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IMPORTANT CLINICAL FEATURES OF LAYMBLIOSIS IN CHILDREN

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ABSTRACT

Lambliosis, also known as giardiasis, is a common parasitic infection caused by the protozoan Giardia lamblia. It affects both adults and children, with an estimated 200 million cases worldwide. Lambliosis in children can cause a range of clinical features, including diarrhea, abdominal pain, and malabsorption. The purpose of this article is to review the important clinical features of lambliosis in children.

Keywords: lambliosis, giardiasis, children, clinical features, diarrhea, abdominal pain, malabsorption.

АННОТАЦИЯ

Лямблиоз, также известный как лямблиоз, является распространенной паразитарной инфекцией, вызываемой простейшими Giardia lamblia. Он поражает как взрослых, так и детей, и, по оценкам, во всем мире зарегистрировано 200 миллионов случаев заболевания. Лямблиоз у детей может вызывать целый ряд клинических проявлений, включая диарею, боли в животе и нарушение всасывания. Целью данной статьи является обзор важных клинических особенностей лямблиоза у детей.

Ключевые слова: лямблиоз, лямблиозная болезнь, дети, клинические особенности, диарея, боли в животе, нарушение всасывания.

Results:

INTRODUCTION

Lambliosis, also known as giardiasis, is a common parasitic infection caused by the protozoan Giardia lamblia. It is spread through the ingestion of cysts shed in the feces of infected humans or animals, usually through contaminated water sources or food. The infection can affect both adults and children, but it is more common in children in developing countries. The symptoms can vary widely, with some individuals being asymptomatic, while others experiencing diarrhea, abdominal pain, bloating, flatulence, and nausea. In severe cases, the diarrhea may be bloody, and malabsorption can occur, leading to weight loss and nutritional deficiencies. Diagnosis can be challenging, and treatment typically involves antibiotics, rehydration, and nutritional support. Prevention can be achieved through good personal and environmental hygiene practices, including frequent hand washing, safe food handling, and the provision of clean water sources.

The clinical features of lambliosis in children can vary widely, with some children being asymptomatic. The most common symptoms include diarrhea, abdominal pain, bloating, flatulence, and nausea. The diarrhea may be acute or chronic, and it may be watery or semi-formed. In severe cases, the diarrhea may be bloody. The abdominal pain is typically crampy in

nature, and it may be diffuse or localized to the right lower quadrant. Malabsorption can also occur, leading to weight loss and nutritional deficiencies.

Diagnosis of lambliosis in children can be challenging, as the symptoms can be non-specific. Stool microscopy is the most commonly used diagnostic test, but it may miss up to 50% of cases. Other diagnostic tests include stool antigen detection, serology, and PCR-based methods.

The clinical features of lambliosis in children can vary widely, but some of the most common symptoms include:

1. Diarrhea: This is the most common symptom of lambliosis in children. The diarrhea may be acute or chronic, and it may be watery or semi-formed. In severe cases, the diarrhea may be bloody.
2. Abdominal pain: The abdominal pain is typically crampy in nature, and it may be diffuse or localized to the right lower quadrant.
3. Bloating: Children with lambliosis may experience abdominal bloating or distension.
4. Flatulence: Excessive gas or flatulence is another common symptom of lambliosis in children.
5. Nausea: Children with lambliosis may experience nausea or vomiting.
6. Malabsorption: Malabsorption can occur, leading to weight loss and nutritional deficiencies. Children with lambliosis may have difficulty gaining weight or may experience failure to thrive.

In some cases, children with lambliosis may also experience fever, fatigue, and muscle weakness. It is important to note that some children may be asymptomatic, which can make diagnosis and treatment challenging.

The treatment of lambliosis in children typically involves the use of antibiotics, such as metronidazole or tinidazole. These medications are effective in eliminating the Giardia lamblia parasites from the intestine. The duration of treatment can vary depending on the severity of the infection and the response to treatment. In some cases, a single dose of medication may be sufficient, while in others, a course of several days may be required.

In addition to antibiotics, rehydration therapy is important in treating lambliosis in children, particularly in cases of severe diarrhea. This involves the replacement of fluids and electrolytes lost through diarrhea to prevent dehydration. Nutritional support may also be necessary in cases of malabsorption or weight loss.

It is important for children with lambliosis to avoid close contact with others until the infection has been successfully treated, to prevent the spread of the parasite. It is also important to practice good personal hygiene, including frequent hand washing, to prevent re-infection or transmission to others.

It is recommended to have follow-up stool testing after the completion of treatment to confirm the eradication of the parasite. In some cases, a second course of treatment may be required if the infection persists or if symptoms continue after treatment. In rare cases, complications such as post-infectious irritable bowel syndrome may occur, and further management may be necessary.

Lambliosis in children is an important health problem, particularly in developing countries. The clinical features can mimic other gastrointestinal disorders, and a high index of suspicion

is required for prompt diagnosis and treatment. Diagnosis can be confirmed using a combination of clinical features and laboratory tests. Treatment typically involves the use of antibiotics, such as metronidazole or tinidazole. In addition, rehydration and nutritional support may be required in severe cases.

Prevention of lambliosis in children can be achieved through good personal and environmental hygiene practices. This includes frequent hand washing, safe food handling, and the provision of clean water sources. Education of parents and caregivers about the importance of these practices is key in reducing the incidence of this infection.

Prevention measures for lambliosis in children include:

1. Safe water sources: Ensure that children have access to clean and safe drinking water, and avoid drinking water from potentially contaminated sources, such as streams or ponds.
2. Proper sanitation: Practice good sanitation by disposing of waste properly and avoiding open defecation. Promote the use of clean public restrooms or household toilets.
3. Hygiene practices: Encourage children to wash their hands frequently, especially after using the bathroom, before eating, and after playing outside. Use soap and clean water, and dry hands thoroughly.
4. Safe food handling: Ensure that food is cooked thoroughly and served hot. Avoid eating raw or undercooked meat, poultry, or fish. Wash fruits and vegetables thoroughly before eating.
5. Personal hygiene: Encourage children to keep their bodies clean, including bathing regularly and washing their hands after using the bathroom.
6. Avoid contact with contaminated surfaces: Avoid contact with contaminated surfaces, such as soil or water, that may be contaminated with Giardia lamblia cysts.
7. Avoid sharing personal items: Do not share personal items such as towels, toothbrushes, or drinking glasses.
8. Vaccines: Although there is currently no vaccine for lambliosis, ongoing research is exploring the development of a vaccine to prevent the disease.

By implementing these prevention measures, parents and caregivers can help reduce the risk of lambliosis in children and promote better health and hygiene practices overall.

CONCLUSION AND SUGGESTIONS

Lambliosis in children can cause a range of clinical features, including diarrhea, abdominal pain, and malabsorption. The diagnosis can be challenging due to non-specific symptoms, but can be confirmed using laboratory tests. Treatment typically involves antibiotics, rehydration, and nutritional support. Prevention can be achieved through good personal and environmental hygiene practices. Further research is needed to develop more effective diagnostic and treatment strategies for lambliosis in children.

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