Commentary

JOURNAL OF PEDIATRIC NEUROLOGICAL DISORDERS

Neurodevelopmental Disorder and is Causes

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Commentary

Signs and Indications: Most of those who promote DCIS do not associate with any of the manifestations. Most cases (80-85%) are detected by mammography tests. The main signs and symptoms may appear as the disease progresses. Due to the lack of early detection, DCIS is often seen in mammography tests.

In a few cases, DCIS can cause:

- A lump or tightness in or near the chest or under the arm
- Adjustment of the size or shape of the chest
- Areola release or areola sensitivity; the areola may be changed, or re-drawn to the chest
- Chest edges or curvature of the chest; the skin may resemble orange skin
- Modification of the way the skin of the chest, areola, or areola looks or feels like warmth, stretch, redness or texture.

Causes: Some of the reasons for DCIS are not yet clear. Gambling factors that promote this condition are similar to those of invading breast cancer. Some women however are more prone than others in creating DCIS. Women who are considered high risk are people with a family history of dangerous breast growth, people who have been menstruating at an early age or who have stopped late. Likewise, women who have never had children or had them late in life are also bound to experience this condition. Prolonged use of estrogen-progestin chemical substitution treatment (HRT) for more than five years after menopause, genetic mutations (BRCA1 or BRCA2 genes), abnormal hyperplasia, and radiation exposure or exposure to certain synthetic compounds may also contributed to the development. In any case, gambling creates a harmless growth that is painless with age and is higher for women with more experience than 45 years.

Causes: The development of the nervous system is strictly controlled and planned; is affected by both genetic and climate systems. Any major deviation from the normally built path from the animal to life can result in non-existent or abnormal neuronal engineering or communication. This leads to social hardship, genetic and metabolic disorders, intolerant disorders, preventable diseases, healthy variables, real injuries, and dangerous and environmental factors. Other neurodevelopmental disorders, such as mental imbalance and other unavoidable structural problems, are considered to be the most common causes of diseases that are associated with a clear neurodevelopmental appearance.

A clear picture of a genetic neurodevelopmental problem is Trisomy 21, otherwise known as Down syndrome. This problem is usually caused by another chromosome 21, although in unprecedented times it is linked to other chromosomal compounds such as genetic mutations. It is characterized by short stature, epicanthal curvature (eyelid), strange fingerprints, and palm print, heart palpitations, unhelpful muscle tone (reversal of nerve changes) and paralysis (expert development).

Slightly less commonly known neurodevelopmental disorders commonly known include Fragile X disorders. The critical X-condition was first introduced in 1943 by Martin and Bell, focused on people with a family background of sexual "mental disabilities". Rett disorder, another X-linked problem, produces serious limitations. Williams' disease is caused by a slight genetic mutation from chromosome 7. The most common occasional complication of Copy Number Variant is 22q11.2 disorder cancellation disorder (formerly DiGeorge or velocardiofacial condition), followed by Prader-Willi disorder and Angelman disorder

Acknowledgment

The authors are grateful to the journal editor and the anonymous reviewers for their helpful comments and suggestions.

Declaration of Conflicting Interests

The authors declared no potential conflicts of interest for the research