

AIDS PREVENTION FACTOR I PROMOTION OF A HEALTHY LIFESTYLE AMONG YOUNG PEOPLE STUDYING

Nazarova Firuza Ilkhomovana
Bukhara State Medical Institute

Abstract: this article provides information on AIDS and HIV infection, transmission routes, disease prevention, and recommendations for promoting a healthy lifestyle among young people.

Keywords: AIDS, HIV, disease, human, virus, organism, doctor, health, immutality, examination, system, period, bacteria, blood.

Acquired immunodeficiency syndrome (AIDS) is a virus —induced disease belonging to the retrovirus group; divided into two periods: HIV infection and the immediate AIDS (speed) period. The period of HIV infection is a period in which the human organism has a virus, but the symptoms of the disease have not yet manifested. The Virus was discovered at about the same time in Paris by professor Luc Montanye and in the United States by scientists at professor Gallo boschilio-GI (1983). This virus selectively affects a person's immune system, especially by causing destruction to SD4+ immune cells. After the Virus enters the human body, after 2-3 days, in 25-30% of cases, symptoms characteristic of the period of primary infection can be observed.

This is called "acute seroconversion Syn-Droma", in which the temperature rises, sweating at night, joints and headaches, loxiness, vomiting, diarrhea, rashes can appear on the body, especially on its upper part. These symptoms are associated with a reaction of the immune system to a certain degree of response to the action of the virus that has fallen on the human body. But the detection of antibodies during this period does not give results, since the response of the immune system will not yet be fully formed. This period of the disease can last up to 8-10 years, sometimes even longer. In current practice, the diagnosis of OITV infection is based on the detection of antibodies that appear in the blood against the disease virus —the immune enzyme taxile (IFT) reaction. Although the initial antibodies begin to form after 3 weeks, when the virus gets into the body, the diagnostics used cannot progress them. Therefore, it is possible to conclude that a person is involved in this infection based on the result of the examination, which was carried out 90 days after the virus fell on the body. AIDS is the final period of HIV infection. The fight between the Virus and the organism is long and ends with the predominance of the virus. From this time begins the era of AIDS. During this period, the human organism loses its character to withstand any germs. In particular, microbes that are constantly present in the respiratory, gastric, urinary tract and cannot provoke disease can also be activated and cause various diseases. Since their manifestation is associated with the state of AIDS that occurs in the body, diseases that are part of this group are collectively referred to as AIDS-related (associated) infections. These are bacterial infections, fungal diseases, diseases caused by viruses, Kaposhi's sarcoma, etc.

The disease virus is present in the blood of the infected person, in male lust, in female genital discharge, and in breast milk. Therefore, HIV is mainly transmitted in three different ways: through the blood, through sex, and vertically from the infected mother to the fetus.

Many people with AIDS are made up of drug addicts (drug addicts), prostitutes, gomo, and bisexuals. AIDS can be transmitted to the body during sexual intercourse, parenteral procedures (when using nosteryl needles, syringes and other medical supplies), the use of injectable blood and its substitutes, during organ and tissue transplantation (transplantation), as well as during pregnancy from the mother infected with the virus to the fetus, during childbirth, and when the baby is breastfed.

HIV/AIDS issues in Uzbekistan are handled by the Ministry of Health'S HIV/AIDS service. The Republican HIV / AIDS Center, the HIV/AIDS center of the Republic of Karakalpakstan, the HIV/AIDS centers of Tashkent City and regions carry out all preventive, epidemiological, laboratory tests, treatment activities related to the activities of this field in their regions. Within each center are anonymous rooms that will voluntarily check those who come for laboratory testing while keeping them secret. Target groups also work with drug addicts and sexologist staff at Trust points (IP) that work in a hoffion with the aim of preventing the transmission of the virus.

The initial period after HIV infection is called acute HIV, primary HIV, or acute retrovirus syndrome. In many people, a disease such as flu, mononucleosis or glandular fever develops 2-4 weeks after exposure, while others do not have noticeable symptoms. Symptoms occur in 40-90% of cases and often include fever, large lymph nodes, inflammation of the throat, rash, headache, fatigue, and/or ulcers of the mouth and genitals. A rash that appears in 20-50% of cases manifests itself on the trunk, and it is maculopapular in a classic way. Some people also develop opportunistic infections at this stage. Gastrointestinal symptoms can occur, such as vomiting or diarrhea. Neurological signs of peripheral neuropathy or Guillain–Barré syndrome also appear. The duration of symptoms varies, but usually one or two weeks.

These symptoms are often not recognized as signs of HIV infection. Family physicians or hospitals may misdiagnose as one of many infectious diseases with similar symptoms. A person who has an unknown fever and may have recently contracted HIV should do a test to determine if they have contracted the infection.

After the initial symptoms comes a phase called clinical delay, asymptomatic HIV, or chronic HIV. Without treatment, this second phase of the Natural History of HIV infection can last from about 3 to 20 years (an average of 8 years). Usually, although there are little or no symptoms at first, towards the end of this phase, many people experience fever, weight loss, gastrointestinal problems, and muscle pain. Between 50% and 70% of people develop persistent general lymphadenopathy, also characterized by an incomprehensible, painless enlargement of several groups of lymph nodes (except the pelvis) between 3 and 6 months of age.

Although most people with HIV-1 have an identified viral load and, if left untreated, eventually progress to AIDS, a small percentage (about 5%) maintain high levels of CD4+ T cells (T helper cells) for 5 years or more without antiretroviral therapy. These individuals are classified as " HIV supervisors " or long-term non-progressive (UMPB). Another group consists of those who maintain a low or undetectable viral load without antiretroviral treatment, known as "elite controllers" or "elite suppressors". They are 1 in every 300 people infected.

Each patient who has been diagnosed with AIDS is advised to follow a healthy lifestyle to avoid the consequences of the disease, infecting it with others. It is noted that such patients should use lubricating, nail-picking equipment separately. Family members and other individuals cannot take advantage of this. But if there are cases of intentional infection of other individuals, then there is a certain degree of responsiveness towards it.

List of bibliography

1. Ilkhomovna, N. F. (2024). HEALTHY EATING-A GUARANTEE OF HEALTH. *Central Asian Journal of Education and Innovation*, 3(5-3), 64-67.
2. Ilxomovna, N. F., Ilxomovich, N. A., & Ilxomovich, N. J. (2024). THE INTRODUCTION OF A HEALTHY LIFESTYLE AMONG YOUNG PEOPLE. *Central Asian Journal of Education and Innovation*, 3(5-2), 236-239.
3. Ilkhamovich, N. J., Ilkhomovich, N. A., & Ilkhomovna, N. F. (2024). PSYCHOLOGICAL CARE WITH MENTAL PATIENTS. *Central Asian Journal of Education and Innovation*, 3(5-3), 19-22.
4. Ilxomovna, N. F. (2024). HEREDITARY DISEASES IN CHILDREN EARLY DETECTION AND PREVENTIVE MEASURES. *Central Asian Journal of Education and Innovation*, 3(5-2), 215-218.
5. Nazarova, F. I. (2024). The Results Of Experimental Testing On The Use Of Modern Innovative Technologies In Teaching The Topic” Hereditary Diseases And Their Negative Consequences. *American Journal of Biodiversity*, 1(1), 6-9.
6. Nazarova, F. I. (2024). DISEASES OBSERVED IN HUMANS AS A RESULT OF ENVIRONMENTAL DISTURBANCE. *Central Asian Journal of Multidisciplinary Research and Management Studies*, 1(1), 128-131.
7. Nazarova, F. I. (2024). GELMENTLAR AND THE DISEASES OCCURRING IN PEOPLE THAT PRODUCED THEM. *Central Asian Journal of Multidisciplinary Research and Management Studies*, 1(1), 132-136.
8. Ilkhomovna, N. F. (2024). Consequences of Consanguineous Marriages. *American Journal of Pediatric Medicine and Health Sciences (2993-2149)*, 2(2), 518-523.
9. Ilxomovna, N. F. (2021). THE CREATION OF FINE-FIBER COTTON VARIETIES IS A TIME REQUIREMENT. *Galaxy International Interdisciplinary Research Journal*, 9(11), 398-400.
10. Nazarova, N. F. (2024). SIGNS AND MEASURES TO PREVENT PEOPLE'S DIABETES. *Central Asian Journal of Multidisciplinary Research and Management Studies*, 1(1), 151-155.
11. Ilhamovna, N. F. (2024). Improving Educational Efficiency and the Role of Interactive Medods in the Teaching of Batanika. *American Journal of Language, Literacy and Learning in STEM Education (2993-2769)*, 2(2), 167-172.
12. Nazarova, F. (2024). ABU ALI IBN SINONING TIBBIYOTGA OID QARASHLARI. *Центральноазиатский журнал междисциплинарных исследований и исследований в области управления*, 1(1), 146-150.
13. Ilxomovana, N. F. (2023). Tibbiyot Oliy Ta’lim Talabalarda" 6x6x6" Metodidan Foydalanib Irsiy Kasalliklar Mavzusini O’qitish. *AMALIY VA TIBBIYOT FANLARI ILMIIY JURNALI*, 2(12), 522-527.
14. Ilxomovna, N. F. (2024). TIBBIY BIOLOGIYA FANLARINI O ‘QITISHDA INTERFAOL KOGNITIV TA’LIM TEXNOLOGIYALARINI QO ‘LLASH. *Eurasian Journal of Technology and Innovation*, 2(1-2), 99-102.
15. Ilhomovna, N. F. (2024). TIBBIYOTDA VITAMINLARNING AHAMYATI. *Central Asian Journal of Multidisciplinary Research and Management Studies*, 1(1), 137-141.
16. Nazarova, F. (2024). ABOUT ABU ALI IBN SINA'S TRANSFORMATION OF A HEALTHY LIFESTYLE. *Центральноазиатский журнал междисциплинарных исследований и исследований в области управления*, 1(1), 142-145.

17. Nazarova, F. I. (2022). Determination of the Main Phases of the Development of Fine-Fiber Cotton Varieties in the Conditions of the Bukhara Region by the Method of Phenological Observation. *Journal of Ethics and Diversity in International Communication*, 1(8), 34-37.
18. Ilhomovna, F. N. (2023). Importance of Medicinal Plants in Uzbekistan.
19. Ilxomovna, N. F. (2023). Bolalarda Uchraydigan Irsiy Kasalliklar Barvaqt Aniqlash Va Oldini Olish Chorallari Tadbirlari. *AMALIY VA TIBBIYOT FANLARI ILMIIY JURNALI*, 2(11), 319-323.
20. Ilxomovna, N. F. (2023). Indicators of Fiber Yield and Length of Fiber Markers in Fine-Fiber Cotton Varieties in the Soil and Climatic Conditions of the Bukhara Region. *Best Journal of Innovation in Science, Research and Development*, 2(10), 213-217.
21. Nazarova, F. I. (2023). MEDICAL BIOLOGY READ THE SCIENCE THE USE OF EDUCATIONAL FILMS. *Horizon: Journal of Humanity and Artificial Intelligence*, 2(4), 154-159.
22. Ilhomovna, N. F. (2023). The Role of Information and Communication Technologies in Education and Professional Training of Students. *Open Access Repository*, 4(3), 680-686.
23. Ilhomovna, N. F. (2023). A Healthy Child is a Guarantee of Family Joy and a Country Prospect. *Scholastic: Journal of Natural and Medical Education*, 2(2), 127-131.
24. Baxriyevna, P. N., & Ilxomovna, N. F. (2023). EFFECTIVE METHODS FOR THE FORMATION OF COMMUNICATIVE CULTURE IN PRIMARY SCHOOL STUDENTS BASED ON AN INTEGRATIVE APPROACH. *IQRO JURNALI*, 2(1), 257-261.
25. Nazarova, F., & Hudaikulova, N. (2019). Healthy generation-the basis of a healthy family. *Scientific Bulletin of Namangan State University*, 1(7), 69-73.
26. Nazarova, F. I. (2022). ABU ALI IBN SINONING SOG 'LOM TURMUSH TARZINI SHAKILANIRISHI HAQIDA. *Scientific progress*, 3(1), 1137-1142.
27. Nazarova, F. I. R. U. Z. A. (2021). The use of phenological observations in the determination of the main phases of the development of thin-fiber goose varieties in the conditions of bukhara region. *Theoretical & applied science Учредители: Теоретическая и прикладная наука*, (9), 523-526.
28. Nazarova, F. I. (2022). Creation of fine-fiber cotton varieties in the conditions of the bukhara region. *International Journal of Philosophical Studies and Social Sciences*, 2(2), 50-54.
29. Nazarova, F. (2022). Qaridoshlar orasidagi ofat. *Scientific progress*, 3(1), 663-669.
30. Ilhomovna, F. N. (2022). Responsibility of parents before the offspring. *Conferencea*, 441-446.
31. Ilhomovna, F. N. (2022). LATE SEIZURES AND CONSEQUENCES OF EPILEPSY IN YOUNG CHILDREN. *Conferencea*, 219-223.
32. Nazarova, F. I. (2022). SOG'LOM FARZAND OILA QUVONCHI. *Scientific progress*, 3(2), 1010-1015.
33. Ilkhomovna, N. F. (2022). Negative Impact of Seizures on Quality of Life. *Miasto Przyszłości*, 24, 120-122.
34. Kholliyev, A. E., Norboyeva, U. T., Kholov, Y. D., & Boltayeva, Z. A. (2020). Productivity of cotton varieties in soil salinity and water deficiency. *The American Journal of Applied sciences*, 2(10), 7-13.
35. Ergashovich, K. A., Azamatovna, B. Z., Toshtemirovna, N. U., & Rakhimovna, A. K. (2020). Ecophysiological effects of water deficiency on cotton varieties. *Journal of critical Reviews*, 7(9), 244-246.

36. Ergashovich, K. A., Toshtemirovna, N. U., Rakhimovna, A. K., & Abdullayevna, F. F. (2020). Effects of microelements on drought resistance of cotton plant. *International Journal of Psychosocial Rehabilitation*, 24(2), 643-648.
37. Toshtemirovna, N. U., & Ergashovich, K. A. (2019). Regulation of the water balance of the cotton varieties under salting conditions. *ACADEMICIA: An International Multidisciplinary Research Journal*, 9(8), 5-9.
38. Ergashovich, K. A., & Akmalovna, A. C. (2022). Soybean Cultivation Technology and Basics of Land Preparation for Planting. *Eurasian Journal of Research, Development and Innovation*, 7, 8-13.
39. Toshtemirovna, N. U., & Ergashovich, K. A. (2019). Physiology, productivity and cotton plant adaptation under the conditions of soil salinity. *International Journal of Recent Technology and Engineering*, 8(2 S3), 1611-1613.
40. Ergashovich, K. A., Davronovich, K. Y., Toshtemirovna, N. U., & Azamatovna, B. Z. (2020). Effect of soil types, salinity and moisture levels on cotton productivity. *Journal of Critical Reviews*, 7(9), 240-243.
41. Ergashovich, K. A., Toshtemirovna, N. U., Davronovich, K. Y., Azamatovna, B. Z., & Raximovna, A. K. (2021). Effects of Abiotic Factors on the Ecophysiology of Cotton Plant. *International Journal of current research and review*, 13(4), 4-7.
42. Салимов, Г. М., Холлиев, А. Э., Норбоева, У. Т., & Эргашева, О. А. (2015). Организация методов исследования через национальные подвижные игры. *Молодой ученый*, (11), 1484-1486.
43. Kholliyev, A., Nazarova, F., & Norboyeva, N. (2021). Cotton resistance indicators in the conditions of water deficiency. *Збірник наукових праць SCIENTIA*.
44. Kholliyev, A., Boltayeva, Z., & Norboyeva, U. (2020). Cotton water exchange in water deficiency. *Збірник наукових праць ЛОГОΣ*, 54-56.
45. Ergashovich, K. A., Toshtemirovna, N. U., Raximovna, A. K., & Abdullaevna, F. F. (2022). The properties of cotton resistance and adaptability to drought stress. *Journal of Pharmaceutical Negative Results*, 13(4), 958-961.
46. Ergashovich, K. A., & Musurmonovich, F. S. (2021). Some Characteristics Of Transpiration Of Promising Soybean's Varieties. *The American Journal of Agriculture and Biomedical Engineering*, 3(05), 28-35.
47. Kholliyev, A., & Boltayeva, Z. (2020). Resistance of cotton varieties to water deficiency. *Збірник наукових праць ЛОГОΣ*, 70-72.
48. Kholliye, A., Norboyeva, U., & Adizova, K. (2020). About the negative impact of salination on cotton. *Збірник наукових праць ЛОГОΣ*, 50-52.
49. gashovich, K. A., Toshtemirovna, N. U., Iskandarovich, J. B., & Toshtemirovna, N. N. (2021). Soil Salinity And Sustainability Of Cotton Plant. *The American Journal of Agriculture and Biomedical Engineering*, 3(04), 12-19.
50. Davronovich, K. Y., & Ergashovich, K. A. (2019). Growing of cotton varieties and hybrid to the height under the ecological conditions of soil salinity and washed soil salinity. *Asian Journal of Multidimensional Research (AJMR)*, 8(9), 84-89.