



INFECTIOUS DISEASES (BACTERIAL, FUNGAL, VIRAL, PARASITIC, INFESTATIONS)

## CLINIC AND PROVOKING FACTORS OF SHINGLES

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**Introduction:** Varicella Zoster (VZ) is an acute localized infection of the sensory nerve and ganglion characterized by pain and vesicular rash along the innervated dermatomes as a result of the reactivation of varicella virus.

**Objective:** Exploring provoking factors and clinical course of VZ patients.

**Materials and Methods:** We examined 45 patients under our supervision. Among them males are 10 (22.2%), females -35 (77.7%), aged from 9 to 80 years, and disease duration from 3 days to a week.

**Results:** All patients' blood test were taken for investigation, in which 5 (11.1%) patients were found HIV confirmed by the western blot, 10 (22.2%) patients were diagnosed with type B viral hepatitis, 1 (2.2%) was on the 28th week of pregnancy, 10 (22.2%) had type 2 diabetes.

Provoking factors in the disease development were noted that in 36 (80%) associated with hypothermia, 8 (17.7%) with stress, 1 (2.2%) with nothing associated. We detected in 45 patients the following clinical forms: 75.5% of patients had bullous form, 17.7% - hemorrhagic form, 4.4% - gangrenous form, 2.2% - generalized form and 2.2% - Sine Herpete. Prodromal phenomena such as high body temperature, the onset of rash a week before was noted in 10 (22.2%) patients; strong severe pains, before the appearance of rashes in 41 (91.1%) patients. In all patients were excluded zoster-like form of herpes simplex by PCR.

**Conclusions:** Thus, the analysis of anamnestic and clinical data showed that females suffer more often 3.5 times than the males. The most common provoking factor is hypothermia, especially conditioner effect on the development of disease. The most common clinical form of VZ is the bullous form. Comorbidities such as HIV, type B chronic viral hepatitis and type 2 diabetes were identified during the patients exploring of which greatly complicates the course of VZ.

