests. PDD-NOS is described as atypical autism, because individuals with the disorder exhibit some but not all of the same symptoms associated with autism (sometimes called classic autism). Likewise, “not otherwise specified” indicates that an individual’s symptoms are nonspecific, meaning that they differ from symptoms

characteristic of other pervasive developmental disorders, such as Rett syndrome and childhood disintegrative disorder.

PDD-NOS affects boys four times more often than girls. The overall prevalence of the disorder remains unclear, because of the varying clinical definitions used for diagnosis. Many children who have only several symptoms of an autismlike condition, which prevents a definitive diagnosis of autism, are often diagnosed instead with PDD-NOS. Symptoms associated with PDD-NOS appear after age three, and the pattern in which symptoms manifest and the behaviours displayed by affected children vary widely. Most children with the disorder appear to develop normally in the first several years of life and then experience an unusual delay in the development of social abilities. It is usually at this point in the child's development when other features of PDD-NOS become apparent. These features may include gaze avoidance, lack of expressive facial responses, irregularities in speech, repetitive and obsessive behaviours, and delayed development of motor skills. The incidence of severe intellectual disability in PDD-NOS patients is low relative to other pervasive developmental disorders.

Although the precise cause of PDD-NOS is unknown, abnormalities in certain structures and in neuronal signaling pathways in the brain have been implicated. Researchers also suspect underlying genetic defects may be involved. Treatment for PDD-NOS consists primarily of behavioral therapy, though some children may require the administration of medications to stabilize mood or behaviour.

**Childhood disintegrative disorder (CDD)**, a rare neurobiological disorder characterized by the deterioration of language and social skills and by the loss of intellectual functioning following normal development throughout at least the initial two years of life. The disorder was first described in 1908 by Austrian educator Thomas Heller. However, because the disorder is rare, occurring in one in every 50,000–100,000 individuals, it was not officially recognized as a developmental disorder until the 1990s. Today, CDD is classified as a pervasive developmental disorder, a group that also contains the autism spectrum disorders and Rett syndrome. Similar to autism spectrum disorders, CDD affects boys more frequently than girls.

Children affected by CDD progress normally in their development at least until age two, acquiring communication, social, and intellectual abilities typical for their age. Symptoms of the disorder often appear between ages three and four, although in some cases symptoms may not be present until age nine or 10. Onset generally occurs over a period of several months to a year. The disorder becomes evident when a child loses the skills that he acquired previously, though this may manifest initially in the form of anxiety or increased, unexplained irritability. Children with CDD regress in motor function and intelligence, and many affected individuals develop symptoms similar to those of autism, including repetitive behaviour patterns, inability to interact with others, and delayed development of speech. In addition, children affected by CDD often lose control over bladder and bowel function and experience seizures.

The cause of CDD is not known. However, it is suspected that an abnormality in a gene or genes involved in the development of the central nervous system contribute to the disorder. Although CDD has been associated with other disorders, such as abnormalities in lipid storage and in immune response, none of these conditions appear to be an underlying cause of CDD. The prognosis of children with CDD is poor, since many individuals experience severe and

permanent intellectual disability. Treatment consists of various types of therapies aimed at stabilizing or improving behaviour, communication, and language skills.

**References:**

1. Maksimovna, M. M., Daliyevich, A. Y., Zuxritdinovna, M. M., Mamadjanovna, B. A., & Nozimjon O'g'li, S. S. (2021). Allergy to the Production Dust at Workers of Integrated Cotton Mill. *JournalNX*, 7(07), 52-54.
2. Nozimjon o'g'li, S. S. (2022). INFORMATION ABOUT THE STRUCTURE OF THE MEMBRANE OF EPITHELIAL TISSUE AND GLANDS. *British Journal of Global Ecology and Sustainable Development*, 10, 65-69.'
3. Maxmudovich, A. X., Raximberdiyevich, R. R., & Nozimjon o'g'li, S. S. (2021). Oshqozon Ichak Traktidagi Immunitet Tizimi. *TALIM VA RIVOJLANISH TAHLILI ONLAYN ILMIY JURNALI*, 1(5), 83-92.
4. Shoxabbos, S., & Mahramovich, K. S. M. K. S. (2023). CAUSES OF THE ORIGIN OF CARDIOVASCULAR DISEASES AND THEIR PROTECTION. *IQRO JURNALI*, 1-6.
5. CHULIEVA, V. E. (2021). THE PRINCIPLES OF COMMONALITY AND SPECIFICITY IN THE PHILOSOPHICAL TEACHINGS OF BAHA UD-DIN WALAD AND JALAL AD-DIN RUMI. *THEORETICAL & APPLIED SCIENCE Учредители: Теоретическая и прикладная наука*, (9), 566-573.
6. Mavlonovna, R. D. Factors That Increase the Activity of Women and Girls in Socio-political Processes at a New Stage of Development of Uzbekistan. *JournalNX*, 7(07), 61-66.
7. Mavlonovna, R. D. Participation of Uzbek Women in Socio-economical and Spiritual Life of the Country (on the Examples of Bukhara and Navoi Regions). *International Journal on Integrated Education*, 4(6), 16-21.
8. Mavlonovna, R. D., & Akbarovna, M. V. (2021, July). PROVISION OF FAMILY STABILITY AS A PRIORITY OF STATE POLICY. In *Archive of Conferences* (pp. 34-39).
9. Khairullayevich, S. H. Development of gymnastics in Uzbekistan and attention to gymnastics. *International scientific-educational electronic magazine" OBRAZOVANIE I NAUKA*, 21.
10. Sayfiyev, H., & Saidova, M. (2023). EFFECTS OF GYMNASTICS ON FUNDAMENTAL MOTOR SKILLS (FMS), POSTURAL (BALANCE) CONTROL, AND SELF-PERCEPTION DURING GYMNASTICS TRAINING. *Modern Science and Research*, 2(9), 204-210.
11. Saidova, M., & Sayfiyev, H. (2023). CONTENT-IMPORTANCE AND PRINCIPLES OF PHYSICAL EDUCATION CLASSES. *Modern Science and Research*, 2(9), 192-199.
12. Ayubovna, S. M., & Komiljonova, K. I. (2022). Features of Application of Sports Games in Preschool Children. *International Journal of Culture and Modernity*, 16, 17-23.
13. Saidova, M. (2023). THE CONCEPT OF PHYSICAL QUALITIES. *Modern Science and Research*, 2(10), 251-254.