



## SYPHILIS (DISEASE), ITS SYMPTOMS AND PRIMARY CONSEQUENCES

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**Annotation.** In this article, syphilis is a wound disease and its primary symptoms. Also, this article describes the types, stages and consequences of wound disease.

**Key words:** syphilis, lymphadent, pneumonia, chancre, popula, serological, reaction

Dermatology is the science of skin diseases, the structure and function of healthy and pathologically changed skin, the interaction of skin and internal organs in various pathological conditions, the causes of the origin and development process of various dermatoses, the methods of identifying skin diseases, treatment and learns preventive measures. Venereology - studies the clinical course, epidemiology of venereal diseases, their detection and prevention measures. **Skin and genital diseases. Adham Vaisov. Tashkent. "Generation of the new century". 2009. 13.**

Wound disease is also one of the dermatological diseases. The wound disease called syphilis is an infectious venereal disease, the cause of which is a leaky treponema (spirochete) infection. This microorganism is called leaching because it is poorly stained with aniline dye. The disease is sexually transmitted through the skin and mucous membranes. It can also be transmitted through direct contact and various types of household items. Syphilis is the most dangerous infectious disease. It can be transmitted very easily, there are several ways of transmission. According to medical statistics, the wound is transmitted in 95% of cases through sexual intercourse and in 5% of cases through daily contact or contaminated blood. In addition, it can be transmitted through the placenta from mother to child and as a result of blood transfusion. Wound disease is transmitted only through infected blood in the first stage. **Origin of diseases. Scientist Majidov. Tashkent. "Perfect Generation". 2003. 44.** Transmission of the infection through sexual contact is observed when an infected person uses something immediately after it is used by another healthy person, because the infection

does not live outside the human body for a long time and dies quickly. Syphilis is difficult to diagnose because of its hidden form. Absence of symptoms causes a delay in seeking medical attention, which endangers the health of others and increases the number of victims. Diagnosis of the wound is carried out in a complex way. Of course, it is possible to pass a quick test for the presence of a lesion, the positive results of this test prompt to conduct in-depth analyzes and do not indicate the presence of the disease. In general, the diagnosis of syphilis should be made by a laboratory, a doctor, and based on the patient's complaint. In the initial period of the disease, serological reactions may show a negative result, because the antibodies in the blood have not yet reached the required amount. By the end of the fourth week, the reaction is always positive. A sore or hard chancre will disappear on its own in 3-12 weeks, a small scar may remain.

The diagnosis of the wound is made on the basis of examination of hard chancre separations. In general, tests for syphilis are given in a regular polyclinic. In any case, the doctor will order a blood test for the Wasserman reaction (RV blood) and if a positive response is obtained, he will be referred to a venereal disease dispensary. Only there (as well as in private clinics) a comprehensive diagnosis of the wound is carried out, because there are cases of "wrong" diagnosis.

Acute and chronic diseases of the joint may appear in the II and III stages of syphilis, that is, the wound. Most symmetrical joints, joint ends of bones are damaged. Knee joints are often injured. The functions of the joints are disturbed. Night pain is observed in patients, when palpated, it is felt that they are painful. In the disease, typical roseola rashes often appear on the skin. In some patients, a lot of pain-free fluid accumulates in the joints, the skin above them does not redden, and the synovial membranes bulge on the sides. In other patients, fluid does not accumulate in the joints, but the synovial membrane thickens from the villi layers, and the shape of the joint changes. It can be easily determined by palpation. But there are also types in which the joints change less than the surface. Muscle atrophy usually does not occur in inflammatory arthritis. **Internal diseases. Y. Arslonov, A. Nazarov, A. Bobomurodov. Tashkent. "Ilm-Ziya", 2013. 73.**

Osteoporosis is rare. X-rays do not find any changes in synovial types of inflammatory arthritis. Laboratory analysis. Positive reaction of Wasserman has diagnostic value. However, it is positive in 60-70% of patients. The erythrocyte sedimentation reaction is accelerated. Left-shifted average leukocytosis and monocytosis are noted. Wound arthritis is treated with anti-inflammatory agents. In conclusion, we can say that injury and its prevention is in the hands of each person. After all, health is solid wealth.

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