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BREAST MILK AND ITS IMPORTANCE FOR CHILD HEALTH

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Abstract: Feeding in early childhood, breast milk and its importance for the health of the child and mother in many newborns, harmful conditions of mother's milk are also increasing. It mainly depends on organic substances such as galactose and lactose, which are part of carbohydrates. As a result, the child develops a disease such as Galactosemia. In order to prevent this, the child should not be given carbohydrate foods until he is one or two years old. But the child needs the nutrients necessary for the child's body contained in mother's milk. It can be seen that in both cases it is better to prevent such situations that are harmful to the child earlier.

Keywords: Galactosomerism, prophylaxis, lactose, galactose, carbohydrate, asymptomatic, epimerase, uridyltransferase hypoglycemia.

Annotasiya: Hozirgi kunda ko'plab yangi tug'ilgan chaqaloqlarda, ona sutining zararli holatllari ham ko'payib bormoqda. Bunda asosan uglevodlar tarkibiga kiruvchi galaktoza va laktoza kabi organik moddalarga bog'liq. Buning natijasida bolada Galaktozemiya kabi kasallik kelib chiqadi. Buning oldini olish uchun esa bolaga uglevod tarkibli ovqatlar bir yoki ikki yoshigacha berilmaydi. Lekin bola uchun ona suti tarkibidagi bola organizmi uchun zarur bo'lgan oziqa mahsulotlari kerak bo'ladi. Bundan ko'rinib turibdiki, har ikki holatda ham bola uchun zararli bunday holatlarni ertaroq oldini olgan afzal hisoblanadi.

Kalit so'zlar: Galaktozomeriya, profi laktika, laktoza, galaktoza, uglevod, asemptomatik, epimeraza, uridiltransferaz gipoglikemiya.

One of the important factors in the healthy growth and development of a child is its complete nutrition in terms of quality and quantity. The quality and quantity of food given to a child should be consistent with the characteristics of the infant's gastrointestinal system and metabolism. Mother's milk is the food that fully matches the physiological, morphological, biochemical characteristics of the body of children of the fi rst age. It has been proven that breast-fed children are 2,5 times less likely to get sick compared to children who are fed artifi cially and mixed food [1,2,3]. It depends on the immunoglobulin A contained in breast milk. Immunoglobulin A increases the child's body's resistance to infections. In addition, the spiritual closeness of the mother and the child, the feeling of constant protection and warmth in the newborn, and the awakening of motherly love in the mother, which facilitates the adaptation of the baby to the social environment and the period after birth , and

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protects the mother from unexpected pregnancy.[4,5,6] In the fi rst 3-4 days after the birth of the baby, colostrum is released from the mother's breast, and after 6-7 days, fully formed milk is released. Colostrum contains a large amount of protein, many vitamins and lymphocytes, macrophages, similar to the protein in the blood plasma of a newborn baby [7,8,9]. In addition, the fat contained in it is compatible with the adipose tissue in the child's body. Unsaturated fatty acids in breast milk help the development of the child's brain and the formation of nerve fi bers. In some cases, there is a lack of milk in the mother [10,11,12,13]. This worries the mother and the child. Because artifi cial feeding exposes the child to many gastrointestinal diseases, it also aff ects the economy of the family. In order to prevent the lack of breast milk, it is necessary to properly organize the daily routine of a nursing mother. It has been found that the amount of milk produced at certain times of the day is not the same, and its amount changes depending on the child's demand, that is, the more milk the child sucks, the more milk will be produced in the next feeding [14,15,16]. Adequacy of protein in the mother's diet aff ects the daily amount of milk. Liquid consumed more than usual does not aff ect the amount of milk. During breastfeeding, the mother's need for energy depends on her level of physical activity.[17,18,19] Sometimes young mothers eat less to maintain their fi gure, as a result of which the mother's milk decreases and the child is artifi cially fed. Not only is the mother's poor quality, one-sided diet, but also the energy value of the daily diet is excessive.[20,21,22] has a negative eff ect on the lactation process. Milk products, fruits and vegetables should 62 Klinik va profi laktik tibbiyot jurnali 2023. № 1 occupy the main place in the daily diet of a nursing mother. Mother should not abstain from vegetables and fruits. Vegetables and fruits contained in properly and qualitatively prepared food do not have a negative eff ect on children's gastrointestinal function. Thus, proper nutrition helps the baby to grow well in all aspects, the milk of nursing mothers increases, and the child receives nutritious food [23]. This prevents diseases that may occur in the child. Galactosemia, a rare but hereditary disease in children, is a congenital abnormality that results from the transfer of altered genes from a parent to a fetus. In the disease, the metabolism of galactose in the body is disturbed. In this case, enzymes aff ecting galactose cannot do their job [24]. -Galactosemia is divided into several types depending on which enzyme is lacking:-Galactose-1-phosphate-uridyltransferase defi ciency. It is characterized by the development of jaundice, disorders of the digestive tract, kidneys.-Galactokinase defi ciency. This is accompanied by the release of galacticol, an enzyme that destroys the lens of the eye and leads to the development of cataracts.-Galactose-4-epimerase defi ciency. With mild damage, it can be asymptomatic. In more severe cases, it manifests itself as a classic type of galactosemia with hearing impairment. Causes and development of the disease in children; Pathology is transmitted in an autosomal recessive way, which means that a sick child can be born only if the parent with galactosemia was conceived. Galactose is an enzyme that the body needs to break down food into glucose [25,26,27]. After food enters the intestine, the galactose contained in it is transferred to the liver, where metabolism should take place. However, against the background of intolerance to the enzyme, this process is disrupted, and the substance is distributed throughout the body with the bloodstream. As a result, oxygen starvation of the body tissues, dysfunction of the brain, heart, liver, kidneys, and eyes is noted, which causes a delay in the child's psychophysical development [28,29]. Symptoms; A few days after birth, children begin to develop signs of pathology. This is explained by the use of formula milk or breast milk, because they contain galactose. The baby shows signs of malfunction. conditions such as damage to the gastrointestinal tract, kidneys, liver, anorexia, and visual organs occur. This also has reciprocal forms. Lightweight form. If galactosemia is mild, newborns vomit after drinking milk, babies refuse the JCPM ISSN 2181-3531 Journal of clinical and priventive medicineKlinik va profi laktik tibbiyot jurnali 2022. № 2 ISSN 2181-3531 breast. Frequent watery diarrhea and fl atulence also develop. A blood test reveals hypoglycemia - lack of glucose. Malnutrition, mental retardation and mental retardation with

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development. There are also signs of chronic liver pathologies in the form of yellowing of the skin [30]. Average weight. If the pathology has reached medium severity, the above clinical signs are accompanied by an increase in the size of the liver, more severe jaundice. There is a delay in psychophysical development [15]. Heavy form. The severe level of galactosemia can be recognized by its characteristic symptoms:-The child has severe vomiting after eating milky food, as a result of which the child refuses to eat completely. In newborns, the disease is manifested by hyperexcitability, watery diarrhea and gag refl exes. Usually, these babies weigh more than 5 kg at birth.-The development of seizures, jaundice is also noted, bleeding may appear on the skin, which occurs due to the lack of a factor that ensures normal blood clotting.-After 1-2 months, kidney failure develops, the lens of the eye is aff ected. Children have signs of malnutrition due to lack of nutrients. -Even after a month, the symptoms of liver damage are added to the above symptoms: the size increases, cirrhosis develops. Also, the work of the brain is disturbed, ascites may appear [4]. Diagnostics. In order to timely determine the development of galactosemia in a child, diagnosis can be carried out not only after birth, but also during intrauterine development. This approach allows you to identify the pathology at an early date, prescribe adequate treatment and reduce the risk of complications of the disease [5]. Prenatal diagnosis consists of conducting the following studies:-Analysis of amniotic fl uid. Amniotic fl uid is taken out by piercing the front wall of the woman's abdomen. They are sent to the laboratory where the level of galactose is determined.-Chorion biopsy. A small part of the chorionic membrane of the placenta is taken. His villi are then examined for the development of galactosemia. Sometimes the following diagnostic methods are used to confi rm the pathology:-Analysis of urine for the presence of galactose in it.-Exercise tests with the introduction of galactose, glucose.-General analysis of blood, urine.-Blood biochemistry. Allows you to identify signs of malfunction of internal organs.-Eye microscope. To detect lens damage.-Ultrasound examination of abdominal organs. It is performed to assess the condition of the liver, kidneys, and intestines.-Electroencephalography. It allows to identify and evaluate brain disorders.-Liver biopsy. This is done to exclude the development of cirrhosis. After the diagnosis, the child should be regularly examined by a neurologist, geneticist, and ophthalmologist [1,2,3]. In case of illness, it is forbidden to eat additional foods, namely:-porridge with milk;-cottage cheese;-butter;-dairy products;-biscuits, drying, croutons. Prevention Prevention of the development of galactosemia is possible only by identifying families at risk of developing this disease. In addition, the following preventive measures are used: 1. Screening tests for the development of pathology among newborns. 2. Early detection of galactosemia, i.e. prenatal research. 3. If you suspect this disease, you should immediately transfer the child to a milk-free diet. 4. Minimize the consumption of dairy products by women during pregnancy if there is a risk of developing galactosemia.

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