

LATE SEIZURES AND CONSEQUENCES OF EPILEPSY IN YOUNG CHILDREN

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Annotation: the article highlights the objectives of the study to investigate the specific features of biochemical indicators of liquorice and blood serum in children with epilepsy. Children aged 6 to 14 years from 81 months of age with cerebral palsy were examined. In 41 children, the disease was complicated by epilepsy, in 40 people there were no complications.

Key question: seizures, epilepsy, cerebral palsy, tuberculosis, Jackson attack, adverbial *attack*. ПОЗДНИЕ

ПРИПАДКИ И ПОСЛЕДСТВИЯ ЭПИЛЕПСИИ У МАЛЕНЬКИХ ДЕТЕЙ

Аннотация: в статье освещаются цели исследования по изучению особенностей биохимических показателей лакрицы и сыворотки крови у детей с эпилепсией. Обследованы дети в возрасте от 6 до 14 лет в возрасте 81 месяца с церебральным параличом. У 41 ребенка заболевание осложнилось эпилепсией, у 40 человек осложнений не было.

Ключевой вопрос: судороги, эпилепсия, церебральный паралич, туберкулез, приступ Джексона, адвербиальный приступ.

Seizures are considered one of the first signs of diseases of the brain tumor, seizures in 20-45% of patients with brain tumor, and seizures in 15-30% of patients are added during the development of the disease. The onset of seizures, the patient's loss of consciousness, is an important factor that causes them to be separated from the Church [1]. Determining the main clinical features of epilepsy allows you to timely diagnose tumor diseases and, accordingly, choose the tactics of diagnosis and treatment. As a result of our study, it was found that the main factors affecting the development of seizures in symptomatic epilepsy associated with tumor diseases are: the histological type of tumor, the location of the tumor and how close it is to the hemispheres[2]. Separation of epilepsy occurring in children (suffering from seizures from 4-6 months to 2-3 years of age) is one of the important tasks of the children's neurologist and pediatrician.

According to statistical data from the World Health Organization, seizures are threeeraydi in 0,5 percent of the population of different ages of the Earth's surface. It is characteristic for him that in the case of an attack of a number of characteristic signs, observed fainting and tremor occur in some groups of the muscles of the body. Seizures in some cases can occur in all muscles of the patient's body or without diffuse (palpable). The origin of this disease is sometimes also associated with heredity [3]. Previously, the disease of seizures in this group was called geniun epilepsy. In the Anamnesis of patients with seizures (in the history of life and illness), data on the presence in several members and ancestors of the family of these four patients are recorded. They stand on account of special dispensaries [4]. It is possible to observe that such people are unemployed, as well as disabled, and men are released from military service.

It is important to determine whether there is this disorder in the parents of children who have had a seizure attack for the above reasons [5]. The course of the disease of seizures is characteristic of the following stages:

- A) initial signs of a disease attack – aura is observed in 60-70 percent of patients;
- B) the outbreak of a seizure attack;
- C) the stage of exiting sensitivity.

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The late stage of a seizure attack with complications is the patient's deep sleep and amnesia (numbness). The difference of seizures observed in children from epilepsy is that it occurs in children aged 4-6 months, from 2-3 years of age to three years of age, and the causes of its occurrence are different [6].

As a result of a brain tumor, its sili (tuberculosis), parasitic diseases, abscess (suppuration), a seizure attack also occurs. In the initial period of the disease, this process can have a local (Local), followed by a diffuse classification [7].

Under the pathophysiology of seizures, which is observed in children, there is an increase in excitability in all areas of the nervous system and the concentration of this condition in some areas of the cerebral cortex (in the motor area), in other areas there is a spread of braking and excitability to the subcutaneous nodes. Over a long period of time, seizures were explained by spasm (narrowing) that occurs in the blood vessels of the brain and ischemia (hemorrhage) of brain tissue. But most scientific studies have shown that on the basis of a seizure attack, the vibration of electrical potential lies in the cells of the cerebral cortex. There is a conclusion that seizures are observed with spasm of cerebral blood vessels [8-15]. According to scientific data from recent years, on the basis of the occurrence of a seizure attack, the change in the excitability of cells of certain parts of the cerebral cortex and the change in the permeability of the cell membrane lie.

As a result, hypoxia (lack of oxygen) in the brain tissue, poisoning, blood transfusion to the capillaries and large vascular basins, as a result of which the brain tissue suppresses and its destruction, as well as the appearance of cellless cavities, leads to the development of hypoxia (oxygen deficiency).

The onset of a seizure attack with a violation of the functioning of the heart, respiratory organs, indicates the presence of cardiovascular and pulmonary diseases in the patient. The results of laboratory tests of blood, stool, cerebrospinal fluid confirm the presence of infectious, kidney, central nervous system and other system diseases in the patient .

Local, diffuse signs characteristic of poisoning of the central nervous system, changes detected in the X – ray of the eye bottom, brain box are important in correctly determining the description of a seizure attack, its local or-diffusion, as well as the cause of the disease. A transient seizure attack without a tonic reminiscent of deserebration tension is characteristic of spasmophilia, local seizure attacks with tonic and clonic delay are characteristic of lesions of some part of the brain [11].

Seizures, which are observed in children, are divided into groups with a hereditary, retropulsive and impulsive name. Local attacks include: Jackson attack – occurs when the anterior and posterior Central rut area of the brain is stimulated [12]. Bunda is observed with local clonic gravity or local paresthesia. An adverbial attack is observed when the prematurity is provoked, and the head and eye are accompanied by a forced turn to one side.

According to the cause of the occurrence – somatogen (due to internal diseases) and tserebral (due to brain damage) attacks are differentiated. If the attack occurs as a result of somatic diseases, in addition to the main signs of the disease in the patient, in the neurological state without organic signs, only signs of general damage to the brain of the head are observed.

If a seizure attack occurs as a result of nervous disorders, then neurological symptoms characteristic of the disease (local and general) are observed. For example: meningitis meningeal symptoms, movement in encephalitis, changes in intuition, signs of lesions of the growing sphere of the tumor in the brain tumor and hakoza.

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