

TREATMENT OF CHRONIC HEPATITIS IN CHILDREN AND ITS TYPES

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Abstract. *Viral hepatitis in children is a group of infectious diseases that affect the liver and cause various dysfunctions of this organ. Microorganisms that cause this type of pathology are very stable in the external environment, tolerate negative temperatures well, are difficult to disinfect and can live for 3-6 months. Pediatric gastroenterologists evaluate the symptoms, diagnose and treat hepatitis in children with the participation of infectious disease specialists, pediatricians and other specialists.*

Keywords: *types of hepatitis in children, causes of hepatitis in children, symptoms of viral hepatitis in children.*

Viral childhood hepatitis occupies a special place in modern gastroenterology, because this group of diseases is full of serious complications for the body and the transition of an acute disease to a chronic stage (hepatitis A never becomes chronic). The most dangerous for children is hepatitis B, which currently has no specific treatment and can cause serious complications in a short time. Types of hepatitis in children

Modern classification includes the identification of five main forms of the disease in children: hepatitis A, B, C, D and E. Some of them are enteral, that is, they enter the body through the digestive tract, others are parenteral, that is, they enter the blood and transmitted through other biological fluids.

Hepatitis A or Botkin's disease (also called "dirty hands" disease) is the most common type of enteral pathology that leaves long-term immunity. It is characterized by acute damage to the liver and gastrointestinal tract, passes quickly enough and in most cases without any consequences. Hepatitis B. It is often called serum, because it is transmitted only through biological fluids, for example, blood, sperm. It is characterized by a severe course with high fever, pain, significant enlargement of the liver and spleen. It can be chronic. It is fraught with life-threatening complications such as liver coma and cirrhosis. Hepatitis C. The most unpredictable variant of parenteral pathology, because the viruses that cause the disease are prone to constant mutation, which significantly increases their survival and activity. The main danger of this form of the disease is a long asymptomatic course. After hepatitis C, stable immunity does not develop and you can get sick again. Hepatitis D. It often occurs in the form of co-infection, that is, it is observed simultaneously with another form of hepatitis, most often variant B. It is dangerous for the development of parenteral, superinfection and liver cirrhosis. Hepatitis E. It belongs to the enteral group of pathologies. This is rarely found in developed countries.

According to the nature of the course, experts also distinguish acute (up to 3 months), subacute (up to 6 months) and chronic (more than six months) forms of pathology. There are three main ways to get an intestinal infection (A and E):

when the virus falls on the skin of the hands and from there to the esophagus from contact household, toys, household items and other contaminated surfaces;

water, when a child drinks poor-quality water or swallows contaminated liquid while swimming in water bodies;

food, when an infectious agent enters the body with contaminated food during the production process at the enterprise.

Parenteral forms of hepatitis (B, C and D) can be transmitted:

in direct contact with wounds and scratched skin with blood and other biological fluids of the carrier or the patient;

during various medical procedures involving blood transfusion, use of dangerous injection methods of diagnosis or treatment performed with non-sterile or reusable instruments;

during childbirth;

when using patient items that may contain elements of contaminated biological fluid (nail clippers, towels, razors, toothbrushes, etc.).

In adolescence, the cause of hepatitis infection in a child can be unprotected sex. Sometimes the disease is the result of self-expression, for example, a piercing in a non-sterile environment, a tattoo.

Symptoms of viral hepatitis in children

Acute forms of the disease develop in certain stages, each of them has its own characteristics. Incubation period. It lasts from 7 days to 24 weeks. At this time, there are usually no symptoms. Prodromal (pre-icteric) stage. It lasts at least 3-5 days; in some forms of the disease it may be absent. At this stage of hepatitis in children, the first symptoms appear in the form of general malaise, increased body temperature, nausea, decreased appetite and other symptoms. Jaundice stage. This happens 3-10 days after the development of the pathology and lasts for 1-2 weeks. It is characterized by darkening of the urine, yellowing of the skin, enlargement of the sclera of the eyes, liver and sometimes the spleen. In most cases, the general well-being of the sick child improves at this stage. Recovery phase. It is characterized by a gradual return to the normal color of the skin and whites of the eyes, improved appetite and increased vitality. This stage lasts from 3 weeks to 6 months, depending on the form of the disease. In general, common symptoms of viral hepatitis in children:

increased body temperature;

general weakness, weakness;

loss of appetite and, as a result, loss of body weight;

jaundice;

various skin rashes;

pain in the right hypochondrium;

aching joints;

headache;

change the color of urine to dark;

stool lighting;

itching of the skin;

nausea, vomiting, dyspeptic symptoms.

A sign of hepatitis is also an increase in the size of the liver, which can be detected during palpation and ultrasound examination. Parents should be concerned and show their child to the doctor about fatigue, decreased ability to work, complaints of weakness for a week or more, refusal

to eat and weight loss. Such signs may indicate a hidden type of hepatitis or the transition of the acute form to the chronic stage.

Diagnostics

The main importance in diagnosing viral hepatitis in children is a visual examination, during which the gastroenterologist palpates the liver, determines its size and condition, collects anamnesis data and listens to the complaints of the young patient or his representatives. Auxiliary inspection methods include:

Ultrasound examination of abdominal organs;
general blood and urine tests;
serological tests (ELISA and PCR);
biochemical blood test with analysis of bilirubin level.

In some cases, if there is a suspicion of damage to the esophagus, stomach or other parts of the gastrointestinal tract, fibro gastroduodenoscopy is also indicated. Sometimes liver elastometry is additionally performed to assess the degree of liver tissue damage (fibrosis).

Treatment of viral hepatitis in children

Treatment tactics depend on the form of the disease (acute, subacute or chronic) and the type of the disease. For uncomplicated acute hepatitis, the following is indicated:

bed rest;
strict diet without fried, fatty, smoked, sweet foods, carbonated and tonic drinks;
Drink plenty of water - at least 1.5 liters of clean water per day.

Drug support includes taking detoxification measures, sorbents, hepatoprotectors, antihistamines and anti-inflammatory drugs. In some cases, hormonal and antioxidant agents are also prescribed. For severe forms of parenteral viral hepatitis in children, antiviral treatment using loading doses of interferons is indicated. In such cases, as a rule, the child is admitted to a specialized hospital.

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