VOLUME-1, ISSUE-5

PARASITIC ALLERGY

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Abstract: Parasitic diseases often found among people of all countries and occupied according to World Health Organization the third – the fourth place. The immune response includes sensitization of parasite's antigens and immunosuppression. Additionally parasitic antigens participate in formation of pseudo-allergic and toxic reactions. Features of allergy in parasitic infections are torpid course, a tendency to recurrent course, resistance to anti-allergic therapy, especially to glucocorticoids. Proper diagnosis and efficient therapy of parasitic infections often leads to the elimination of allergic symptoms.

Keywords: allergy, helminths, immunosuppression, rrticaria, parasitic allergy treatment, parasitosises.

Parasitic diseases are widespread among the population of all countries. Currently, the proven fact of sensitization to parasite antigens with subsequent clinical manifestations of parasitic allergy is of great importance. Clinical and laboratory diagnosis of parasitosis in allergic symptoms is, as a rule, not carried out; therefore, patients do not receive timely etiotropic treatment and the disease acquires a chronic relapsing course [2].

The leading factors leading to sensitization of the population to pathogens of parasitic diseases are parasitic pollution of the external environment (water, soil, food), contact with domestic animals, parasite carriage, excessive technogenic load on the immune system with aggressive pollutants, hereditary atopy, chronic gastrointestinal pathology tract with changes in intestinal microflora, often as a consequence of parasitic invasion.

The most common manifestation of allergy is urticaria, which is a polyetiological disease, the pathogenesis of which can be based on both truly allergic mechanisms and pseudo-allergic ones not associated with immune processes. The clinical symptoms of acute urticaria due to parasitosis can appear either episodically in the life of a child or adult, or have a chronic, continuously relapsing course. Urticaria more often occurs in patients against the background of a pre-existing allergic disease, for example, with sensitization to food, dust, epidermal allergens, plant pollen and medicinal substances [1].

The torpid course of chronic urticaria in children, adolescence and adults is often due to undiagnosed parasitic infestation. Parasitic infestations contribute to the chronicization of urticaria of any other etiology with the subsequent development of parasitic disease - painful symptoms as a result of the vital activity of parasites in the human (host) body.

In the pathogenesis of allergization of the body during parasitic pathology, two classical mechanisms are distinguished: sensitization by parasitic antigens and immunosuppression. The latter helps to reduce the body's nonspecific resistance and leads to frequent colds and other infections of any etiology and a decrease in the effectiveness of vaccination [2]. Not only parasite antigens, but also their metabolic products have sensitizing properties [3].

Literature:

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