CLASSIFICATION, CLINICAL PICTURE AND DIAGNOSIS OF VITILIGO

Achilova Donokhon Nutfillaevna
DSc., Associate Professor
Shukurov Bakhtiyor Kodirovich
Bukhara State Medical Institute
https://doi.org/10.5281/zenodo.10417101

Abstract: This article provides a brief overview of the epidemiology and social significance of vitiligo in adolescents, the main symptoms of the disease, pathogenesis, clinical signs of the disease and treatment methods.

Key words: patients with adolescent vitiligo, choreoretinitis, leukoderma, dysbacteriosis, malabsorption syndrome.

Vitiligo is a type of skin disease characterized by loss of naturally occurring pigmentation in the dermis due to the breakdown of melanin. As a result of this process, some areas of the skin lose color, which is manifested by the formation of white spots. The disease has been known for a long time; people often call it "PE". In medical practice, along with the name "vitiligo," you can find the name of this disease as leukoderma. Translated from Latin, the word means "white skin".

As for statistics, according to some data, about 1% of the world's population suffers from vitiligo. The disease is not population specific, but the spots are more noticeable in black people. In most cases, the disease manifests itself between the ages of 10 and 30 years; this period accounts for 50% of all cases of pathology.

The main symptom of the disease is the appearance on the skin of white and clearly defined spots that resemble a milky color. Pes often affects areas of the body such as the face (the area around the mouth, ears, eyes, nose), arms and legs (their back, fingertips, elbows, paws, knees), chow area, and anal area. White patches can also appear on hairy areas of the scalp, including the beard and mustache area in men.

A person is not born with leprosy; this skin pathology begins to form under the influence of a number of external and internal factors. It is noteworthy that the disease very rarely manifests itself at a young age, that is, before the age of 10 years. A connection has been established between increased solar activity in summer and spring and the early manifestation of vitiligo.

Among the reasons contributing to the development of the disease are:

Autoimmune disorders in the body. In this case, the functioning of the immune system and the functioning of the antibodies produced to destroy foreign agents are disrupted, and they begin to attack the body's own healthy tissues. Such conclusions about the relationship between vitiligo and autoimmune processes are based on the fact that the vast majority of people suffering from skin diseases often also have rheumatoid arthritis, thyroid diseases, systemic lupus erythematosus, etc.

The connection between vitiligo and heredity has been confirmed experimentally. Scientist working at the University of Colorado, b. Spitz established the presence of a hereditary (genetic) predisposition to the development of this skin pathology. In addition, it



higher than in those with gray and blue eyes.

has been scientifically proven that the risk of developing the disease in brown-eyed people is

Endocrine glands. The cause of the disease can be serious disturbances in the activity of the endocrine glands, as well as changes in hormone levels. These causes are combined into the neuroendocrine group. In addition, diseases of the pancreas, ovaries, pituitary gland and adrenal glands can also affect the development of the disease.

Skin nutritional disorders. This could be caused by various injuries (burns, including sunburn, scars and microtrauma). Taking certain medications can also trigger the onset of a pathological process. Liver diseases that cause suppression of bile and changes in the parenchyma of the organ.

Diseases of the gastrointestinal tract. Diseases such as dysbiosis, malabsorption syndrome. Violation of the absorption process of enzymes leads to the fact that the skin lacks the necessary nutrients (zinc, copper, manganese, magnesium) for the normal formation of melanin.

The effects of various chemicals on the skin. These may be low-quality cosmetics, phenol and reagents containing it, formaldehyde, etc. Most doctors unreasonably believe that vitiligo is the strongest signal indicating general problems of the body. Indeed, in most cases, the disease begins to develop after viral infections, intoxications, or physical injuries, especially to the head.

It is customary to distinguish several stages of the disease. Among them:

Progressive stage of the disease. This stage is indicated if within three months there is a significant increase in the size of the spot, the growth of old depigmented areas begins, or the formation of new spots is observed. Vitiligo may develop gradually over several months, with new lesions appearing near the first center. Slow development is the natural progression of the disease. However, there is also a type of vitiligo that develops at lightning speed. In this case, the increase in the number of spots on the patient's body occurs within a few weeks.

The initial stage is characterized by the formation of one point on the skin. Depending on the nature of the disease, this stage then progresses to a progressive, stable or repigmentation stage.

The stationary stage is characterized by the presence of one spot on the patient's skin, which is in a stable condition. This spot does not increase in size for a long time, and new spots do not appear.

Repigmentation stage. Most often, this stage is observed with the spontaneous formation of a spot caused by therapeutic measures, for example, taking certain medications. Unfortunately, independent and complete repigmentation in this form of skin disease is considered a rather rare condition.

The disease is not considered to pose a direct threat to human life or health. However, vitiligo itself is often the result of problems in the body that cannot be ignored.

Therefore, if, along with vitiligo, the patient is bothered by any other symptoms, he should be informed about this at his doctor's appointment. In addition, patients often need psychological help, since such a noticeable cosmetic defect causes psychological trauma, depression, dissatisfaction with appearance, etc.

The issue of transmission of the disease to offspring has been repeatedly studied by various scientists. However, until now it has not been clear, most studies show that there is a



UIF = 8.2 | SJIF = 5.94

certain combination of genes responsible for the manifestation of vitiligo in members of the same family. Therefore, the risk of inheriting PES ranges from 15 to 40 percent.

But it is important to know that spots do not necessarily form, but only under the influence of risk factors. For this reason, a child of parents with vitiligo can live his entire life without experiencing symptoms of this disease. However, children with a strong family history are at risk.

Scientists have studied some of the most common haplotypes in patients with vitiligo. But the number of their encounters is constantly changing and depends on the population being studied. Therefore, more attention should be paid to factors contributing to depigmentation.

Naturally, mothers exposed to vitiligo fear passing on the skin pathology to their child. In this case, it is important not to confuse one thing: the born child will not have the disease itself (that is, he will not have birthmarks), but a predisposition to its development. Therefore, if a mother or other family member has vitiligo, their children should be exposed to trigger factors as little as possible. These include psychological and physical injuries, ultraviolet rays, burns, etc.

If the disease affects a woman during pregnancy, it does not affect the development of her fetus and is not dangerous. However, hormonal changes occur during pregnancy that can cause the disease to spread more quickly.

Symptoms of vitiligo in newborns are rarely detected. For this reason, if white spots are found on the baby's skin, then psoriasis, white or colored fever, as well as allergies can be suspected. But unlike vitiligo, in this case there is also peeling of the skin.

The answer to this question is unequivocal - no, it is not transmitted. This disease is not an infection, and the exposed person does not pose a risk to others in terms of transmitting the disease. Therefore, you can communicate with people with such spots on the skin without fear.

If one or more white spots appear on the skin, you should consult a dermatologist. He examines the skin using a special lamp and determines the nature of depigmentation. If necessary, material is taken to clarify the diagnosis. These methods are important because it is necessary to distinguish vitiligo from other skin diseases.

References:

- 1. Sharipova G. I. The use of flavonoid based medications in the treatment of inflammatory diseases in oral mucus //Asian journal of Pharmaceutical and biological research. India. -2022. – T. 11. – №. 1. – C. 2231-2218. (Impact factor: 4.465)
- 3. Sharipova G. I.Changes in the content of trace elements in the saliva of patients in the treatment of patients with traumatic stomatitis with flavonoid-based drugs // Journal of research in health science. Iran. – 2022. – T. 6. – № 1-2. – C. 23-26. (Scopus)
- 4. Sharipova G. I., Nuraliyev N. A. General description and research methods used in children with traumatic stomatitis // European Journal of Research. Austria. – 2022.– T. 7. – № 1. – C. 51-56. (Impact factor: 4.981)
- 5. Sharipova G. I. Paediatric Lazer Dentistry //International Journal of Culture and Modernity. Spain. - 2022. - T. 12. - C. 33-37.



IBMSCR | Volume 3, Issue 12, December

INTERNATIONAL BULLETIN OF MEDICAL SCIENCES AND CLINICAL RESEARCH UIF = 8.2 | SJIF = 5.94

IBMSCR ISSN: 2750-3399

- 6. Sharipova G. I. The effectiveness of the use of magnetic-infrared-laser therapy in traumatic injuries of oral tissues in preschool children //Journal of Academic Leadership. India. - 2022. - T. 21. - №. 1.
- 7. Sharipova G. I. Discussion of results of personal studies in the use of mil therapy in the treatment of trauma to the oral mucosa //European journal of molecular medicine. Germany. - 2022. - T. 2. - №. 2. - C. 17-21.
- 8. Sharipova G. I. Peculiarities of the morphological structure of the oral mucosa in young children // International journal of conference series on education and social sciences. (Online) May. Turkey. - 2022. - C. 36-37.
- 9. Sharipova G. I. Dynamics of cytological changes in the state of periodontal tissue under the influence of dental treatment prophylactic complex in young children with traumatic stomatitis // Multidiscipline Proceedings of digital fashion conference April. Korea. - 2022. -C. 103-105.
- 10. Sharipova G.I. Assessment of comprehensive dental treatment and prevention of dental diseases in children with traumatic stomatitis // National research in Uzbekistan: periodical conferences: Part 18. Tashkent. -2021. - S. 14-15.
- 11. Sharipova G.I. Effectiveness of applying magnetic-infrared-laser therapy in the complex treatment of soft tissue injuries of the oral cavity in preschool children // Methodological recommendation. Bukhara. - 2022. - 21 p
- 12.Karshiyeva D.R., The Importance of Water Quality and Quantity in Strengthening the Health and Living Conditions of the Population//CENTRAL ASIAN JOURNAL OF MEDICAL AND NATURAL SCIENCES. Voleme: 02 Issue: 05I Oct 28 2021 Page 399-402
- 13. Karshiyeva D.R., The Role Of Human Healthy And Safe Lifestyle In The Period
- Of Global Pandemic-Covid 19//The American Journal of Applied Sciences. Voleme: 02 Issue: 11-15I November 28, 2020 ISSN: 2689-0992. Page 78-81
- 14.Karshieva Dilovar Rustamovna. THE EFFECT OF TOBACCO SMOKING ON THE ORGANS AND TISSUES OF THE ORAL CAVITY / / World Bulletin of Public Health (WBPH) Volume-19, February 2023 ISSN: 2749-3644

