

YOUNG SCIENTIST DAY

TOPICAL ISSUES

IN MEDICINE

Materials of

The 5th scientific-practical

Conference

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DEAR COLLEAGUES!

Holding of scientific-practical conferences in English language already became a good tradition in life of Tashkent medical academy and it is a great motivation for our youth!

This conference of young scientist "Topical issues of medicine" is the 4th one and we can say with sure, that interest of students and master students in it increasing from year to year. Undeniable evidence of this is the rising amount of participants and highly competitive selection of scientific papers.

I would like to note gladly the high scientific potential of our youth, continuous pursuit to self-improvement, mastery of foreign languages, computer technologies and respectively growing year by year competitiveness.

I want to use this opportunity to appeal ones again to the professors and teachers of our Academy in order to fully support our young scientists and help them to find their way in medicine. I sincerely hope that this conference will be another opportunity for discovering new talents and for more productive scientific cooperation, including international.

Wishing success in all your beginnings,

Rector of Tashkent medical academy Sh.I. Karimov

OBSTETRICS AND GYNECOLOGY, PEDIATRY

VALUE OF THE MODERN DIAGNOSTICAL METHODS FOR EXAMINING THE WOMEN WITH INFERTILITY

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The actuality of the problem in the world. Worldwide infertility is relevant. According to the WHO worldwide 10 - 12% of couples are faced with this problem. Infertility in 45% of cases associated with disturbances in the sexual sphere of women, 40% - a man, in other cases, infertility is due to impairment of both spouses. The world average of 50-70% of marriages break up because of infertility. Currently, 70-80% of infertile couples after appropriate examination and treatment are the proud parents.

Purpose of the research work. Improving the diagnosis and treatment of women with infertility.

Goals. Determine the number of women with infertility of tubal etiology. Determine the number of women with ovarian infertility etiology. To study the efficacy of modern technology in the diagnosis and treatment of infertile women.

Research materials. The research is conducted on the basis of the 2nd Clinic of the Tashkent Medical Academy. Studied 28 women. Of these, 8 women (28.6%) aged 20-25 years, 14 (50%) - 26-30 years, 6 (21.4%) - 30 years of age.

Research methods.

- Menstrual history (age at menarche, the nature of violations of the cycle, the presence of inter-menstrual discharge, painful menstruation)
- Number and outcome of previous pregnancies and births
- The duration of infertility
- Contraceptive methods, the duration of their application
- Operations accompanied by the risk of adhesions
- Conduct a bimanual pelvic examination, examination of the cervix in the mirrors.
- Pelvic ultrasound
- Laparoscopy

Results of the research. The study of 18 women (64.3%) with primary infertility, 10 women (35.7%) with secondary infertility. According to the etiology of infertility: 20 women (71.40%) with ovarian infertility etiology, 8 women (28.60%), tubal infertility etiology. 10% of the causes of infertility ovarian etiology of ovarian dysfunction, 40% - polycystic ovary, 30% - endometrioid ovarian cysts, 20% - ovarian cysts. 25% of the causes of infertility tubal etiology of inflammatory processes in the genital organs, 25% - uterine fibroids, 50% - obstruction of the fallopian tubes.

Conclusions. In our studies of women with tubal infertility etiology 28.6%, of women with ovarian etiology – 71.4%. The most effective method of diagnosis and treatment is the laparoscopy.

PLACENTAL GROWTH FACTOR (PLGF) AS A MARKER OF PLACENTA DYSFUNCTION DURING THE FIRST TRIMESTER OF PREGNANCY.

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Objective. Markers of placental dysfunction are used for risk prediction of adverse obstetric outcomes including placenta dysfunction and growth restriction. We aimed to get preliminary results to validate efficiency of our first trimester placental dysfunction screening and to predict of adverse perinatal outcome using placental growth factor (PLGF).

Materials and methods. Data were collected prospectively in the second clinic of Tashkent Medical Academy. A total of 200 pregnant women agreed to participate in this study. We performed multimarker combined first trimester screening with mean arterial blood pressure and PLGF analysis. Patients in high risk of preeclampsia or fetal growth restriction were given acetylsalicylic acid prophylaxis. Patients with abortions were excluded from the study. After delivery clinical data were collected. Predictive values of this screening were evaluated.

Results. 196 pregnant women were included. 175 (89 %) were screened negative. 21 (11 %) screening tests were positive for placental dysfunction. We found differences in following parameters: (low risk to high-risk group) delivery by caesarean section 44 % to 52 %, average age at time of delivery 32 to 34 years, gestational week of delivery 39 to 37, incidence of preeclampsia 1.5 % to 4.7%, gestational hypertension 8.1 % to 23% and intrauterine growth restriction 1.0 % to 4.7 %.

Conclusion. PLGF is belongs to markers predicting adverse perinatal outcome. In our study women with positive screening had a higher risk of caesarean section, preterm birth and placental dysfunction. This project is ongoing and we will be collecting further data in future.

FACTORS THAT INFLUENCE TO THE MANIFESTATION OF FOOD ALLERGY IN CHILDREN OF EARLY AGE

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In last ten years it is observed growth of atopic in children. The main roles in manifestation of allergy symptoms are character of children's food, age of contact with the potential food allergens and development of food tolerance. Only breast feeding till 6 month of age prevents possible sensitizing by food allergens, that most significant for children of early age, which is due to features of food and immune systems of child.

Object: to determine factors that influence to the manifestation of food allergy in children of early age.

Materials and methods. Was conducted survey between 40 mothers of children in the age of 1 to 1,5 year, which have been in in-patient treatment in the allergology and pulmonology departments of the 1st clinic of TMA. The analyzing group was made-up by 56% boys and 44% girls, average age – 1 to 3 year. In the questionnaire was included questions about periods of pregnancy, neonatal period, kinds of feeding, food of children's older than 6 month, additional food.

Results. 30% of respondents revealed that they were hereditary burdened on atopic, more of them were from maternal line; women of this group on pregnancy tried to exclude obligate allergens from the ration (50%) and made recommendations about following of hypoallergenic life (30%). 75% of surveyed indicated that pregnancy course was with toxicosis, 8% with risk of abort, 68% with anemia, 15 % with infection. 7% of children were born by Cesarean section, others by physiological way on the 37-41 week of gestation. Body mass on birth was 2900-4300 gr, length 45-56 sm. Children of 80% of mothers were put on breast just after birth, others after 2-5 hours (15%), 2-3 days (5%). On breast feeding after birth till 6 month were 54% of children. 16% of mothers noticed that the symptoms of atopic dermatitis had appeared in children on only breastfeeding when mother had hyper allergenic food. 30% of mothers noticed that they chose milky food their self, others followed physician's recommendations. In 40% children including of milky food accompanied with skin rashes and dyspepsia. Mothers of 6 children (9%) began to include additional food to children up to 4 month age, 2 children (3 %) after 6 month, to others (88%) on 6 month of age. 44 % of surveyed mothers have noticed that including of additional food accompanied with appearing skin symptoms of atopic, unstable stool (37%), constipation (23%) and meteorism (23%). Only 64% of mothers for including of additional food followed with recommendation of pediatrician. 18% of surveyed mothers noticed that symptoms of atopic children had appeared without any cause.

Conclusion: one of the main factors that influence to the manifestation of food allergy in children of early age is irrational nutrition: late put to the breast, early transfer to the mix or artificial food, not following the times of including of additional food, choosing of additional milky food and meal without recommendations of physician.

PRESENT-DAY POSSIBILITIES OF THE METHODS OF ABORTION IN LATE TERMS

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Urgency. Despite of the main part of abortion of pregnancy is carried out in the 1 trimester (95, 8% in 2012), nevertheless, there is a consumption to this procedure in the second trimester (4,2%). It is connected with delay of diagnostics of malformation development to fetus with initiation of medical statement of mother's side and also untimely (late) detection of undesirable pregnancy in presence of medical or social evidence to its abortion. At the same time the number of abortion of pregnancy after 22 weeks increased as in absolute value (7,3%) , as and in relative (from 3,45% until 3,5%).

Purpose: to carry out comparative analysis of different abortion methods of pregnancy in the second trimester.

Material and methods. In developed countries dilatation and evacuation and medicamentous stimulation with applying of mifepriston and misoprostol became more common technologies of abortion of pregnancy in the second trimester. Dilatation and evacuation suppose the evacuation of contents of uterine cavity by abortive forceps after preliminary enlargement of cervix uteri with using of medicamentous agents (mifepriston or misoprostol), mechanical (dilator of Gegar) or os-

motric dilators (laminaria, dilapan). Medicamentous method – protocol of pregnancy abortion of late terms (13-22 weeks) provides for intake the preparation of mifepriston in dose 200 mg (1 tablet) once under control of a doctor. In 36-48 hours examination of the patient is carried out with the purpose of increase the effect of mifepriston and administered the preparation misoprostol 400mg or 800mg once into vagina, then misoprostol is introduced repeatedly in dose 400mg sublingual every 3 hours (maximal number of dose -

Results. In medicamentous abortion of pregnancy the mid – interval between onset of stimulation and abortion makes up 5, 9-6,6 hours. It increases with the increase of the term of pregnancy (95% , $p=0,0001$), with the increasing of age ($p=0,001$) and in pregnant women for the first time (95% , $p=0,001$). Positive effect reaches at an average in 97%-98% cases. Approximately in 0,2-0,4% women abortion occurs after administration of mifepriston exceptionally. Perforation of uterus potential serious complication occurs in surgical abortion in the second trimester (0,2-0,4%). Its elimination , as a rule, it requires laparotomia. Infectious complication of the method makes up 0, 8-2%.

Conclusion. As a whole medicamentous abortion of pregnancy is considered by international experts as essential reserve in decreasing of mothers mortality in abortion of pregnancy in all terms. It is effective and safety to apply mifepriston - misoprostol in medicamentous abortion of pregnancy in the second trimester.

IMPLEMENTATION OF EXEMPLARY TRAINING METHOD IN BLOOD LOST ASSESSMENT AND FIRST AID IN OBSTETRIC HEMORRHAGE

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Bleeding as a cause of maternal morbidity and mortality over a long period is one of the leading places in the world. According to most experts, this pathology is one of the five major causes of maternal deaths each year carrying more than one hundred thousand lives. Despite of significant progress in the development and implementation of methods of treatment, prevention of obstetric hemorrhage, the basis of life-saving and recovery of the patient lies in an efficient and well-organized team work, able to provide timely and quality medical care. The important role played in this sense elaborated common approaches and standards for the provision of skilled care.

Objective. To assess obstetric hemorrhage and evaluation of actions of the future general practitioner.

Material and methods. The study included 56 students of the 7th year treatment faculty (709 and 710gr.) and masters of 1st course, and 9 stations and model Natalie Mom. We designed a labor ward drill to provide students and opportunity to assess their blood loss-assessing skills. A multi-station blood loss simulation was designed with nine stations, which created opportunity to assess predetermined simulated blood losses. Tomato juice was used to simulate clots and blood. Each station had a measured amount, ranging from 1 to 2000 ml. Simulated blood quantities were placed on sanitary pads, delivery pads, basins and drapes and on the floor.

The Institution Review Board approved this study. Second part of the research included real clinical case with Natalie Mom model and artificial blood. Postpartum blood loss simulation was designed and 10 of students were defined as gynecologists, obstetricians, resuscitation specialists, nurses, low medical persons. During the 10 minutes, they provide medical aid for Natalie Mom.

Results. 56 participants completed the skills session. The findings clearly document the inaccurate estimation of blood estimation, as well as the fact that the accuracy of the estimate decreased with increasing blood volume. Number of correct answers of blood estimation is very low, about 4-18%. Blood lost of little amounts was overestimated in 64-92% cases, while massive hemorrhage was underestimated in 60-76% cases. This was particularly true above 800 ml. Of interest, the under but tocks absorbent delivery pad was most deceptive for estimating. In the second part of the study, students performed the following action: bimanual uterine massage, crushing the abdominal aorta, intravenous saline transfusion. But they have forgotten important first aid practical skills like primary assessment of patient's condition, approximately evaluation of lost blood inject bladder catheter, intravenous and intramuscular injection of drugs like metilergometrin, mizoproston, trimin and blood taking for laboratory analysis (bedside test).

Conclusion. In spite of having list of special practical skills and international guides for different clinical cases and situations, students always confuse in front of real critical situations. Performing of alarm courses and different exemplary trainings, where students do practical skills and apply their medical abilities by themselves helps to provide confidence and experience for future general practitioners.

THE ROLE OF EARLY SEXUAL ACTIVITY IN THE DEVELOPMENT OF CERVICAL INTRAEPITHELIAL NEOPLASIA

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The urgency of the problem. Cervical cancer is an important health problem for women throughout the world. It is the third most common cancer in women – affecting more than 1,4 million women worldwide. Each year, more than 460,000 new cases occur and about 231,000 women die of the disease. Cervical cancer is a particularly significant problem in developing countries, where about 80% of new cervical cancer cases occur every year. The most relevant is the fact that from this disease die of mothers aged 25 to 50 years, which affects the usefulness of a harmonious family and the upbringing of children. Nearly all (99,7%) cervical cancers are directly linked to previous infection with one or more types of human papillomavirus (HPV), one of the most prevalent sexually transmitted infections in the world. Of the more than 50 types of HPV that infect the genital tract, 15 to 20 types are linked to cervical cancer. Four of those types – 16, 18, 31, and 45 – are most often detected in cervical cancer cases, and type 16 accounts for half of the cases worldwide.

These data point to the significance of early diagnosis and the need to early recognition and proper treatment of precancerous cervical processes.

The aim of our research was to study the incidence of cervical intraepithelial neoplasia in women initiating sexual activity earlier.

Materials and Methods: We examined 70 women with cervical intraepithelial neoplasia aged from 25 to 50 years, mean age 34.8+/-years WWC II clinical TMA. Verification of the diagnosis was based on clinical, laboratory and instrumental studies(history, PAP-smear, colposcopy, PCR diagnostics for HPV). We found that the women surveyed had sexual activity at the age of 16 to 24 years.

We investigated women were divided into 2 groups. In 1-group consisted of 70 women up to 24 years old who cytology was revealed cervical intraepithelial neoplasia I and II degree, in the 2-group(control group) consisted of 15 women aged up to 24 with normal cytology. From history we found that a history of abortion had 42 women, post-DEK in 18 women, after gynecological surgery in 6 women. Studied all women for HPV types 16/18, 42% of the result was positive.

Conclusion: women with a burdened gynecological history on the background of HPV carrier predisposed to the development of cervical intraepithelial neoplasia.

HUMAN PAPILLOMA VIRUS AND CERVICAL PRE-CANCER

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Introduction. Human papilloma virus (HPV) is a sexually transmitted common viral infection of the genital systems. It is known that HPV and its persistence is the initiating factor in the genesis of precancerous lesions and cervical cancer.

Aim. To study of HPV prevalence among the women at the reproductive age with cervical precancerous condition.

Material. There were examined 32 women with precancerous conditions of the cervix at the age of 21-49 years. All patients were performed a bimanual examination, speculum examination, taking smears from the surface of the ecto- and endocervix for the cytological studies, and sampling the surface epithelium of the cervix to determine HPV by the method of polymerase chain reaction (PCR). Cytological conclusion was conducted in Bethesda.

Results. In process of analyzing of cytological research ASCUS was diagnosed in 23.4% of patients, L SIL/CIN I was registered in 46,8% of cases, H SIL/CIN II-III in 17% of women, ASC H in 4,2% of patients and AGC was revealed in 6,3% of women. Results of the carried out PCR method researches of cervical smear of surveyed women with cervical precancerous conditions have shown, that HPV was diagnosed in 40.4% of patients, which in 57% of them there were presence of HPV low oncogen types, in 63% - high oncogen HPV type, and combination of both types were mentioned in 21% cases. In patients which cytological results associated with L (Low) - SIL/CIN I HPV were detected in 27,8%, and in women with cytological result associated with H (High) - SIL/CIN II-III HPV was detected in 17% cases.

Conclusion. A special attention is the fact that low and high oncogen HPV types were diagnosed in 40,4% among of the 32 women, which surveyed with cervical dysplasia. Taking into account that HPV plays a major role on the development of precancerous lesions and cervical cancer, and it is clear of necessity of diagnosis HPV at the early stages and improve the methods of the treating for HPV.

PELVIC ORGANS PROLAPSE AND VARICOSE DISEASE

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Background. Literature review analysis demonstrates that genital prolapsed (GP) and varicose veins of pelvis (VVP) in women are the result of a connective tissue dysplasia, as a manifestation of systemic connective tissue disorders at the level of the pelvic complex, so pregnancy and childbirth – are the provoking factors of these diseases. However, today, one of the causes of increased blood loss during vaginal reconstructive surgery may be presence of varicose veins of pelvis. That is to say, it should be developed an optimal algorithm of diagnosing of VVP in women who seek the help of a gynecologist due to GP.

Objective. The purpose of the study was to evaluate the synergy effect of these pathologies on the amount of blood loss during reconstructive surgery on vagina.

Methods. The study was conducted on the basis of 2 Maternity Hospital of the Tashkent Medical Academy Clinics. The basis of this study made a retrospective study of 223 case histories of patients who underwent anterior and posterior colporrhaphy for the period 2008-2012, next step was clinical and laboratory studies of 60 women with prolapse of the vaginal walls **II and III** degree admitted to gynecology unit in 2012 to 2014 period.

A retrospective analysis showed that the major risk factor of intraoperative blood loss during anterior and posterior colporrhaphy not diagnosed before surgery varicose veins of vaginal walls and pelvic organs. Analysis of the data indicates the need for diagnostic and pre-operative treatment of VVP in patients personalized prediction of the risk of bleeding in women during vaginal surgery, which will reduce the amount of intraoperative blood loss and duration of the rehabilitation period. In a prospective study, in accordance with the goal and objectives, were included 60 patients with prolapse of the vaginal walls **II and III** degree, who admitted for the surgical correction between 2012 and 2014. To all patients were performed following algorithm of preoperative examination: laboratory tests, ultrasound and Doppler-mapping of pelvic venous system. Patients were divided into 3 groups: a control group, in the comparison group included 20 women with VVP and prolapse of the vaginal walls II and III degree, without preoperative treatment, the main group consisted of 40 women with VVP and prolapse of the vaginal walls **II and III**, who underwent preoperative complex treatment of diseases, which was aimed to prevent bleeding during surgery.

Results. Patients of main group had complaints of shortness of urination 5 (25.0%) and 12 (30.0%) of the main group on admission to the hospital. The main complaints of patients were: feeling of incomplete evacuation (40.0% and 25.0%), constipation (45.0% and 42.5%), difficulty in defecation (15.0% and 20.0%), urinary gases (60,0% and 27,5%, $P < 0,05$), stress incontinence (75,0% and 40,0%, $P < 0,01$), pelvic pain (5.0%, and 85, 0% $P < 0,001$), respectively, in groups. For the purpose of contraception patients with GP were significantly more used Coitus interruptus (47,5% in the intervention group and 50.0% in the comparison group) - method, negatively affecting on venous hemodynamics of the pelvic organs. We prescribed following medicines before surgery: Diosmin 600 mg 2 times per day for three weeks, Glycine 100 mg 3 times per day for 10 days, Glyucosamin sulfatis 1500 mg per day 3 weeks.

After performed surgery we estimated blood loss in all groups. Blood loss in main

group was significantly less than in comparison 200±100 ml and 500±150 ml respectively, which signs on positive effect of complex treatment before surgery neither of traditional.

Conclusions. Pathogenetically required complex treatment includes medicines, directed to different ways of pathogenesis, and complex treatment measures contributes to the normalization of venous tone, improve hemodynamics and trophic processes in the pelvis.

ANTI-INFLAMMATORY THERAPY OF ACUTE RESPIRATORY INFECTIONS IN CHILDREN

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Objective. To evaluate the efficacy and safety of oral anti-inflammatory drug drops Tonsilgon® H

Patients and Methods. The study involved 25 children aged 2 to 6 years (mean age 3.7 ± 0.3 years) with acute rhinopharyngitis average severity. Patients were randomly assigned to the main (15 pers.) And control (10 pers.) Group. Patients in the control group received standard therapy ARI patients from the main group along with standard treatment regimens, the first day was administered oral drops Tonsilgon® N.

Results. Using Tonsilgon® H , unlike the control group , hyperthermia virtually all children was stopped by the third day of therapy (14 people .; 93.3 % ; $p = 0.001$) , regression of symptoms of intoxication was recorded on day 3 follow-up, 11 (80 %) children ($p = 0.01$) , the phenomenon of rhinitis in the majority of patients were stopped by the 5th day of treatment (13 people .; 86.6 % ; $p = 0.05$) , pharyngitis clinical symptoms on day 3 of therapy were recorded less frequently (46.7 % vs. 73.3 % ; $p = 0.03$)

It noted more rapid relief of cough with the advent of significant difference on day 3 of therapy ($p < 0.05$). The mean duration of acute respiratory infections by using Tonsilgon® H was 5.1 ± 0.1 days in the control group, 5.9 ± 0.3 days ($p = 0.003$). Bacterial complications of respiratory infection are registered only in the control group (2 people .; 20%; $p = 0.04$). Patients treated Tonsilgon® H, significantly less need arose to appoint agents with antiviral activity, drugs for the symptomatic treatment of fever, rhinitis, sore throat and cough, as well as other medicines (herbal medicines, nasal corticosteroids, topical agents for the treatment of otitis media and sinusitis) ($p < 0.05$). Using Tonsilgon® H safely during the study any side effects, allergic reactions and other symptoms of intolerance registered. The vast majority of parents have noted a full recovery (11 pers .; 73.3%) and a significant improvement in the condition of children (4 persons .; 26.7%), good tolerability and have been satisfied with the results of treatment (10 people .; 80%). Positive feedback was received on the part of pediatricians, more than half (11 per .; 73.3%) evaluated the results of therapy as a full recovery, others (4 pers .; 33.3%) - as a significant improvement.

Conclusion: it is proved that Tonsilgon® H has a pronounced therapeutic effect, shortening the duration of symptoms of clinical ARI moderate to 5.1 days reduces the incidence of complications of bacterial respiratory diseases, reduced need for drugs , has high safety and clinical efficacy , good tolerability. Using Tonsilgon® N in the complex therapy to optimize the treatment of acute respiratory infections, reduce the direct and indirect medical costs associated with the disease.

TOURCH-INFECTION, AS ETIOLOGICAL FACTOR OF THE DEVELOPMENT OF CHRONIC HIVES DISEASE IN CHILDREN

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One of actual problem of lately time stand hives disease which will rashly increase. The problem of hives disease one of the most complicated problems of modern allergology.

Determined that chronic hives disease often goes together with bacterial infection (oral cavity infection, paranasal sinuses infection, urinary system infection (Greaves M.W., 2002)), chronic viral infection (herpes simplex, cytomegalovirus and etc. (Zweiman B., 2003)). As well as, in study of etiological factors of chronic hives disease, discovered that development of the chronic hives disease in children often connected with presence of the viral infections in organism, in general found. CMV and herpes simplex viral infection.

The purpose of the research: to study the etiological factors of development of chronic hives disease in children.

Materials and methods. Examined two groups of diseased children. First group – 21 patients- with acute hives disease, which received basis therapy. Second group – 23 patients – with chronic hives disease, which received basis therapy and antiviral therapy which found CMV and herpes simplex virus.

Results and discussion. Particular sense devoted, as etiological factors, as triggers: -cold air, cold water, wind (coldness hives disease) – 1 patient -local effect of high temperature (thermal contact hives disease) – 2 patient-effect of ultraviolet beam (sunny hives disease) - 2 patients -effect of physical loading, mechanical effect, for example, to skin with some object (dermographic hives disease, nettles appeared after 1-5 minutes) – in 2 patients; In acute hives disease, as etiological factor often observed food allergy. On study of chronic hives disease found following: the research of CMV and herpes simplex virus were positive in 16 (70%), 10 (43,4%) of their marked combination of these infections.

Conclusions: 1. In the development of chronic hives disease, etiological factors may be CMV and herpes simplex virus, also trigger mechanisms.

2. Founding of this factors evented statement for use antiviral preparations in complex therapy.

3. Using antiviral preparations in complex therapy of chronic hives disease increased effectiveness of the treatment.

4. In children which important caused factors were triggers, which excluded triggers and which received basis therapy, also marked increase of effect of treatment.

THE FUNCTIONAL STATE OF LIVER IN NON-RHEUMATIC CARDITIS IN CHILDREN

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Non-rheumatic carditis - damage heart muscle predominantly inflammatory nature caused directly or indirectly through the action of immune mechanisms of infection, physical and chemical factors, and occurs in allergic and autoimmune dis-

eases (F. N. Paleev, 2002).

Purpose and objectives: study of the functional activity of the liver in non-rheumatic carditis in children.

Material and Methods: In the pediatric clinic №1 cardiorheumatology TMA examined 27 patients with non-rheumatic carditis children aged 1-7 years. All patients were diagnosed according to the classification Belokon N. A. (1987).

Results: In 11 (41%) children (I group) the disease developed after frequent use of antibiotics and sulfa drugs. The remaining 16 (59%) children (II group), a disease caused by an infection. All the sick children were determined in the blood content of bilirubin with its factions, AST and ALT. Children in group I, we obtained the following indicators: Community bilirubin - 12.7 mmol/l, indirect bilirubin - 9.8 mmol/l, direct bilirubin - 2.9 mmol/l, ALT - 0.97 mmol/l and AST - 1.05 mmol/l. The results of the analysis of the children of group II: total bilirubin - 9.4 mmol/l, indirect bilirubin - 6.8 mmol/l, direct bilirubin - 2.6 mol/l, ALT - 0.27 mmol/l and AST - 0.32 mmol/l.

Discussions: According to the results of our studies in children in group I increased blood levels of ALT and AST compared to group II.

Conclusions: Our findings led to the conclusion that the excessive use of some antibiotics and sulfa drugs in addition damage to the heart is disturbed detoxification function of the liver.

CHANGES CLINICAL – PATHOMORPHOLOGICAL ASPECTS OF COMPLICATED ACUTE PNEUMONIA IN CHILDREN

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The purpose: to study clinic-morphological peculiarities of acute pneumonia, which complicated with carditis in children for optimization of differentiated therapy and improvement the prognosis of cardio-vascular changes.

Materials and methods of research. All together 212 children (from 1 to 3 years old) were examined: 1st group composed 107 (50,5%) young children with acute pneumonia, which complicated with carditis; 2nd group – 105 (49,5%) young children with acute pneumonia without carditis. Clinical, laboratorial, instrumental and functional methods of investigation were used in the work. The results of 78 autopsies of died children from acute pneumonia were analyzed. The object of research was lungs and heart of the children who died from acute pneumonia. Histological investigations of stained preparations were realized underlight microscope "Leica" (Germany).

Results of study. The analysis of hospitalization term from onset of disease shows that in the 1st group specific gravity of all patients who were admitted to in-patient department after 2weeks with the appearance the first symptoms of disease significantly were higher (16,8%) comparing with children of the 2nd group (6,7%)($P < 0,001$). Severity of state at admission to hospital 120 (18,7%) patients of the first group was estimated as extremely severe, severe- in 77 (72,0%) patients, moderate severe was noted in 10 (9,3%) sick children. In the 2nd group extremely severe state in 5(4,8%), severe-84 (80,0%) patients, moderate degree of severity - 16 (15,2%). The analysis of sick children and concomitant disease in young children with acute pneumonia shows that 53,3% patients of the 1st group and 27,6% - 2nd group have been suffered from pneumonia in their anamnesis. Analysis of clinical respiratory symptoms in compared group shows such signs as paleness of skin, pe-

ripheral cyanosis, expressed breathlessness with participating of subsidiary muscular system, anxiety, sleep disorder, expressness of physical changes in the lungs relatively more often were noted in patients of the 1st group ($P < 0,001$). Cardiologic symptoms in young age children with diagnosis of acute pneumonia such as enlargement of heart border, dullness of heart beat, bradycardia, accent of II beat, hepatomegaly, signs of blood circulation disorders were relatively marked in patients of the 1st group ($P < 0,001$). It was established that from 78 cases of acute pneumonia in children viral pneumonia was revealed in 23,6% cases, viral-bacterial - in 43,7%, bacterial - in 32,6%. The most frequent cause of the death is viral -bacterial pneumonia. From viruses the most significance as pathogen was adenovirus infection (45,4%), parainfluenza virus takes the second place by rate (28,4%) in combination with opportunistic pathogenic micro flora. The results of histological investigations which were prepared which was taken from heart showed that pathologic - morphological changes in viral -bacterial pneumonia had prevalent character. Expressed endotheliosis in the form of hypertrophy and desquamation of endothelial cells with micro thrombi formation is marked in the walls of arteriole.

Conclusion. Thus, it was established the results of conducted investigations that complication with carditis was noted prevalently in bilateral pneumonia with confluent foci. In complication of acute pneumonia with carditis expression of clinical symptoms from side of respiratory system and from the side of cardio-vascular system as well. Lesion of stromal-vascular structure of myocardium in viral- bacterial pneumonia has diffuse character and mainly they appear with affection of micro vessels as endarteritis, endothelosis and thrombi formation.

DETECTION OF ASYMPTOMATIC BACTERIURIA IN WOMEN FOR PREVENTION PYELONEPHRITIS IN PREGNANCY

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Background. Bacteriuria is seen in pregnant women in 4-9% of cases. And in 20-40% of pregnant women asymptomatic bacteriuria develops and becomes acute pyelonephritis, which can lead to underweight premature births, to early discharge of water, to anemia, to placental insufficiency. Asymptomatic bacteriuria increases the percentage of complications in pregnancy and birth till the death of the mother or fetus.

Introduction. Early detection of asymptomatic bacteriuria in women of child-bearing age, and treated promptly with effective drugs leads to a decrease in the number of pyelonephritis in pregnancy and complications of bacteriuria.

Materials and methods. The study was carried out in 16th polyclinic of Tashkent. The study involved two groups of women at the age of 20 to 35, who has asymptomatic bacteriuria which was revealed by prophylactic examination in 2013. In the first group there were 100 women who received treatment for revealed asymptomatic bacteriuria. The second group consisted of 100 women who had asymptomatic bacteriuria, and who did not receive the treatment. By a common microscopic analysis of urine and by conducting ultrasound of the urinary tract it was detected that all those women had asymptomatic bacteriuria. We must acknowledge the fact that these women did not have other diseases that could affect the course of pregnancy. For effective treatment of asymptomatic bacteriuria in women of group №1 was used herbal medicine, homeopathic remedies, and uroseptics.

Results: in 2014 and in the first quarter of 2015, the number of the women who became pregnant and gave birth in the 1st group was 22, among them, only one (4.5%) woman had pyelonephritis, but the delivery was without complications. In the second group 19 of the women among 100 became pregnant and gave birth, 4 patients (21%) who gave birth during pregnancy had pyelonephritis, complicated childbirth was registered only in one case (5.26%) as an early discharge of water.

Conclusion. Thus, the results of the study groups mentioned above allow us to conclude on the effectiveness of detection of asymptomatic bacteriuria in women of child-bearing age. A timely treatment can reduce the risk of pyelonephritis and other fetal complications. Also it can reduce the percentage of the maternal mortality in obstetrics

OPTIMIZATION OF AN APPROACH TO METHODS OF DELIVERY FOR WOMEN WITH A UTERINE

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Background. The frequency of cesarean section (CS) has grown steadily, reaching an average of 15-25% according to different countries. The most frequent indication for elective caesarean section is the presence of uterine scar after previous surgery. The birth vaginally with a uterine scar is possible by reducing the CS. Cohort studies confirm the high percentage of 50-80% of successful VBAC (vaginal birth after caesarean section). CS proved its impact on subsequent pregnancies, such as increased frequency of placenta previa, placental abruption, ectopic pregnancy. Also economic aspect of the problem is important.

Objective. There have been carried out comparative clinical and functional assessment, evaluation of placental morphological features of the system and the fetus in pregnant women with a uterine scar after cesarean section.

Results. We analyzed 90 women with uterine scar in age from 19 to 45 years, mean age 26.7 years, of which at 2nd pregnancy - 41.1%, from the third pregnancy - 31.1%, with 4th pregnancy - 16.7%, from the 5th pregnancy - 8.9%, with the 6th pregnancy - 2.2%. Of those VBAC - amounted to 8.9%, cesarean section with lower median laparotomy - 8.9%, with laparotomy for Pfannenstiel - 82.2%. In 76.5% of the operated women observed intraoperative expressed adhesive process. Abdominal drainage was produced in 17.6% of cases. Indications for surgery were the threat of the histopathological rupture of uterine scar in 10.8% of cases, false labor in 23.1%, heart failure 9.2%, prenatal rupture of membranes in 15.4% cases, the refusal of women giving birth vaginally in 15.4%, abruption placenta in 6.2%, placenta previa - 4.6% of cases, and others. Blood loss during VBAC was significantly lower 300 ± 30 ml ($p < 0,05$), than women with operational childbirth (610 ± 52 ml). The incidence of obstetric complications in women with VBAC is 2.3 times lower than that of women with operational delivery. Women after VBAC noted the rapid recovery of activity in the postpartum period than in women after surgical delivery. The period of hospitalization after a VBAC averaged $3,4 \pm 1$ day, and women after surgical births $6,5 \pm 1,6$ days.

Conclusions. Thus, the management of labor in women with a uterine scar by VBAC reduces the frequency of postpartum maternal complications, and the incidence of operative delivery, provides early recovery of women in the postpartum period.

PERINATAL COMPLICATIONS OF PREGNANCY SUFFERED FROM PNEUMONIA AT DIFFERENT STAGES OF GESTATION

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Relevance: the findings of infant mortality takes special place in modern medicine, in fact that 10 million newborns and children die annually from preventable causes, 20 million newborn are being born with low body mass, that has a direct link with death.

Another causative agent is the high proportion of mothers suffering from pneumonia as well as the risk of some congenital development defects in children, such as the hydrocephalus, the esophageal atresia or anoftalmia the microphthalmia that have a tendency to be elevated.

It is true that today's literature comprises little information about Course of gestation and complication towards fetus which depend on data of pregnancy and severity of pneumonia. the condition of fetoplacental system, the pathmorphological research of placenta in womens with pneumonia represents particular attention.

The aim. To study complications of fetus at pregnancy caused by pneumonia during different stages of gestation.

Materials and Methods. A retrospective analysis of 62 women's birth histories was performed. All the 62 women had bronchopneumonia in different stages of their gestation period: 18 women had pneumonia during the first trimester, 23 – during the second trimester, and 21 – during the third trimester of their pregnancy. The results were subjected to a statistical analysis study, using a software package statistical analysis to calculate the arithmetic mean (M) and standard deviation of relative values (frequency, %).

Results. Analysis of medical documentation for 2014-2015 showed that the threat of miscarriage occurred in 68.1% of pregnant women who have had pneumonia. So, pregnant women who had suffered from pneumonia developed threatened abortion - 40.7% in the I trimester, 22.2% in the II trimester, and 5.2% in the III trimester. According to ultrasound examination fetal intrauterine infection (IUI) was suspected at 27.4% of pregnant women who have had pneumonia at different stages of gestation. This complication was suspected in 18.3% of pregnant women who have had pneumonia in the I trimester, 22.9% - in the II trimester and 52.0% in the III trimester.

In pregnancy caused by pneumonia, chronic fetoplacental insufficiency (FPI) occurred at 88.0% of pregnant women. From them at 41.2%, 45.7% and 13.1% of pregnant women with pneumonia in the I, II and in the III trimester respectively.

Intrauterine fetal hypoxia was observed in 75.8% of pregnant women suffered from pneumonia, of whom 68.8% of pregnant women had been ill with pneumonia in trimester II and 88.9 % in the III trimester.

Intrauterine growth restriction (IUGR) was diagnosed at 30.4% of pregnant women with pneumonia. IUGR of fetus 1 degree occurred at 15.6%, 2 degrees - at 14.8% of pregnant women.

Conclusions. The most frequent complications of the fetus in pregnant women, after pneumonia, have been identified FPI - 62.9%, intrauterine fetal hypoxia - 45.2%, IUGR varying severity - 26.7%, IUI of fetus - 27.4%.

PRETERM BIRTH AND NEWBORNS

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Introduction. Every year, an estimated 15 million newborns are born preterm, and this number is rising. Preterm birth complications are the leading cause of death among children under 5 years of age. Three-quarters of them could be saved with current, cost-effective interventions. Across 184 countries, the rate of preterm birth ranges from 5% to 18% of children born. Almost 1 million children die each year due to complications of preterm birth. Many survivors face a lifetime of disability, including learning disabilities and visual and hearing problems. Globally, prematurity is the leading cause of death in children under the age of 5. And in almost all countries with reliable data, preterm birth rates are increasing. Inequalities in survival rates around the world are stark. In low-income settings, half of children born at or below 32 weeks die due to a lack of feasible, cost-effective care, such as warmth, breastfeeding support, and basic care for infections and breathing difficulties. In high-income countries, almost all of these newborns survived. The main causes of newborn deaths are prematurity and low-birth-weight, infections, asphyxia and birth trauma. These causes account for nearly 80% of deaths in this age group.

Purpose was to evaluate the prevalence, sex distribution and causes of neonatal mortality, as well as its risk factors, in an urban Tashkent population with access to obstetric and neonatal care.

Materials and methods. In our study area were enrolled women at 22–36 weeks' gestation in a prospective population-based cohort study that was conducted from 2013 to 2015. Physical examinations, antenatal laboratory tests and anthropometric measures were performed, and gestational age was determined by ultrasound to confirm eligibility. The women and neonates were seen again within 48 hours postpartum and at day 28 after the birth. The circumstances of the death were determined by asking the mother or family and by reviewing hospital records. Frequencies and rates were calculated, and 95% confidence intervals were determined for mortality rates. Relative risks were calculated to evaluate the associations between potential risk factors and neonatal death.

Results. Birth outcomes were ascertained for 10969 (94%) of the 11670 women enrolled. The 28-day neonatal mortality rate was 38.3 per 1000 live births. Preterm birth, Caesarean section and intrapartum complications were associated with neonatal death. Some 45% of the deaths occurred within 48 hours and 73% within the first week. The primary obstetric causes of death were preterm labor (34%) and intrapartum asphyxia (21%). Final causes were classified as immaturity-related (26%), birth asphyxia or hypoxia (26%) and infection (23%). Neither delivery in a health facility nor by health professionals was associated with fewer neonatal deaths. The Caesarean section rate was 19%. Almost all (88%) neonates who died received treatment and 75% died in the hospital.

Conclusion. In an urban population with good access to professional care, we found a high neonatal mortality rate, often due to preventable conditions. These results suggest that, to decrease neonatal mortality, improved health service quality is crucial.

PREMENSTRUAL SYNDROME AND STATE OF THE THYROID GLAND

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Background. Premenstrual syndrome (PMS) is the complex pathological symptom-complex occurring in the premenstrual days and appearing as neuro-psychic, vegeto-vascular and metabolic-endocrine disorders. According to the multiple data of a number of authors (Smetnik V.P., 1997; Ailamazyan E.L., 2005, Demmock et al, 2003, Rupkin, 2005) the frequency of PMS fluctuated in the wide limits from 20% to 55% and may appeared in the various age periods.

The purpose of our research was to study interrelation between the state of thyroid gland and signs of the premenstrual syndromes.

Material and methods. The main group of patients included 36 women with PMS at the age of 20 t 30 years who were studied the manifestations of the premenstrual syndrome. The control group of 32 patients of the same age category was without signs of PMS. All studied individuals were required filling of the questionnaire with symptoms of premenstrual syndrome for determination of the cycles of the symptom appearances. The structural changes of the thyroid gland (TG) were fixed on the Ultrasonography with use of apparatus. The TG functional state was determined in the blood by the hormones TSH, T3, T4 by IF-method.

Results. The mean age of the studied patients accounted $23 \pm 1,5$ years. The most frequent symptoms of the premenstrual syndrome were psychoemotional disorders (irritability, aggressiveness, mood changes, depression) - 74%(27)cases, menstrual function disorders (menorrhagia, irregular menstrual cycle) – 15%(5), cephalalgia disturbances were fixed in 11%(4) patients in the main group. Besides, in two patients in this group there was found galactorrhea. Structural changes of the thyroid gland (presence of nodes, diffusive enlargement) were noted in 45%(16) of studied individuals. During study of functional activity of TG there was registered lowering of the levels of thyroid hormones in 58% (20) of the main group: thyroxin(T4) $8,3 \pm 1,25$ (norm 10-25 nmol) and triiodothyronin(T3) $3,34 \pm 0,28$ (norm 4-8 nmol/l), as well as reduction of the level of thyrotropic hormone (TSH) $-3,0 \pm 0,6$ mE/l. In the patients with clinical picture of the signs of the premenstrual syndrome associated with changes of the blood serum thyroid status there were studied regular cyclic attacks of the premenstrual syndrome.

Conclusion. Thus, our studied have shown that psychoemotional disorders and menstrual function disturbances by type of menorrhagia appeared to be the most frequent signs of the premenstrual syndrome in women of the age from 20 to 30 years. The manifestations of the premenstrual syndrome associate with hypothyroid status of the blood serum and worsening of the patients state has cyclic character that indicates about hormonal disorders. Particularly, according to the literature data the manifestations of the premenstrual syndrome connected with insufficient formation of the estrogens. The thyroid gland hypofunction is the background for development of premenstrual syndrome. In this connection with purpose of prevention and treatment of the premenstrual disorders we recommend to the patients to fill the menstrual daybook for determination of the cycles of the symptom-complex of the premenstrual syndrome, regulatory consultations with specialists endocrinologists, timely treatment of the thyroid gland pathology, that will allow significant improvement of the women health.

RETROSPECTIVE ANALYSIS OF WOMEN WHICH ADMITTED TO THE TASHKENT MEDICAL ACADEMY WITH THE DIAGNOSIS THROMBOPHLEBITIS

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Tasks: 1) Learning of superficial veins thrombophlebitis which occurred after delivery

2) Learning of deeply veins thrombophlebitis which occurred after delivery

3) Doing retrospective analysis of the causes of postdelivery thrombophlebitis

Methods and resource. The overall number of women tested with the postdelivery thrombophlebitis that hospitalized to the 2nd clinic of The TMA is seven. There are approximately at age of 24-28. One of them (14,28%) is with the first delivery and the other six (81,72%) are with the second and the third delivery. On the first stage some data had been collected from the patients such as anamnesis, complaints and instrumental examinations. On the second stage the data after treatment had collected : anamnesis, complains and instrumental examination.

Results. Five (71,43%) women had suffered with the varicose disease of the legs in the anamnesis. Two (28,57%) of them had not suffered with it. Three(42,86%) patients out of seven had suffered with endometritis. three (42,86%) had high coagulogram data in admission (thrombin time >16 second, fibrinogen > 6g/l, prothrombin > 120%). Three (42,86%) patients out of seven had thrombophlebitis of vein iliofemoralis another three (42,86%) thrombophlebitis of deep veins and one (14,28%) had suffered thrombophlebitis of superficial veins. Three (42,86%) patients out of seven had body mass index higher than thirty(>30), one(14,28%) of them had body mass index higher than thirty five(>35). Two (28,57%) of patients had been put stands to vein iliofemoralis, one (14,28%) patient had thromboectomy procedure, four (57,14%) had conservative therapy.

Conclusion. The retrospective analysis of the seven patients which studied in second clinic of the Tashkent Medical Academy shows that the patients that suffered with the varicose disease and with the postdelivery endometritis would suffer with thrombophlebitis more severe. This shows us that initiating dangerous factors during the period before delivery and the pregnancy gives us to preventing the thrombophlebitis.

COMPARATIVE ASSESSMENT BIRTH OUTCOMES IN WOMEN WITH PRETERM AND PREMATURE RUPTURE OF MEMBRANES

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Relevance. There is evidence indicating a relationship ascending infection from the lower genital tract and the development of preterm and premature rupture of membranes (PPROM). One-third of women with PPRM during pregnancy there is a positive amniotic fluid culture. Studies have shown that the bacteria are able to penetrate intact fetal membranes (RCOG 2006).

The purpose of our study. Conducting clinical and laboratory analysis of pregnan-

cy, childbirth in women with preterm and premature rupture of membranes.

Tasks. To assess the qualitative and quantitative composition of the microflora of the vagina and its dynamics in women with preterm and premature rupture of membranes on the background of the prolonged dry period in the preterm and term pregnancy.

Material and methods. We examined 30 pregnant women and pregnant women enrolled in the clinic 2 TMA premature rupture of membranes (n = 16) and preterm rupture of membranes (n = 14) for the period from September to November 2015. The criteria for selection of patients for the study were the following: pregnant women and women in labor with PPRM and age of the patients was from 20 to 28 years and the average age was $24,6 \pm 4,1$ years. Methods: physical, special obstetrical, microbiological: bacterioscopy vaginal smear.

Results. The outcomes showed that administration of antimicrobial agents in the active-expectant management of pregnancy and childbirth after 18 hours of premature rupture of membranes preserves the normal flora of the vagina, without leading to an increase in the frequency of septic complications compared to the use of antimicrobials from the moment of premature rupture of membranes waters.

Our results showed that all pregnant women with premature rupture of membranes receiving antibiotics were delivered vaginally and were not operative delivery compared to women with preterm rupture of membranes, 7 (50%) of which was made cesarean section due to the long anhydrous interval and a lack of maturity of the cervix.

Conclusions. Thus, when administered in pregnant women with adequate premature rupture of membranes there are great chances to delivery vaginally, while at the preterm rupture of membranes there is a high risk (almost every second woman) operative delivery.

ANALYSIS OF COURSE AND OUTCOME OF PREGNANCY IN WOMEN WITH HYPERTENSIVE DISORDERS

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Hypertensive disorders increase the risk of adverse pregnancy outcomes for the mother and the fetus.

Objective: was to reveal course and outcome of pregnancy in women with hypertensive disorders

Methods and materials. In order to identify the frequency of occurrence was held a retrospective analysis of the course and outcome of pregnancy and labor in 2,000 women with hypertensive disorders, applied to maternity unit of TMA for 6 months period.

The results. The analysis revealed hypertensive disorders (6.4%) of pregnant women. In the structure of hypertensive disorders mild and severe preeclampsia were observed in 41.5% and 28% of pregnant women, respectively; GH - 18.4%; Chronic arterial hypertension (CAH) - 12.1%. Among the cases of chronic hypertension in pregnant women were 43.5% with a combination of mild preeclampsia and 21.7% with severe preeclampsia.

Age of patients with mild and severe preeclampsia in was $26,8 \pm 4,3$ years, with CAH - $30 \pm 8,7$ years, with hypertension induced by pregnancy - $25,2 \pm 6,7$ years. Among women with clinical manifestations of hypertensive disorders accounted for

38.6% of nulliparous and 61.4% multiparous.

Preterm delivery occurred in 14.7% of women in the period from 22 to 35 weeks of pregnancy. Physiological births were observed in 64% of women. Delivery by Caesarean section surgery was in 36% of women. Among preterm birth 50% of pregnancies ended in cesarean section, with an indication for early delivery was severe preeclampsia. Fetal death was observed in 1.5% of pregnant women. The average weight of children born was $2873 \pm 890,3$ grams.

Conclusions. Hypertensive syndrome at birth in many cases is an indication for abdominal delivery, increasing the statistical measure of a caesarean section. In order to reduce operative delivery should be carried out timely prevention of hypertensive disorders in pregnancy.

NURSING PROSESS IN THE INTRAUTERINE INFECTION

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Objective and task. To study peculiarities manifestation of intrauterine infection in newborn, childcare, exercise of nursing interventions.

Material. We from 5- Septemberto25- desember, 2015y, examined a total of 25 patients with intrauterine infection in TMA 1 clinic, department children's pulmonologiyof these, 1 to 6 months- 12children, 8 to 12- months- 13 children.

The urgency of the problem: intrauterine infection is caused not only significant peri- and postnatal losses, but the fact that children who had severe congenital infection, very often develop serious health problems, often leading to disability and reduced quality of life in general.

There are the following stages of the nursing process:

1. The examination of the patient;
2. Diagnosis of his condition (the identification of problems and formulation of nursing diagnosis);

There are three types of nursing diagnosis (the problem of patients)

3. Primary problems that need urgent help:

Disorders of respiratory function;

Cardiovascular defect ;

High body temperature in the first days of life;

4. Interval problems that do not require emergency care:

Hepatosplenomegaly (enlargement of the liver and spleen);

Early jaundice;a rash of various nature;

Neurological disorders;

5. Secondary problems: inflammation (e.g., conjunctivitis) and degenerative (e.g., atrophy of the optic nerve) eye diseases.

The third stage of the nursing process- care planning. Planning assistance aimed at meeting the needs of disturbed;

Short-term objectives: Recovery of the cardiovascular and respiratory system, Decrease of body temperature.

Long - term objectives: Recovery of the liver and spleen, jaundice elimination, creating peace of mind for the child. All planned work in caring for patients should be recorded in a leaflet nursing.

Nurses are the largest category of health workers. They advocate a physician assistant in the medical institutions, medical devices and perform exercises nursing

process. The route of transmission - vertical, from mother to fetus. The result can become infected miscarriage, congenital malformations or acute infectious process in the newborn.

The fourth stage of nursing process- implementation of the plan of nursing interventions.

The last stage of the nursing process, assessment of the results obtained.

Results. The Results study. The Whole is examined 26 sick children. Of them with 1 before 11 months mikoplazm infection - 5, xlamidey infection - 4, beside 3-h infection cytomegalovirus infection, virus simple herpis - beside 5 sick children. Of them beside 9 children of intrauterine infection are not revealed.

Conclusion and deduction. The importance given to the diagnosis of future mother for diseases, sexually transmitted diseases.

CONDITION OF FETOPLACENTAL SYSTEM AFTER THE CORRECTION IN PREGNANT WOMEN WITH ABO CONFLICT

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When isoserological blood incompatibility of mother and fetus often violate the maturation of the placenta, and issue of the role of the placental barrier in the development of immunological conflict by ABO system still remains a controversial. Developed chronic hypoxic conditions of fetoplacental complex due to immunological incompatibility, lead to a stable secondary placental insufficiency syndrome.

Use of the drug "Kokarnit" at this pathology in modern obstetrics is relevant. Complex drug "Kokarnit" - is combined, which includes a rationally selected complex of metabolics and vitamins.

In this regard, the aim of the study was to estimate the effect of the drug "Kokarnit" in pregnant women with ABO conflict with a high risk to the FPI.

Materials and Methods: One of the major prognostic criteria of FPI is a violation of utero-placental and fetal hemodynamics. To accomplish this goal according to Doppler study of the utero-placental and fetal blood flow at 16-28 weeks of gestation there were selected 60 pregnant women with ABO conflict and high risk for the development of FPI for further observations in the course of pregnancy and childbirth. Depending on the method of prophylactic treatment of FPI, pregnant women were divided into 2 groups. I group was consisted from 30 pregnant women, who had drug "Kokarnit" like preventive treatment of FPI. II group was consisted of 30 women at risk in the FPI and untreated with metabolic therapy. The course of treatment was Kokarnit 2.0 ml as intramuscular injection for 9 days. No significant differences in age, parity, a history of pregnant women in groups I and II have been identified.

Results and Discussion. Of the 30 pregnant women with ABO conflict, who received "Kokarnit" in the complex the traditional treatment, at 9 (29.0%) was revealed impaired blood flow of the utero-placental and fetal blood flow, babies were born with a low Apgar score at 5 minutes - 2 (6.4%), and at 7 (22.6%) newborns Apgar score at 5 minutes was more than 7 points. In the group of pregnant women without lesions of the fetoplacental blood flow from 22 (71.0%) in 2 (6.4%) cases were born infants with Apgar score below 7 at 5 minutes, and in 20 (64.5%) cases

- with Apgar score above 7 points for 5 minutes.

Of the 7 women with impaired fetoplacental circulation 1 degree, 2 (6.4%) children were born with a low Apgar score at 5 minutes, in 5 (16.2%) cases children were born with Apgar score at 5 minutes above 7 points. With a violation of utero-placental blood flow II degree - 2 (6.4%), in all cases newborns were born with Apgar score above 7 points at 5 minutes.

From dopplerometric data we revealed that after the course of complex treatment with "Kokarnit", the violation of utero-placental and fetal blood flow decreased by 32.3%, of which a violation of the utero-placental and fetal blood flow I degree decreased by 1.4 times, II degree in 4.5 times compared with the group before the treatment. No violations of the utero-placental and fetal blood flow in 3 group after treatment were observed in 32.3% more often than in a group before treatment.

Inclusion of "Kokarnit" into a comprehensive drug therapy prevented and treated fetal hypoxia, improved the condition of fetoplacental complex in pregnant women with ABO conflict, which was proven by increased Apgar scores and the absence of heavy hypoxic lesions of fetus.

CLINICAL AND DIAGNOSTIC CRITERIAS OF OSTEOPENIC SYNDROME IN CHILDREN WITH CHRONIC BRONCHITIS

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Objective. In recent years, increased the list of clinical conditions accompanied by bone loss, resulting from various causes and pathogenic mechanisms. At the same time little attention paid to the study of osteopenic syndrome in children with chronic bronchitis. We aimed to investigate the clinical and diagnostic criterias of osteopenic syndrome in children with chronic bronchitis.

Material and methods. Ultrasound densitometry was performed in 52 children at the age 5-16 years old with chronic pneumonia and chronic bronchitis. Bone mineral density was measured by densitometry of the calcaneus on the unit «DPX-MD +», equipped with a children's program. (South Korea). Determines the index of bone strength STI (stiffness index), expressed as a percentage. The criterion was considered osteopenia decrease in bone mineral density from - 1 to - 2.5 SD on T criterion, and a decrease -2.5 SD were classified as osteoporosis.

Results. The results of ultrasound osteometry patients with chronic bronchitis showed a decrease in bone mineral density (BMD - Bone Mineral Density) in 46 (88.4%) children with chronic bronchitis. The frequency of osteopenia was detected in 28 (61%) children with chronic bronchitis, 18 patients - osteoporosis (39%). So, you have received evidence of a significant negative impact on chronic lung disease in bone mineral density, the cause of which is likely associated with chronic hypoxia, adversely affecting the harmonious development. In 18 (39%) patients with diagnosed osteoporosis differed severe underlying disease, early onset of clinical symptoms, frequent exacerbations of chronic bronchopulmonary process resistant hypoxemia and severe impaired patency of the bronchi. Clinical manifestations of osteopenic syndrome in 28 (61%) of the children surveyed were characterized by complaints of pain in the back and legs. On bone mineral density, sick children with

chronic bronchitis, influenced clinical types, severity and duration of the disease. The study showed that for all clinical cases of bronchitis, a decrease in bone mineral density. However, we have seen varying degrees of severity. Low or very low indices of bone strength observed in patients with obstructive type HB. When studying the effect of duration of disease on bone mineral density of the interrelation between them. So when disease duration of more than 9 years in the majority (53%) patients had osteoporosis, and children up to 5 years from the onset of the disease in 8% of patients. Given the assumption of the presence of age and gender characteristics of bone metabolism in children, we analyzed age-related changes densitometric indicators by gender. We observed a marked reduction of bone mineral density with a peak at 11-12 years for girls ($p < 0.001$) and in the same peak with 13-15 years 15 years in males ($p < 0.001$) compared to other age groups.

Conclusion. Thus, the identified patterns reduce bone mineralization with a peak at 11-12 years for girls and 13-15 years in boys dictates the need for primary prevention of osteoporosis in adults.

DIAGNOSTIC VALUE OF PEAK FLOW IN ASTHMA IN CHILDREN

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In recent years, clinicians increasingly have to meet this condition as bronchial obstruction. Being a relatively common pathological condition in all age groups, the broncho-obstructive syndrome at an early age was recorded in 10-30% of children, (at least once in life bronchospasm occurs every 4th child up to 3 years). Preventing the formation of recurrent obstructive bronchitis and its transformation in bronchial asthma is a challenge for each General practitioner. The diagnosis of bronchial asthma in children and adolescents sometimes cause doctors difficulties resulting in errors. Some General practitioners believe that asthma be diagnosed only in the hospital, the children do not receive timely basic treatment, the disease progresses, severe complications develop, there comes a disability. The frequency of erroneous diagnoses in bronchial asthma in children ranges from 5 to 20%.

Material and methods. We examined 214 children aged 7-12 years in early childhood often was ill obstructive bronchitis. The plan of examination of children included a thorough collection of anamnestic data, retrospective analysis of medical documentation of disease course, assessment of clinical manifestations in the dynamics. The degree of narrowing of the Airways was determined using peak flow metric method.

The results of the study. The study was conducted in two stages. In the first stage, carried out prospective follow-up survey of 214 children from the clinic who suffered from repeated obstructive bronchitis at an early age and at the time of the survey was considered practically healthy. After a thorough examination all the children were allocated into three groups: group 1 - 33 children with atopic bronchial asthma; group 2 - 98 children with hyper valium respiratory tract in the absence of symptoms of bronchial obstruction; group 3 - 83 healthy children. All children have three times performed the below-mentioned. The test is performed in standing po-

sition. The child needs to explain that he needs to get to the lungs more air and then exhale the air as quickly as possible. A forced exhalation is performed three times, and the maximum value is selected as the source. When conducting peak flow, we chose the highest result and recorded it. The data obtained were compared with the appropriate values relevant to the age, gender and growth investigated or individual the best value of peak expiratory flow. Ideally, the below-mentioned should be done in the morning, immediately after rising from bed, when the value of peak flow close to the worst values, and be the last procedure in the evening, that is, when values reached their best values. In order to help the doctor, the patient and his parents to control the course of bronchial asthma developed special zones (green, yellow, red). In accordance with these areas, the doctor sets the lower boundary value of the peak flow equal to 80 and 60% from the proper values of peak expiratory flow.

Summary and conclusions. Children with recurring episodes of wheezing history in the dynamics necessary to carry out the below-mentioned, to detect the degree of narrowing of the Airways. Measurement of peak expiratory flow in children of school age in clinic, hospitals, home serves as an objective parameter to assess the degree of bronchial obstruction and making treatment recommendations.

CONDITION OF CELLULAR AND HUMORAL IMMUNITY AT THE NEPHROTIC SYNDROME AT CHILDREN AGAINST ATOPIC DERMATITIS

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Introduction. In recent years it is known that there is a group of patients at whom development of a nephrotic syndrome happens in connection with existence of atopic reactions to anti-genes which reason depends on a mutation of the genes defining a condition of proteins of a slot-hole membrane. And in some cases features of alleles of these genes can define predisposition to development of a nephrotic syndrome.

Purpose of research. To study a condition of cellular immunity at the GN nephrotic form at children against the atopic dermatitis (AD).

Materials and methods of research. Under our supervision there were 42 children aged from the 3rd till 10 years, the stradayuvshchikh a nephrotic form of a glomerulonefrit (GN). From them: 21-GN against the HELL (1 group), 21-GN without HELL (2 group). Studied a condition of cellular immunity. The control group was made by 25 almost healthy children of the same age.

Research results. By results of researches, at children reduction of daily diuresis, increase of a daily proteinuria, eritrotsituriya, leykotsituriya, and also increase of the content of urea and creatinine, ($P < 0,001$), a hypercholesterolemia, increase in triglyceride in blood ($P < 0,001$) which were more expressed at children of 1 group, in comparison with 2 group is revealed. Results of immunological researches showed that in comparison with 2 group, at children of 1 group suffering from GN against the HELL in the period of an aggravation of GN it was noted more expressed decrease in percentage of T - lymphocytes (SD3), T-supressorov (SD8), T-helperov (SD4), the fagotsitarny activity of neutrophils (FAN) ($P < 0,001-0,01$), increase in number of V-lymphocytes

(SD19), increase of the content in serum of blood of immunoglobulin E (IgE), the circulating immune complexes (CIC) ($P < 0,001$).

Conclusion. At children at a nephrotic form of a glomerulonephritis against atopic dermatitis deficiency of cellular and humoral links of immunity which remain and in the remission period is noted.

STUDY OF RISK FACTORS FOR PRETERM BIRTH

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Background. The frequency of preterm delivery currently varies from 7 to 10% of all births. It is known that premature birth is polyetiological disease. The main reasons for the premature termination of pregnancy, according to local and foreign authors are social, infectious, endocrine factors and chronic diseases. In this regard, the timely diagnosis of the causes and prevention of preterm birth at this time are particularly relevant.

Objective: The purpose of the study was to identify risk factors for premature birth including many diverse reasons leading to the premature birth.

Methods: the study was conducted in the 2nd Clinic of Tashkent Medical Academy during the period from 2015 to 2016. Our studies included 20 pregnant women and their history cases.

Results: the average age of the studied women were - 27.4. We have found that 6 (30%) - were urban residents; 14 (70%) - the villagers. Among all women surveyed primigravidas - 4 (20%), multiparous - 16 (80%). Of these multiple pregnancies had 6 women (30%). Surveyed women had a history of threatening spontaneous miscarriage - 5, early spontaneous miscarriage - 2, unprogressed pregnancy - 3, threatening preterm labor - 4, premature birth-6.

According disease entities encountered in women: infection of urinary tract - 10 (50%); acute respiratory infection - 14 (70%); Anemia - 11 (55%) of pregnant women

Conclusions: our research shows that the most influential factors for preterm birth: complicated obstetrical anamnesis, infection of urinary tract; acute respiratory infection, anemia during this pregnancy.

NURSING PROCESS IN EXUDATIVE-CATARRHAL DIATHESIS IN CHILDREN

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Introduction. In recent decades, the incidence of atopic diseases in children in industrialized countries has increased by 30-50%. It is the most common anomaly of the constitution: more than 80% of the infants observed any manifestation of exudative-catarrhal diathesis. It may begin in infant from the first days of life. The main reason for the manifestation of exudative-catarrhal diathesis is - poor diet (violation of terms of introduction of complementary foods, feeding baby food that does not meet the age, replacement feeding). What matters is the abuse of highly allergenic foods for women during pregnancy and lactation.

Methods of research. We carried out a clinical examination and implementation

of nursing care among 6 children with exudative-catarrhal diathesis. Age of children from 1 month to 3 years. Of these four boys (60%) 2 girls (40%). It was collected from medical history, examination and exhibited nursing care:

To care for the skin and hair of the child need to use a special children's medical cosmetics. It is not necessary to buy expensive brand, but it has to be exactly Cosmetics (line "Emolium", "Lipikar" type Bepanten creams, Skin-Cap, Topikrem). Remedy gently moisturize the skin without causing irritation and allergic reactions.

Results of the study. Nursing process in exudative-catarrhal diathesis consisted of the following components:

1. Nursing diagnosis: skin rash, irritation, itching, restlessness, decreased appetite, dandruff.

2. The plan of nursing care:

short-term goal: to eliminate the itchy skin

long-term goal: to prevent secondary suppuration

3. Plan of nursing interventions: to inform parents about the disease and complications, eliminate the cause and significant allergen in time to carry out the prescribing physician, monitoring of compliance with the diet, use only clothes made of natural staff do not give the baby soft toy, not to have domestic animals ,.

Nursing record was carried out after children, where was noted changes in the baby skin, which causes concern for children and increases the risk of secondary infection , from the nurse requires careful skin care.

Discussion. Studies have shown that well-organized nursing at the exudative-catarrhal diathesis promotes rapid recovery. The skin of children have high absorbability and local application of hormonal ointments at this age is not desirable. But in some cases diathesis realized in nature allergic diseases: atopic dermatitis, allergic rhinitis, allergic bronchitis, bronchial asthma and others.

Conclusions: 1. To improve the condition of children with exudative-catarrhal diathesis need to organize the nursing process

2. For the treatment of exudative catarrhal diathesis need to interview mothers on a diet. 3. It is necessary to ensure proper nutrition.

4. Care and timely treatment of symptoms appearing.

COMPLICATIONS OF PREGNANCY INDUCED BY BRONCHOPNEUMONIA

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Background. Bronchopneumonia is one of the most dangerous diseases during pregnancy. According to statistics during the last 7-8 years in Uzbekistan occurrence of this pathology gets high rates, especially in pregnancy. The actuality is also the widespread complications because of bronchopneumonia.

The aim: to study complications of pregnancy caused by bronchopneumonia during different stages of gestation.

Materials and Methods. A retrospective analysis of 62 women's history diseases was performed. All the 62 women had bronchopneumonia in different stages of their gestation period: 18 women had pneumonia during the first trimester, 23 -

during the second trimester, and 21 – during the third trimester of their pregnancy. The results were subjected to a statistical analysis study, using a software package statistical analysis to calculate the arithmetic mean (M) and standard deviation of relative values (frequency, %).

Research Results. The study of labor histories of women contracting bronchopneumonia in different stages of their pregnancy has shown that the incidence of complications is associated with gestational age. When pregnant women suffered from pneumonia, complications totaled 30.3%, 25.6%, and 20.5% during the first, second and third trimesters respectively. In the group of pregnant women with bronchopneumonia, 55.5% of pregnant women developed mild preeclampsia. The percentage made up 68.8% for the first trimester and 66.6% for the second trimester. A high 25.9% of pregnant women who had suffered from bronchopneumonia developed severe preeclampsia: 29.3% in the first trimester, 34.3% in the second trimester, and 25.7% in the third trimester ($p < 0.05$). UTI (urinary tract infection) was found in 19.6% of pregnant women who had had pneumonia in different stages of their gestation period. Meanwhile, 6.67% of pregnant women suffered from pneumonia of varying severity in the second trimester ($p < 0,05$).

The threat of abortion occurred in 68.1% of pregnant women who had had pneumonia. So, 40.7% of pregnant women who had had pneumonia in the first trimester developed threatened abortion. The figures for the second trimester and the third trimester stood at 22.2% as opposed to 5.2% of pregnant women.

Thus, we can conclude that there is a significant association between the frequency of complications and the gestation trimester in which a pregnant woman suffered from bronchopneumonia.

Conclusion. The most frequent complications in pregnancy after pneumonia were hypertensive disorders - 81.4%, UTI gestational pyelonephritis - 19.6%, and the threat of miscarriage – 68.1%.

THE SIGNIFICANCE OF HAEMOPHILIC BACTERIUM TO THE PNEUMONIA OF CHILDREN

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Importance. Recently the rate of newborns' pneumonia and bronchitis caused by the B type of Haemophilus Influanzae (HIB) has increased significantly. The HIB occurs only in humankind, especially in children. The bias to this infection of children in -5 year olds age category is considered the main reason of this condition. Unfortunately, officially registration of HIB is not devised in Uzbekistan. First of all, registration and etiologically affirmation of HIB is impossible without internal diagnostic test system. Therefore, our country is regarded as the region where HIB spread widely.

Purpose. To research the properties immunological condition with clinical course of pneumonia in children who received "HIB" vaccine and experienced this disease without jab.

Material and research methods. Research conducted at the department of GP pediatrics of the Tashkent Medical Academy. We involved 32 children at the age

from 3 months to 6 years with their parents' permission. 18 participants with focal pneumonia and 14 participant with bronchopneumonia. There were carried out general clinic investigations such as measuring weight, growth, and general blood analysis and general urinary analysis; some instrumental examinations – ultrasonic scanning, x-ray of nose and paranasal sinuses, respiratory function (until 5 year olds); and measuring total amount of IgE and immunological examination. As well as this, we have considered with several narrow specialists: allergist, ENT, immunologist (determined the level of immunoglobulins A, M, G and Cytokine). Determining the main classes of immunoglobulins, cytokines, cortisol, the levels of antibodies for HIB antigens, clinic and immunological experiments is conducted at the CISL of the Tashkent Medical Academy.

Conclusion: 1. Vaccination wit “HIB” jab provides easy clinical course of pneumonia and helps avoid from different complications.

2. Vaccination with “HIB” jab does not provoke recidivation of chronic diseases and passes with the exception of complications at early postvaccinal period.

FEFTURES OF A CURRENT COMMUNITY – ACQUIRED PNEUMONIA IN CHILDREN WITH CITOMEGALOVIRUSINFECTION

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Congenital cytomegalovirus infection (CMV) in most cases subclinical. 80% of children with severe clinical manifestations, and 5-17% of children in the asymptomatic forms of the disease in the future have a variety of somatic and neuropsychiatry developmental defects. According to the literature in 5 - 15% of children develop latent CMV syndrome ("unmotivated" fever, weight loss, weakness, anorexia, rarely - night sweats, arthralgia, myalgia) (Shabalov NP, 2002; K. Friese, 2003).

Aim. To determine the outcome of congenital CMV in young children and the impact on the course of CMV pneumonia.

Materials and Methods. A comprehensive survey of 47 patients an early age, who were hospitalized in the pulmonary department first clinic TMA. A study group comprised 27 children with clinical and laboratory signs of congenital CMV infection. The comparison group consisted of 20 children of similar age and diagnosis with negative data on CMV. Confirmation of CMV infection was performed by PCR of blood. All children was conducted a comprehensive survey, including: laboratory tests (complete blood count, urinalysis, blood chemistry), ultrasound of the thymus gland, abdominal organs, brain, neurologist inspection and, if necessary, a medical geneticist.

Results. The mean age of patients with congenital CMV was 6 ± 3 months. Of these, 15 (55.5%) - the boys and 12 (44.4%) - the girls. As a result of a comprehensive survey of the main group of children we identified the major organ manifestations of CMV infection: CNS - 37%, the defeat of the hepatobiliary system - 21%, the defeat of the gastrointestinal tract - 11%; eye disease - 2%. The children of the comparison group were also changes in the other organs and systems, but less than in the study group: CNS - 15%, the defeat of the hepatobiliary system - 8%, the defeat

of the gastrointestinal tract - 5%. All children with CNS had psychomotor retardation. Pneumonia in children of the main group proceeded more often with complications than children of the comparison group ($p < 0,005$). The major complications in children with CMV infection were neurotoxicosis degree I-II (74%), obstructive syndrome (58%). The children of the main group (28%) had pneumonia, prolonged duration. In the treatment of children in the first main group of days added antiviral in combination with antibiotics. Children with CNS also received treatment appointed a neurologist.

Conclusion. Thus, congenital CMV may have long-term consequences in the form of CNS and other organs, which often leads to disability of the child population. Pneumonia in children with CMV infection often occurs with complications, and has a penchant for prolonged duration.

AN ANALYSIS OF PREGNANCY AND DELIVERY IN PREGNANT WOMEN WITH ANEMIA

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Background. In solution of the problem the reduction of maternal and prenatal morbidity and mortality are particularly important early diagnosis, prognosis and selection of rational tactics of various complications of pregnancy and childbirth. One of the most serious and common risk factors for the mother and newborn during pregnancy, childbirth and postpartum is anemia of pregnant (MM Shechtman 2001; Butler LI 2000). According to WHO, anemia of pregnant women has the highest rate among all the complications of pregnancy and occurs in 20-80% of cases (MM Shechtman, 2001, L. Yaremchuk, 2000, Losev M. et al., 2000). It is now generally recognized that the anemia of pregnant women is often the pathological background on which develops a variety of complications of pregnancy, childbirth and the postpartum period. The frequency of premature labors on the background of anemia is 14-22%. (Shechtman MM 2001; Butler LI 2000)

Objective. An analysis of pregnancy and delivery in pregnant women with anemia depending on the severity.

Methods. We examined 210 pregnant women at the II Clinic of the Tashkent Medical Academy. All pregnant conducted: anamnestic study, general examination, clinical - laboratory tests. Pregnant women were divided into 2 groups: the main group - pregnant women with anemia of varying severity ($n = 180$) and control without anemia ($n = 20$). The main group was divided into 3 subgroups according to the degree of anemia severity: 1st degree - 94; 2nd degree - 77; 3rd degree - 9 pregnant.

Results. The analysis found that acute respiratory infections (ARI) without fever occurred in 116 (64.4%) of pregnant women from the main group and 28 (93.3%) of the control group. ARI with fever occurred in the same number of women of both groups (10%). Urogenital infection occurred in women with anemia I and II in the same subgroup of 11 (47.8%) and only 2 (6.67%) women suffered a urinary tract infection during pregnancy without anemia. Women suffered from vomiting of pregnant in 53 (64.6%) cases of women with anemia I degree, 26 (31.7%) of II degree and 3 (3.65%) women with anemia of III degree, whereas in the control group - 13 (43,

3%). Complication during pregnancy as a threat of spontaneous miscarriage was observed in pregnant women with anemia: in the I subgroup – 52.1% (49), in II - 80.5% (62), and group III - 88.9% (8). In addition, three women with severe anemia suffered from threatening spontaneous miscarriage 2 times more than other pregnant women with anemia. In the control group these complications consisted of 30% (9). Threat of premature birth occurred in 41 (43.6%) of women with anemia I degree, in 51 (66.2%) cases with grade II, and in 7 (77.8%) cases of women with anemia of III degree, and in 7 (23.3%) cases of the control group. Hypertensive condition during pregnancy was observed in 19 pregnant women with anemia: in I subgroup - 11 (57.9%), in II - 7 (36.8%) and in the group III - 1 (5.3%). Hypertensive condition during pregnancy was observed in 4 women out of 30 women without anemia.

Conclusions. Thus every 2nd woman suffered from vomiting of pregnant with mild anemia. threatened spontaneous miscarriage and threatening premature birth were more often observed in women with anemia of 3rd degree, with almost the same number of cases.

PARITY AND INCIDENCE OF ANEMIA IN PREGNANT WOMAN IN THE COMMUNITY

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Background. Anemia as a complication of pregnancy is a common pathology in our society. According to recent data, the incidence of anemia among pregnant women ranges from 20 to 80% and is quite high even in economically developed countries. Anemia occurs in 67.8% of pregnant women in rural areas and 34.5% in urban residents in the region of Central Asia. As pregnancy progresses the detection of anemia increases from 34.5% to 54.3%. In Uzbekistan, the frequency of anemia among pregnant women reaches 95-97%, ranking the first place among genital diseases (2002).

Objective. To identify the frequency and severity of anemia in pregnant women, depending on their residence and parity.

Methods. We examined 170 pregnant women in the II Clinic of the Tashkent Medical Academy. All pregnant conducted: anamnestic study, general examination, clinical tests. Pregnant women were divided into 2 groups: the main group - pregnant women with anemia of varying severity, (n = 150) and control group without anemia (n = 20). Pregnant women of the main group were divided into 3 subgroups according to the degree of anemia severity: I degree - 73; II degree - 70; III degree - 7 pregnant.

Results. In the study group 48% of the women were from rural areas and 52% of women were living in the city, while in the control group, 40 and 60% respectively. Analyzing the place of residence of women of the main and control group, it was found that moderate anemia occurs in 27.3% and severe anemia in 2.7% in women of the rural population and in 19.3 and 2% of pregnant who live in a city respectively. Consequently, residents of the village 1.4 times more suffer from moderate and severe anemia than in the city. When analyzing the parity of women, it was revealed that primigravidas and multiparous had anemia in almost the same amount. Multiparous was almost every 11th woman (8.76%) in our study. The main group was made up from 45.3% of primiparous, 46% multiparous (up to 3 labors) and 8.7% multiparous (more than 3 labors). In the control group there were 65%, 25% and

10% respectively. However, the analysis of the subgroups of the main group reveals that multiparous suffered mostly from anemia of the 2nd degree (6.7%). Multiparous (up to 3 labors) is slightly more prone to suffer from anemia of 1st degree, but 2 times more often suffered from severe anemia (1.3 compared to 2.7%).

Conclusions. Residents of the rural areas are insignificantly more likely to suffer from moderate and severe anemia. Anemia of 1st and 2nd degree are found in primiparous and multiparous in equal proportions (45.3 and 46%), while severe anemia was observed 2 times more often in multiparous (up to 3 labors) than primiparous and 4 times more often - in multiparous (more than 3 labors).

ECHOCARDIOGRAPHIC FEATURES OF INTRACARDIAC HEMODYNAMICS INDEXES IN FETUS AT III TRIMESTER OF PREGNANCY ON THE BACKGROUND OF PLACENTOFETAL INSUFFICIENCY IN WOMEN WITH POST MYOCARDITIC CARDIOSCLEROSIS.

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The aim. To study the features of echocardiographic changes of parameters of intracardiac hemodynamic of the fetus on the background of placental insufficiency in III trimester of gestation in pregnant women with post myocarditic cardio sclerosis (PMCS).

Materials and methods. The work was performed on the base of maternity house of the 2 clinic, TMA and JC «RSRPMCA and G» from 2013 to 2015. 118 pregnant women with PMCS at III trimester of gestation were selected to research and they were distributed on subgroups considering the level of placentofetal insufficiency (PFI), which was detected in Dopplerometry: I group consisted of 22 pregnant women with PMCS without PFI, in II group - 52 pregnant women with PMCS who was detected compensated form of PFI, 44 pregnant women with sub- and decompensated form of PFI were in III group. Estimation the state of intracardiac hemodynamics in fetus by echocardiography (EchoCG) at the department of functional diagnostics of the clinic of Tashkent Pediatric Institute.

Results. Results of Doppler EchoCG investigation of parameters of the left part of the heart of fetus in I and II studied groups showed that correspondence with physiologic norms of pregnancy of the size of the heart and indexes of intracardiac hemodynamics in stable rate of cardiac contractions - RCC - 144-150 beat/min. In II group, by comparing to I, statistical difference in sizes of left part of fetus's heart were not taken. As distinct from II, in III studied group showed left ventricle (LV), (fraction of emission (FE) and fraction of beat (FB)) were decreased in stable rate of cardiac contractions - RCC - 144-150 beat/min. Comparative analysis of received results of EchoCG investigations of left ventricle of the heart of fetus between I and III groups of women showed the most statistical significant changes in EchoCG parameters on the background of PMCS in III group of pregnant women, which have been concluded the following: in III group of women end systolic size (ESS) ($12,6 \pm 0,49 \text{ mm}^3$) and enddiastolic size (EDS) ($3,826 \pm 0,15 \text{ mm}^3$) LV were significantly increased to 35 and 42% respectively. And also the increase of index of

endsystolic volume (ESV) was noted LV ($0,837\pm 0,05\text{mm}^3$) and increase the thickness of posterior wall of LV ($3,3\pm 0,4$ mm) in 2 and 1,2 times respectively. It was typical the reliable decrease of FE ($71,8\pm 3,04\%$) to 45% and FB of LV ($37,2\pm 5,1\%$) to 30%. The size of ascending part of aorta of the fetus was reliably increased to 38% ($4,2\pm 0,8$ mm) ($p>0,01$).

Conclusion. Thus, the course of gestation on the background of sub- and decompensated PFI in PMCS complicates with cardiac pathology of the fetus, expressing with disorders of sizes and functional parameters of the left part of fetus's heart. And the same time the features of echocardiographic parameters of left part of the heart at III trimester in these contingent of pregnant women is characterized by reliable decreasing of contractile function of LV (decrease of FE and FB to 45 and 30% respectively), signs of hypertrophy of LV (thickness of posterior walls to 32%), dysfunction of hemodynamics of LV (increase of ESS to 35%), ESV to 42%) and EDV (to 88%).

PROSTAGLANDIN E2 IMPACT ON LACTATION FUNCTION IN THE POSTPARTUM PERIOD IN WOMEN WITH ANEMIA

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Relevance. Breastfeeding is a natural and healthy food for infants, which is conducive to their normal growth and development, but also reduces the frequency and severity of infectious diseases, thereby reducing morbidity and infant mortality. Violation of the lactational function leads to an increase in maternal and infant morbidity. Various pathological processes, complicating pregnancy, childbirth and the postpartum period is a predisposing factor for the development hypogalacty (HG). One of such complications include anemia. The degree of severity of anemia during pregnancy correlates with the severity of the hypogalacty in postpartum period. In experiments on laboratory animals revealed a relationship between increased levels of prostaglandins in plasma and development of hypogalacty.

The aim of this study was to evaluate the effect of prostaglandin E2 on lactation function in postpartum women with moderate anemia in the postpartum period.

Materials and methods. We examined 28 women during pregnancy, childbirth and postpartum anemia II degree, who were divided into 2 groups. Group I (12) pregnant women, with the use of intravaginal tablets Glandin E2 indicated. Group II (16) without the use of Glandin E2. The average age of the patients was $28,3 \pm 0,3$ years. The clinical laboratory tests before delivery to avoid extragenital diseases, as well as a certain level of prolactin in the blood postpartum period.

The results of this study showed, group II postpartum women found low levels of prolactin in the blood of 68.7% (11), and at 33.3% (4) in group I. Accordingly, at the HG group I was 33.3% and 66.6% (8) normogalacty, group II HG 68.7% and 31.3% (5) normogalacty.

Thus, the use of prostaglandin E2 (E2 Glandin) for the preparation of the birth canal and induction of labor has a stimulating effect on the increase in the level of prolactin in the blood, respectively, affects the formation of lactation function and promotes normogalacty.

INDUCTION OF LABOR CONDUCTING PROSTAGLANDIN E2 IN GROUPS WITH MULTIPARIOUS IN ANAMNESIS AFTER A PRENATAL RUPTURE OF FETAL MEMBRANCES

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A characteristic feature of modern obstetrics is to increase the number of pregnant young and older age groups with chronic extragenital diseases and obstetric complications. Increased incidence of operative delivery. Important and it is preferable to timely and careful delivery vaginally.

The purpose of research is to reveal a safety and efficiency preparation Glandin E2 in groups with various number of childbirth in the anamnesis after a prenatal rupture of fetal membranes.

Materials and methods. Compared results of induction of delivery to use prostaglandin E2 vaginal tablets to patients with the prenatal rupture of fetal membranes in groups with multiparous in the anamnesis. We used for induction of labor for cervical ripening the preparation Glandin E2 tablet (3 mg) introduced only intravaginally. The studies were conducted in the department of Tashkent Medical Academy. Indications for use Glandin E2 were: prolonged pregnancy with a prenatal rupture of fetal membrane. From September 2015 to December 2015 we have observed 32 pregnant women aged 19 to 38 years. The 24 women were primiparous and 8 of them – multiparous. Glandin E2 was introduced into the posterior vaginal fornix at 24.00 in the night, including all contraindications. Further deliveries were managed according to clinical protocols. In the absence IV degree of a maturity of a cervix uterus, the tablet administered repeatedly at 6.00 in the morning, according to the instruction. The maximum daily dose was – 2 tablets (6 mg).

Results. Generic activities developed within the 1 st day after introduction of a tablet Glandin E2 on 18 women that made 56.0%. After 1-2 days on 9 women were began birth activity. In other cases further induction of labor was required. The overall effectiveness of the drug was 84.4%. In 30 (93.8%) were occurred physiological childbirth. The condition of newborns is estimated at 7 – 8 points by Apgar scale. In 2 women birth was finished by operation Caesarean section in due to basin head discrepancy and fetal distress.

There were no statistically significant distinctions between two groups (quantity of delivery in anamnesis 0, number of labor in anamnesis 1-4) at rates increase in birth, Cesarean section, prescription of intensive neonatal care or a conservative estimate by scale Apgar. There were not serious complications of induction of labor, such as infection, hyperstimulation of a uterus, or a rupture.

Conclusion. Thus, cervical ripening and induction of labor by prostaglandins in pregnant women with a prenatal rupture of fetal membranes is safe and effective method, even in the multiparous women.

ASSESSMENT OF HISTOLOGICAL STUDIES WITH DYSFUNCTIONAL METRORRHAGIA IN PREMENOPAUSAL PERIOD OF WOMEN

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Relevance. It is known that 45-55 ages are related to premenopausal period of women. This age group reaches a peak of professional and social activities, however, health status is not always possible to fulfil these activities. Especially, this is actual for women who suffer from recurrent hyperplastic processes of endometrial tissue, which reduce the quality of life of women and require significant expenditures on conservative treatment. Despite some successes, the problem of diagnosis and treatment of premenopausal disorders, continue to be an urgent problem in gynaecology, considering their development in 29- 56% of women in the pre- and premenopausal periods.

Purpose: to examine a comparative assessment of the histological results of recurrent dysfunctional metrorrhagia of women applied in the II clinic TMA.

Materials and Methods. We examined 40 women complained of recurrent dysfunctional uterine bleeding in gynecology department of I and II clinic of TMA. Patients were divided into 2 homogeneous groups. Study group was 20 women in premenopausal period, at the average age of 48. Whereas control group was 20 women of reproductive age, the average age of 38. Histological examination was carried out with traditional method.

Results. The histological study revealed that women of study group glandular endometrial hyperplasia occurs in 25% of women, glandular endometrial hyperplasia combined with uterine cancer - 15% glandular endometrial hyperplasia with polypoid - 15%, glandular-cystic hyperplasia of the endometrium - 15% , endometritis -15%, endometrial hypoplasia -15%. Whereas in the second group of women occurred more commonly glandulocystica endometrial hyperplasia, which consist of 40%, simple endometrial hyperplasia - 25%, the remnants of placental tissue, 10% of the endometrium.

Conclusions. We obtained histological findings that glandular hyperplasia is more common in women of menopausal age. In addition, we found that premenopausal diagnosis hypoplastic endometrium and glandular hyperplasia combined with uterine cancer and polyposis. On top of that, women of reproductive age were found remnants of placental tissue. Thus, it is necessary to exclude pregnancy in women of reproductive age with recurrent dysfunctional uterine bleeding. The above-mentioned diseases occur due to the fact that clinical and laboratory studies are not fully carried out and treatment measures are

THE ROLE OF INFECTION IN MISCARRIAGE

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Background. Miscarriage is the spontaneous loss of a pregnancy before 12 weeks (early miscarriage) or from 12 to 24 weeks (late miscarriage) of gestation. Miscarriage occurs in one in five pregnancies and can have considerable physiological and psychological implications for the patient. It is also associated with significant health care costs. There is evidence that potentially preventable infections

may account for up to 15% of early miscarriages and up to 66% of late miscarriages. However, the provision of associated screening and management algorithms is inconsistent for newly pregnant women. Here, we review recent population-based studies on infections that have been shown to be associated with miscarriage.

Purpose. Our aim was to examine where the current scientific focus lies with regards to the role of infection in miscarriage.

Methods. Papers dating from June 2009 with key words 'miscarriage' and 'infection' or 'infections' were identified in PubMed (292 and 327 papers, respectively, on 2 June 2014). Relevant human studies (meta-analyses, case-control studies, cohort studies or case series) were included. Single case reports were excluded.

Results. The association of systemic infections with malaria, brucellosis, cytomegalovirus and human immunodeficiency virus, dengue fever, influenza virus and of vaginal infection with bacterial vaginosis, with increased risk of miscarriage has been demonstrated. Q fever, adeno-associated virus, Bocavirus, Hepatitis C and Mycoplasma genitalium infections do not appear to affect pregnancy outcome. The effects of Chlamydia trachomatis, Toxoplasma gondii, human papillomavirus, herpes simplex virus, parvovirus B19, Hepatitis B and polyomavirus BK infections remain controversial, as some studies indicate increased miscarriage risk and others show no increased risk. The latest data on rubella and syphilis indicate increased antenatal screening worldwide and a decrease in the frequency of their reported associations with pregnancy failure. Though various pathogens have been associated with miscarriage, the mechanism(s) of infection-induced miscarriage are not yet fully elucidated.

Conclusions. Further research is required to clarify whether certain infections do increase miscarriage risk and whether screening of newly pregnant women for treatable infections would improve reproductive outcomes.

REALIZATION OF REPRODUCTIVE TECNOLOGIES IN WOMEN WITH HYPERPROLACTINEMIA

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Hyperprolactinemia is the most prevalent endocrine disorder in hypothalamic-pituitary axis and endocrine infertility. Pathologic hyperprolactinemia is generally applied for the situation in which prolactin level increases because of some reasons other than physiologic causes. The prosperity of extracorporal method was utilized as the principal as well as essential step in infertility treatment. This made it possible to realize reproductive function almost in every barren women and moreover, with those who had infertility and had been considered as unperceptive ones before.

Purpose. To analyze effectiveness of in vitro fertilization (IVF) in the treatment of infertility with hyperprolactinemic genesis.

Materials and methods. The main group consisted of 30 women with the functional hyperprolactinemia. All patients were studied according to collection of anamnesis, physical examination, hormonal analysis – prolactin, TTH, FSH, LH, testosterone, estradiol, as well as instrumental methods of investigation (USD, MRI).

Results. Every woman of the main group received corresponding therapy according to endocrinologist appointment. These women took agonists of dopamine (cabergolin) in individual dozes during preparation for the procedure of IVF. The research has shown affirmative result in 24 (80%) women executed IVF (Turkey, Acibadem),

3 (12,5%) of them could get pregnant after recurring procedure of IVF. The unfavorable result from IVF was taken in 4 women (13,3%), 2 (6,7%) women became pregnant during preparation for IVF. The screening of gravid women after IVF revealed 9 (34,6%) women were detected with multiple fetation, 8 (30,7%) of them with twins and 1 (3,8%) woman with triplets. Throughout the peculiarity analyses of gestation in the I term high frequency of threatened abortion was exposed in 22 (84,6%) women, in the control group in 3 (15%) women. Non-developed fetus of one of the twins was observed in 3 (11,5%) women and intrauterine fetal death of one of the twins related to hypertension disorders occurred in 2 (7,6%) pregnant ladies. Researching of delivery's course exhibited following features: premature discharge of amniotic fluid 6 (23,7%), delayed 1 phase of labor 2 (7,6%), preeclampsia 3 (11,5%), as well as 7 (26,9%) premature labors. Delivery via per vias naturalis occurred in 9 (34,6%) women, the rest of 17 (65,4%) women gave birth by operation caesarian section.

Conclusion. IVF in women with functional hyperprolactinemia requires receiving preparatory therapy including agonist of dopamine in respective doses until steady normalization of prolactin. Taking into account the high tendency of threatened abortion in pregnant women after IVF with hyperprolactinemia it is advised to receive deputizing, supporting therapy via gestagens.

FOLLOW-UP OF CHILDREN WHO HAD SEPSIS

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Purpose. To analyze the effects of suffering a sepsis based follow-up data.

Objectives: to find out the state of health of children who had sepsis: their physical development, health groups, carry-forward of the disease, the need for supervision of specialists, the state organs and systems involved in the pathological process in sepsis.

Material and Methods. The medical records of 32 children under one year who were in ARF-first clinic TMA with a diagnosis of "sepsis" in the period from 2010 to 2014. Follow-up information provided by pediatricians, children studied.

Results and Discussions. 10 children's physical development is no different from their peers, three children have below average physical development, disharmonious. 7 children are third health group, four - to the group 2. From the transferred disease in all children acute respiratory disease 1-4 times a year, one child's long-term anemia. Five child consist followed up by a neurologist, there is one ophthalmologist and orthopedic specialist, one child at a dispensary at the cardiologist.

Conclusions: moved sepsis may not have a significant effect on the physical development of the child, as well as for infectious disease, while children often have neurological disorders and pathology of other organs and systems, necessitates monitoring specialists.

HEREDITARY FACTORS IN DEVELOPING PELVIC ORGAN PROLAPSE

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Background. Pelvic organ prolapse affects 40% of postmenopausal women and directly impacts bladder and bowel function, as well as quality of life. The pathophysiology of this prevalent disorder is believed to be multifactorial, involving vagi-

nal parity and other obstetric risk factors, as well as advanced age, increased body-mass index, smoking, constipation and vaginal hysterectomy. Yet, even with multiple risk factors, there is a large component of risk that is not understood. This is exemplified by the fact that nulliparous women can develop prolapse, and conversely, most parous women do not develop prolapse. It is plausible that genetics contribute significantly to the development of prolapse. Currently, both our understanding of the genetic epidemiology of for pelvic organ prolapse (POP) as well as our knowledge about the efficacy and longevity of treatment options is too limited to make definitive recommendations; but, as our knowledge advances, this information may be incorporated into patient counseling and treatment decisions.

Purpose. Given current evidence supporting a genetic predisposition for POP, we conducted a systematic review of published literature on the genetic epidemiology of POP.

Methods. We initially conducted a broad search on the genetics and genetic epidemiology of POP and urinary incontinence. Methodology adhered to the guidelines. Data were systematically extracted by two reviewers and graded by criteria for studies of genetic associations.

Results. A meta-analysis was performed on all single nucleotide polymorphisms (SNPs) evaluated by two or more studies with similar methodology. The meta-analysis suggests that collagen type 3 alpha 1 (COL3A1) rs1800255 genotype AA is associated with POP, OR 4.79 (95% CI 1.91 to 11.98, $p=0.001$) compared to the reference genotype GG in populations of Asian and Dutch women. There was little evidence of heterogeneity for rs1800255 (p -value for heterogeneity = 0.94; proportion of variance due to heterogeneity, $I^2=0.00\%$). There was insufficient evidence to determine whether other SNPs evaluated by two or more papers were associated with POP. An association with POP was seen in individual studies for estrogen receptor alpha (ER- α) rs2228480 GA, COL3A1 exon 31, chromosome 9q21 (HLOD score 3.41) as well as six SNPs identified by a GWAS.

Conclusions. As additional studies are performed, the increased volume of data will allow more sophisticated analyses evaluating the likelihood and validity of specific genetic associations with POP. In order to detect genetic associations, large numbers of subjects are needed. None of the current work in this field meets level A for the amount of evidence; this requires sample sizes of over 1000 (cases and controls together, 1:1 ratio). Overall, individual studies were of small sample size and often of poor quality. Future studies would benefit from more rigorous study.

PERTUSSIS CLINICAL COURSE OF THE DISEASE HAVE PREMORBID FONG, COMPARED TO CHILDREN WITH PREMORBID BACKGROUND ANALYSIS

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The urgency of the problem . At present pertussis disease is one of the world community 's serious health problems . Pertussis breast - age children in the world as monoinfektion 10.5 % of cases can lead to lethal consequences . And the Republic of Uzbekistan in Tashkent on poachers and the trend of the last 10 years , according to the pertussis infection were identified

The aim of the research: pertussis disease have premorbid background and

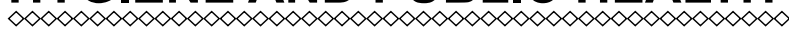
premorbid background analysis of the clinical characteristics of children with specific learning.

Materials and methods of research: scientific research for the period from 2013 until 2014, T.T.A.III Clinic of Infectious Diseases "pertussis" section. The study were diagnosed with pertussis from 1 old year before 5 old year 60 take.All children studied two groups of patients: 35 main groups, the control group included 25 children. The patient clinical and epidemiological, bacteriological, bacteriological, laboratory and instrumental investigations.

The results and to discuss them. Takes place according to the severity of the disease and the control group were mild, moderate, severe and difficult to learn. The main group, the disease is mild 12%, moderate 17% and made up 71% of painful.Disease light dinner in the control group, 40%, 40% to the medium-heavy and heavy 20%.The main clinical symptoms and control group analysis: Repro (82%; 60%), sensitivity, redness of the face (88%; 64%), vomiting (42%; 20%), and apnea (45%; 8%), swelling of the face and eyelids (60%; 52%) indicators.

Thus, pertussis can be severe form of the disease and the control group were 3.5 and 1.5 times the highest rates seen in children.

HYGIENE AND PUBLIC HEALTH



EVALUATION OF PROMOTING A HEALTHY LIFESTYLE AMONG THE POPULATION

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A healthy lifestyle (HLS) – is a rational way of life, which is an integral feature of the activities aimed at preserving and improving health. Lifestyle, which promotes public and individual health, is the basis of prevention and its formation - the most important task of social policy in the protection and promotion people's health.

Objective. The study of awareness of healthy lifestyles of different categories of the population and the role of nurses advocating healthy lifestyle.

As the main method of research survey was conducted among the population living in Yakkasaray district of Tashkent city and Orta Chirchik district of Tashkent region. The study was selective. At the beginning of a sociological survey patients were asked to indicate the main sources of information on healthy lifestyles. Materials research has shown that healthy lifestyles are the main sources of television programs (41.8%), publications (25.5%) and commercials (26.1%). It should be noted that the role of medical staff in the promotion of healthy lifestyles is 23.2%.

Asked what information about HLS interests you the most, respondents noted that the information on diet 56%, information prevention of certain diseases 30.1% and 14% (mostly women) interested in information about reproductive health.

According to patients, so that people were HLS is necessary: to teach them at school (32.5%), to create conditions at work and at home (25.5%), think about the health and try to change their lifestyle (30%). Also, 4.6% of respondents said, to follow the principles of healthy lifestyle are required material means and time-consuming.

In order to identify the medical activity of the population survey was conducted,

how often they are preventive examinations by doctors at that 18.9% of respondents said they regularly visit every 6 months clinics, 9.3% of respondents go to the doctors, in the direction of 44% is very rare treated when health worries. The study also found that 6.9% of respondents are engaged in herbal medicine and self-treatment, 16.2% of respondents have a private physician and refer to it.

In the next stage of the survey, to study the activities of nurses conducted a survey of how often visits their district nurse, to which 16.2% of respondents answered every quarter, 11.6% monthly and 16.2% of those surveyed nurse comes on call. The rest 46.5% of respondents said that the district nurse is not coming.

Conclusion. The study of medical activity of the population as one of the part of lifestyle can not only find out the attitude to personal health, but also indirectly assess the level and quality of the organization of therapeutic and preventive care.

PREVALENCE OF ARTERIAL HYPERTENSION AMONG YOUNG ADULTS

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The arterial hypertension (AH) is a major risk factor of the cardiovascular complications (CC), disability and mortality of the population. An increasing of premature mortality from cardiovascular disease (CVD) is mainly due to losses in young working age.

Currently, the background is extremely high prevalence of AH among the population, the trend toward an increase in the proportion of young adults in the structure of AH. According to WHO, the prevalence of AH among young people under the age 44 years ranged from 3.4% to 40.7%. Age debut of AH previously thought peculiar to adults have fallen significantly and AH is registered in the earlier age groups. The AH is not only one of the most common, but also one of the least diagnosed disorders. The feature is difficult to diagnose in the early stages of hypertension in young adults, it is a transient increase in blood pressure (BP).

Another important feature of the early stages of AH is a long asymptomatic period, in connection with which the young people for a long time unaware of the presence of disease rarely go to the doctor and not prone to self-monitoring of BP even during periods of poor health. Nonspecific clinical manifestations of AH in young and lack of adequate diagnostic algorithms targeted at this age, make it difficult to assess medical symptoms. In these circumstances, many times, the role of probabilistic methods to assess the clinical data.

The aim of this study was based on a survey of complaints to identify cases of AH in young adults. For this purpose in Kibray district of Tashkent region of Uzbekistan was held a survey on a periodic increase in BP among the population of young adults (25-44 years). During survey, were interviewed 200 people by randomization, of whom 23 (11.5%) complained of periodic increase hypertension. It is important to note that the periodic increase in BP is more common in men (74%) than women (26%).

Based on the above, we can conclude that today the continuing increase in the incidence and the defeat of the people all of a younger age, making the CVD essential medical and social health problem. Healthy young generation is medical-social character, as in the future will determine the quality of the human and economic potential of the country and its defense. Health of young people is crucial for the reproduction of the population and the health of future generations. Given all these

circumstances, to improve early diagnosis of AH in the early stages of the need to improve the quality of the patronage system of primary health care, as well as carrying out educational work in the workplace and in the community to improve the medical enlightenment of the population.

CONGENITAL ANOMALIES IN THE STRUCTURE OF CHILDREN'S MORBIDITY

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Background. Despite the progress in promoting and protecting the health of children in the structure of child morbidity, disability and mortality the leading role is due to congenital anomaly (failure). Congenital anomalies are important medical and social problem, since the majority of children born with congenital defects, die in the first months of life, and the survivors need ongoing medical and social assistance.

The aim of the research was to study the structure and extent of congenital anomalies among the causes of child morbidity in Tashkent.

Results. According to the State Statistic Control (2014) in the structure of child morbidity in the country on the first place, the overall incidence (0,34%), the following take place sequentially primary morbidity (0,09%), the incidence of children up to one year (0,8%), the incidence of children up to 5 years (0,4%). According to the study in Tashkent the prevalence of congenital anomalies among children up to one year amounted to 251,5 ‰, up to 2 years - 63,5 ‰, up to 3 years - 11,2 ‰. Among infants aged 0-2 months congenital abnormalities were diagnosed in 137 children by 1000.

Due to the high incidence of children aged 0-2 months, these diseases are the leading classes in the structure of morbidity in children under one year. Among the congenital malformations of babies first place is occupied anomalies of the musculoskeletal system, including frequent hip dysplasia and congenital torticollis. According to our data, among children under the age of one year, the frequency of hip dysplasia is 125,5 ‰, congenital torticollis - 57,3 ‰, congenital dislocation of the hip joint - 6,2 per 1,000 children. Congenital torticollis and congenital dislocation of the hip occur in girls 1.3 times simpler than in boys.

Thus, these results indicate that one of the most important health problems in the moment is the prevention of congenital anomalies. To solve this problem, it is important to pay attention to women with medical conditions, to determine pregnancy at its early date and in a timely manner to put on the registration of pregnant women, improve the quality of health services provided to pregnant women in family health centers in rural health centers and promptly put on the registration of pregnant women and conduct pre-wedding physicals.

Conclusions. 1. Among the congenital malformations of babies leading place abnormalities of the musculoskeletal system, including the most common hip dysplasia and congenital torticollis; these violations are observed in girls is 1.3 times than that of boys. **2.** For an early diagnosis and reduce the incidence of congenital anomalies should be carried genotypic and phenotypic study: a) early prevention of related marriages is within intergenetic extension periods (up to 3 years); b) limiting the birth rate of children at high risk of genetic and congenital diseases; c) the elimination of genetically damaged fetus in early pregnancy, and parental knowledge, the introduction of healthy living habits.

SOCIAL AND HYGIENIC CHARACTERISTICS OF WOMEN OF LATE REPRODUCTIVE AND PERIMENOPAUSAL AGE

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Throughout the world, rapidly increasing the number of women who have reached menopause. Currently 5% of the world population are women aged 45-50 years. According to forecasts by the World Health Organization, up to 2015 46% of women are over the age of 45 years. If the beginning of XX century, the average life expectancy for women was 50 years in, it is now in most developed countries it is close to 80, in developing countries ranges from 65 to 70 years, and in Russia Federation is about 72 years old, in Uzbekistan 74. In this age of menopause has remained relatively stable, averaging 49-50 years old. Thus, almost a third of a woman's life takes place after the end of menstruation, that is, the period called the general term – as "climax."

According to the modern approach to the organization of health care for women during menopause and perimenopause and based on the concept of the pathogenesis of menopausal disorders as the gradual decline of ovarian function, prevention of menopausal syndrome should begin long before the formation of menopause. At present, even in physiological menopause is necessary to conduct a complex of health measures aimed at prevention of menopausal syndrome, women adapt to the new conditions of domestic and the external environment. All of this shows the need to improve health and social care for women in the later reproductive and perimenopausal age, which will allow to extend the maximum period of physical activity, as well as mental and social usefulness.

Goal. Post a social-hygienic characteristics of women of late reproductive and perimenopausal periods.

Results. The incidence of menopausal syndrome in 2002 was 245.5 cases to 100,000 population. Women, and in 2004 already 412.8 (increased 1.7 times). Mild menopausal disorders occur in 21% of women with a severe form - 29%, and every second woman observed menopausal syndrome of moderate severity. If initial symptoms of climacteric syndrome dominated among women aged 45-49 (90%), then to 55 years increases the frequency of urogenital disorders, and by 60 years - osteoporosis. Social portrait of a woman late reproductive and perimenopausal period is as follows: The average age of menopause $49,9 \pm 2,5$ years, almost two-thirds (65%) are married, 54.0% - employees, 46% have special secondary education, 55.0% - with an income at a subsistence level, smoking 14.0%, alcoholic beverages consumed 86.0% (only on holidays), health status was rated as satisfactory 65.0%. In half of women surveyed (57.0%) have chronic diseases (diseases of the digestive and circulatory system). Every second (48.7%), the debut of cardiovascular disease falls on the menopausal period, from 34.3% observed burdening existing pathology. Patients receiving hormone replacement therapy for 3 months, a significant decrease of the modified menopausal index - from 49.4 to 38.5 points, neurovegetative disorders - by 76.0%, psycho-emotional disorders - by 62.0% and exchange-endocrine - by 51.5%. By the end of the observation period (3 years) menopausal index decreased by 6.4 times.

Conclusions. Thus, all this testifies to the need to improve health and social care for women in the later reproductive and perimenopausal ages, which will lengthen the period of maximum physical activity, as well as mental and social usefulness.

PROMOTION OF HEALTHY LIFESTYLES IN ADOLESCENTS

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According to article 19 of the Law "On protection of citizens' health, health protection of minors is ensured by the state. It is - to create the most favorable conditions for their physical and spiritual development, disease prevention, since it is the basis of prevention of the creation and improvement of public health.

Objective. To assess the level of awareness of healthy lifestyles and prevention of various diseases in adolescents college students.

Results. Assessing the awareness of teenagers on healthy lifestyles and prevention of various diseases, found that the main source of information for teens were teachers and medical staff, the second - parents, on the third - the Internet. The survey of students showed that their health as excellent 23.3% of respondents, assessed as good - 49.9%, as satisfactory - 25.6%, as poor - 1.2%. To the question "How do you spend your free time?" 26% of respondents said that most of the free time they spend on the computer and TV. Of those, 22% take the time to read books, newspapers and magazines; other children help their parents on the farm. 10% of young people involved in sports, 4% are a little fresh air, 40% spend time on extra classes (language, music, etc.). Irregular meals noted 24% of teenagers. Eating many teenagers can be seen as irrational: 27.4% consume too many sweets, 25% - fatty foods, 40% - bread, cakes, pasta, potato chips, 24.5% - spicy food. Thus, a risk factor for lifestyle among schoolchildren often celebrated long being at the computer and poor nutrition.

Conclusion. Formation of a healthy lifestyle among adolescents students in the learning process is an integral part of raising a healthy generation of an important part of prevention of various diseases. Given the large impact on teen parents need to actively involve them in the training and organization of sanitary education on disease prevention.

SOCIAL AND HYGIENIC ASPECTS OF WORKING CONDITIONS NURSE

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Professional activities of nurses has certain features due to work in continuous contact with the patients, which altered the psyche diseases, high level of responsibility for the life and health of people. On the identity of nurses adversely affects a number of factors predisposing to the emergence and development of professional deformation of the person. (Beznosov SP - 2004).

The aim of the study was the development of measures for the prevention of disease nurses based on a comprehensive study of the social and hygienic living conditions, safety and health of this contingent of medical workers.

Thus, the results of the study led to the following conclusions:

1. A typical medical-social "portrait" of the average health worker - a woman aged 19-49 years (76.1%), married, having from 2 to 5 children, at least once has under-

gone hospitalization (up 27.1%), often (up 33.8%) with a history of spontaneous abortion or abnormal births; His state of nurses associated with both negative effects on their body of work, and to social factors.

2. Structure of the disease has the distinction of nurses in various health facilities, but the basic forms of the disease are: respiratory diseases, cardiovascular diseases, diseases of the digestive system, diseases of bones and joints and muscles, diseases of the genitourinary system, and diseases of the blood and blood-forming organs.

3. Objective assessment of hygienic conditions in the main workplace of nurses can be attributed to a number of negative factors: a cooling (in the cold season) or heating (warm period), climate (80% of jobs), lack of light exposure (70% of jobs in manipulation), noise (20-30 dB A higher RC, especially in positions of nurses), bad (drug).

4. Comprehensive assessment of the importance of risk factors for the health of nurses in terms of relative risk (RR) allows us to consider a priority the following factors: the state of anxiety (OR, 4.1), high neuro-emotional stress at work (OR, 3.3), the presence of a history of complications associated with pregnancy and childbirth (OR, 3.2), the unfavorable situation in the family (OR, 3.5), poor working conditions (RR of factors - from 2.0 to 4), high production load or large the number of duty (RR, 2.2), age over 40 years (OR, 2.4), improper activities (OR-2.1), constant psycho-emotional load (OR, 4.0).

WAY OF LIFE - THE MAJOR FACTOR OF SAFETY OF HEALTH

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In connection with introduction of modern in the hygienic relation of technologies, improvements of the industrial environment, optimisation of labour processes actual become also measures on improvement of a way of life. Now studying of dependence of disease from a complex of socially-hygienic factors of the working industrial enterprises for the purpose of an establishment of leading risk factors and working out of preventive actions is especially important.

Research objective. A work main objective was profound studying of disease with time disability; revealing of relationships of cause and effect between risk factors and health of the working.

Material and research methods: he studying of hygienic working conditions spent at two large enterprises of Uzbekistan "Nitrogen" of Fergana and by "Electrohimprom" of Chirchik, making nitric mineral fertilizers has allowed to reveal a number of the leading adverse harmful and dangerous production factors which formation is caused by character of technological process, its organization, placing and imperfection of the equipment, irrational industrial ventilation, occurrence of non-standard situations.

Results of research. In structure of disease of working factories of mineral fertilizers, the leading place at both enterprises was occupied with illnesses of respiratory organs, bone-muscular system, a trauma and poisoning, digestive organs, blood circulation system, and also nervous system and sense organs.

Studying of conditions and way of life of the working it was spent by poll-interview 2000 working (1000 working on each enterprise). The data received at poll-interview of respondents, was brought in specially developed «the Questionnaire of

studying of conditions and a way of life working».

For an estimation of the importance of production factors and a way of life in development of the diseases, all working have been divided into 3 groups: illness, chronic illness and healthy groups.

It is necessary to notice that on the average at 2 enterprises on 100 roundyear working it was necessary 24,0 illness and 76,0-illness, from them, persons of illness 1 times 37,7 %, 2 times - 28,7 %, 3 times - 21,4 % were necessary.

8 and more years of the experience of work (41,6 %) had the basic contingent of the working. 24,4 % had the experience from 5 till 8 years, 18,3 % - from 3 till 5 years, and only 15,7 % had the experience of work till 3 years.

As to the correlation analysis and presence of statistically authentic linear dependence between alcohol intake and with used in the given research and health indicators have revealed their essential dependences ($\chi^2 = 19,98$, $p < 0,01$). Thus, results of our researches specify that on disease of the working render positive influences favorable living conditions, marital status (a full family), a favorable psychological climate of a family, high educational level, observance of mode of work and rest, a food, employment by physical culture and sports. It affects not only level of frequency of diseases, but to some extent and reduces level DFB among the working. And, on the contrary, absence of the positive factors set forth above, presence and expressiveness of bad habits, promote deterioration of a state of health, increase in level of disease, and also formation of contingent DFB.

The conclusion: The further decrease in disease with time disability and improvement of a state of health working in many respects depends on improvement of working conditions, rationalization and propagation of a healthy way of life.

THE IMPORTANCE OF PREVENTING POST-RADIATION COMPLICATIONS OF TREATMENT CANCER PATIENTS

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Cancer incidence population in our country is much lower than in other republics of the former Soviet Union, but in the past 20 years cancer rates some types of cancer pathology (cancer, breast cancer, pelvic lymphoma) in Uzbekistan increased 1.5 -10 times. However, there are some success in treating these diseases. For the past 50 years it has evolved from lymphoma Hodzhkina absolutely incurable disease serious disease. This is largely due to the extensive use of radiological methods of treatment of cancer patients.

Virtually all experts say that in the absence of radiotherapy after surgical treatment of tumors the risk of cancer recurrence is significantly higher (20 to 40%), whereas background radiation therapy risk is reduced to 5-10%. However, the use of radiation therapy is associated with the risk of post-radiation side effects that can impair the quality of life of patients. For example, in the treatment of Hodgkin's lymphoma general decrease in survival is due to the large number of such enough severe post-radiation complications as secondary cancer and leukemia, heart attacks miocard, infection and difficult damage lung tissue. Under the influence of radiation on the breast is rare-

ly an acute side effects occur, but radiativ forcing, in some cases accompanied by the development of dermatitis, telangiectasia, fibrosis of the breast tissue. In some patients with tumors of the small pelvis after irradiation are formed damas beam pelvic organs: bladder, rectum, vagina and intrapelvic cellulose. All this makes us a different way to look at the treatment program, the evaluation of its effectiveness and the selection factors defining successful treatment of cancer patients, as it is post radial complications often reduce overall survive patients and affect their quality of life.

Quality of life issues in the irradiated cancer patients in our country until now were only subject to the characteristics of certain aspects of post-radiation reactions, without their systematic study. Virtually no studies to assess the measures aimed at the prevention and treatment of side effects of radiotherapy in oncology. This suggests that the problem of radiation protection of cancer patients with radiation therapy rather urgent, humane aspect, allowing not only to extend the life of these patients, but also to improve its quality.

MAINTENANCE OF RADIATING PROTECTION OF THE ONCOLOGY PATIENTS AT BEAM THERAPY

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The special place in system of public health services of Republic of Uzbekistan last years is borrowed by questions of revealing both estimation of risk factors of occurrence and development of the various forms of diseases, development of measures promoting strengthening of health of the population of region. According to statistics MH RUz, the parameter oncology patients in our Republic from one year by one year grow. Only of patients by a crawfish dairy gland is annually registered more than 2500, the statistics of growth of other forms of pathologies - is similar. It testifies to importance of a problem of revealing and effective treatment of malignity diseases, including with the help of beam methods.

The beam therapy now is a major direction of medical aid to the population in all highly advanced the countries of the world. Only in USA more than millions radionuclide of researches are annually carried out about 100 and. Approximately 10-12 % from them are diagnostic researches and beam therapy. Undoubtedly, use of sources of ionizing radiation in oncology is spent in interests of the patients; they bring significant advantage for their health essentially exceeding risk of negative consequences of disease.

The analysis given of the world literature has shown that the concept without threshold of action of sources of ionizing radiations (SIR) all over the world is accepted. The given circumstance assumes, use of three basic principles of radiating safety: a principle of validity of use IR, principle norms and principle of optimization. For irradiated the oncology patients these principles have the large meaning, as the neglect by them conducts to deterioration of quality of life of the irradiated patients.

The performance of the above-stated principles in daily practical activity of the personnel of radiologic branches oncology of treatment prophylactic establishments promotes creation of conditions of radiating protection of the patients, pur-

posefully and is balanced limits dozes of an irradiation of the patients during treatment that at the end raises quality of their life after sessions of an irradiation.

The given circumstances have formed the basis for research and estimation of system of radiating safety at beam therapy онкологических of the patients. The necessity of maintenance of radiating safety of the oncology patients is stipulated in the Law RUz «About state sanitary supervision », Law “About radiating safety”, is covered in San andR №0193-2006y. The control of performance of the requirements of the above-stated normative documents is assigned to the doctors of medical establishments and departments of radiating hygiene CSSEC.

THE EFFECTIVENESS OF PRIMARY EXAMINATION PATIENTS WITH CERVICAL PATHOLOGY

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Republic of Uzbekistan from the first days of independence, large work is done to improve the health of women of childbearing age in particular. The certificate of it are a number of resolutions of the President of the Republic of Uzbekistan on health protection of women of reproductive age in whom the huge attention is paid to their improvement and prevention of diseases. One of the important indicators of reproductive health is a gynecological disease.

Introduction in practice of health care of a complex of diagnostic technologies allows receiving objective information on the level of gynecologic diseases. Late detection of gynecologic diseases, untimely and their inefficient treatment often leads to development of oncological diseases.

According to statistics in the world among gynecological cancer diseases takes the first place cervical cancer (70-92%), in the structure of cancer in women - 4th place (12%). Of great importance in the prevention of gynecological cancer diseases is early diagnosis of background diseases. Patients with of background diseases of the cervix, dont have as a rule, no complaints. Consequently, the use of clinical and visual method makes it possible to diagnose diseases of the cervix and other parts of the genitals. Visual method in combination with other tests in some studies and is a sensitive cytological methods equivalent.

Aim. Examine the effectiveness of clinical and visual method of initial evaluation of patients with cervical pathology in primary health care.

Results. Inspection of women has to be stage-by-stage. The first phase of the survey women next - inspection of the cervix using a vaginal mirrors, inspection will provide an opportunity to determine the size, shape and condition of the cervix and external fauces. Then the perform the test with 5% acetic acid, that is apply the applique with a solution of acetic acid on the cervix. The appearance of white spots on the area of application in 3 minutes indicates the presence of viral infection of the cervix. Then the cervix is applied Lugol. The inhomogeneous staining portion applications with clear contours confirm the presence of disease in the cervix and are the basis of the patient to a deeper make in examination the specialist. We have studied the effectiveness of clinical-visual method on the example family polyclinics №4 M. Ulug-

bek district of Tashkent. There were examined 200 women aged 17 to 63 years of clinical and visual method. Clinical-visual method: test with acetic acid, followed by Schiller revealed positive results in 16.5% (33) of the women surveyed. Next, the women were examined by colposcopy. In result is 43% (13) women diagnosed were with endocervicitis, 24% (8) of cervical erosion, 13% (4) adnexitis, 9% colpitis, 9% with uterus fibriod, 3% (1) with uterine cervical fibroid and only one woman hadn't cervical pathology.

Conclusions. In our research the clinic-visual method determined 16, 5% cases of cervical pathology, which was confirmed after the colposcopy. Therefore, the clinic-visual method could be use as screening for secondary prevention of CC in the primary care establishments (polyclinics), because it is more accessible, easy, doesn't need complicated equipment, less of expenditure both time and financial meaning.

TO STUDY THE INDICATORS OF DISABLED CHILDREN IN FERGANA REGION

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Introduction. The main purpose of economical, political, legal and governmental transformations that are being carried out in Uzbekistan is to increase the people's living standards and to provide all the opportunities as well as facilities to realize each citizen's vocational, intellectual and mental potentials.

The number of people increases by 237748 per year. According to the statistics provided by UNICEF, if we take into consideration the fact that 6.9 million people died in 2011; 19000 out of these were the children under the age of 5 – this is one of the most burning issues today.

Materials and methods. To study the indicators of disabled children in Fergana region.

Results. If we take a look at the main statistics for disabled children in Fergana region, the number of disabled children receiving benefits from the government constituted 41589 in 1991, this indicator rose dramatically to 79104 in 2011. According to the information obtained from all the cities and districts in Fergana region, the number of disabled children up to 16 years old constituted 1045819 for the year of 2012. Based on sex, the number of males was 4380 and the number of females was 3345. From the demographic perspective, the number of disabled children differs depending on where they live. The number of disabled children constitutes 4160 in urban area and this indicator is slightly different in rural area: 3345.

Conclusion. The observations demonstrate that the percentage of disabled children in Fergana region in the last three years was as follows: 7.4% in 2012, 7.4% in 2013, and 7.5% in 2014.

It has to be emphasized that no matter to what extent the rate of disabled children is decreased, even though if it was reduced by 1%, its grave consequences have implications on the children, their families and the whole society from the social, medical, economical and mental points of view.

THE QUESTIONS OF RADIOACTIVE POLLUTION OF AN ENVIRONMENT

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Radioactive losses from an irradiation in the medical purposes, and even a x-ray irradiation from TVs - all this creates an additional radiating background, that promotes increase of a doze of an irradiation received by the man during his ability to live. The radioactive pollution of an environment has a natural and artificial origin, which creates natural (NRB) or artificial radiating background (ARB). It is well-known, that the artificial radiating background (ARB) is formed also at the expense of objects of a nuclear cycle (production, processing of raw material and burial place radioactive dusts), job AES and AEA, use roengen-radioizotope of diagnostics and treatment, radioactive losses owing to tests of the nuclear weapon. From polluted air and atmospheric precipitation the radioactive substances get on a surface of ground and vegetative cover, that promotes radioactive pollution also waters of reservoirs, seas and oceans.

The analysis of sources of the literature has shown, that during application of this or that technology the man can affect local redistribution of sources of radiation, that results in change of a radiating background and accordingly to the increased irradiation. For last 40 years a level of radiation in external environment has increased at the expense of radioactive dusts from atomic power stations (AES) and enterprises of a nuclear industry, and also at the expense of radioactive losses after tests of the nuclear weapon.

Radiating conditions in territory RUz as a whole is within the limits of norm, however completely to exclude technogenical radiating pollution in territory of republic it is impossible, as here there is a number of objects representing potential danger to radioactive pollution of territory. It mainly congestion balance of uranium deposits of ore of objects: Tashkent region, Central Kizil Kum, territory of some areas of Kyrgyzstan and Tajikistan. The part of these objects already has stopped activity, but them congestion, containing radionuclide, have remained. In storehouses of these objects is saved up to 7 TBk radioactive dusts, which under certain conditions can get in air with the subsequent carry and loss in other territories. Besides, radionuclide can contain in emissions reactor and other industrial objects. There is no guarantee that the modern level of radioactive losses cannot be sharply increased at the expense of those or other anthropogenous influences in any point of globe.

From all radioactive substances of the special attention deserve long living isotopes, which are usually mentioned in the literature on radioactive losses. Isotopes, the period half of disintegration which is small in comparison with effective time of stay of particles in stratosphere, represent smaller interest from the point of view of global losses; they cannot collect in ground and do not represent biological danger. Most significant radionuclide, for example Sr, Cs will penetrate in organism with food, it is usual with milk from the cows, which eat a grass polluted with radioactive losses after tests of the nuclear weapon. The biological activity of these products makes by their especially dangerous and can result in accumulation of the very large dozes in some sensitive bodies.

Display parameter of a radio-activity of an environment is the regular analysis of radioactive losses from an atmosphere; the given problem waits for the decision, as the analysis of atmospheric losses radionuclide even in Tashkent is spent only incidentally.

THE ANALYSIS OF ILLNESS CASES OF STUDENTS OF THE COLLEGE OF OLYMPIC RESERVES

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Dealing with physical education and going in for sport makes a person healthier and stronger and thus he might have a complete physical development and improve physical functions. Moreover, it strengthens a human body and organism.

Definitely, 647 students (569 boys and 78 girls) of the college of Olympic reserves in Tashkent took part in our scientific researches. Taking into account statistic data within 2013-2014 years the information of illness cases was calculated according to the absence of students in classes and their analysis was performed based on the international classification of illnesses under the number 10 (ICI-10).

It was obvious from the previous results of general analysis that illness cases of college students among boys were higher in 2013 and among girls in 2014. Investigating cases of illness of both gender the following points were stated: in 2013 - 1057,2 - 9,7%, in 2014 - 1013,9 - 4,7%. Besides the decrease of illness cases among boys and girls was defined (in 2013 - 1059,8 - 10,3% and 1038,5 - 22,6%; in 2014 - 1012,3 - 4,7% and 1025,6 - - 18,4%).

A general illness structure of boy students in 2013 consisted of the following 5 main groups of diseases: 1) a personal injury, poisoning and environmental influences; 2) diseases of organs of inspiration; 3) ear and ear tumors diseases; 4) illnesses of digestive system; 5) illnesses of hide cutis and hypodermic tissue. The analysis of illness structure in 2014 showed the same categorical list; only the 5th group consisted of not a hide cutis and hypodermic tissue but was replaced by endocrine diseases, diet and metabolism.

As for girl students the following groups were identified, in 2013: 1) personal injury, poisoning and environmental influence; 2) illnesses of organs of respiration; 3) ear and ear tumors diseases; 4) diseases of blood and blood forming organs; 5) illnesses of endocrine system, diet and metabolism cases.

Unlike the boy students there were no changes in illness structure classification among girls in 2014.

As for general analysis, it showed the following groups of disease cases in 2013: 1) personal injuries, poisoning and changes under the environmental influence; 2) illnesses of organs of respiration; 3) ear and ear tumors diseases; 4) endocrine diseases, diet and problems of metabolism; 5) hide cutis and hypodermic tissue diseases.

According to the general view of the above mentioned 5 groups of diseases the following illnesses happened more often in definite groups: compound wounds, sprains, fractures and dislocations within the groups of injuries, poisoning and changes because of environmental influence; bronchitis and ARI among the diseases of respiratory organs; tonsillitis and otitis among ear and ear tumors diseases; gastritis, stomach and duodenal ulcer and gastroduodenitis in the group of digestive system diseases; furuncle in the hide cutis and hypodermic tissue diseases; goiter problems in the group of endocrine diseases, diet and problems of metabolism.

PREVALENCE, RISK FACTORS AND PREVENTION OF BREAST CANCER (FOR EXAMPLE, BUKHARA REGION)

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Breast cancer (BC) is one of the most urgent problems of modern health care. For years, breast cancer has been and remains in first place in the structure of cancer pathology in women. Every fifth woman with a malignant tumor was diagnosed with breast cancer, the most common cause of death among women 45-55 years old. 25.9% of women treated with advanced forms of the disease.

The IARC noted a significant increase in the incidence and mortality from breast cancer in the world - compared to 2008 the number of newly diagnosed cases increased by more than 20 percent, and the mortality rate - 14 per cent. This type of cancer in 2012, is the most common cause of cancer death among women (522,000 cases).

The coefficients of morbidity worldwide vary widely, while in North America, age-standardized indicators reached 99.4 per 100 000. In Eastern Europe, South America, South Africa and West Asia has a moderate incidence rates, but they are increasing. The lowest incidence rates observed in most African countries, but even here the figures are increasing.

To date, the cause of breast cancer is unknown, but there are risk factors that increase the likelihood of developing this disease: Alcohol, obesity, lack of physical activity - according to statistics, the cause of 21% of all deaths from breast cancer. Improper diet, a lot of stress, excessive exposure to the sun, Abortion (increased risk 1.5 times), early menarche (before age 12), late deliveries and small, short-term breastfeeding, late menopause (after 55 years). On average, women who had their first child after age 30, the risk of breast cancer is 2-5 times higher compared to nulliparous to 19 years.

Despite the fact that through prevention can be achieved to reduce the risk of some diseases, such strategies can not prevent most cases of breast cancer in low- and middle-income countries, where he was diagnosed at a very late stage. . Therefore, the cornerstone in the fight against breast cancer is early detection in order to improve treatment outcomes and survival. (Anderson et al., 2008).

FEATURES ENDEMIC GOITER AMONG PREGNANT WOMEN AND THEIR PREVENTION

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The problem of diseases caused by iodine deficiency, is now becoming increasingly important. This is due, on the one hand, to the territorial distribution of natural provinces with iodine deficiency, on the other hand, with increased adverse effects, worsening the symptoms of iodine deficiency.

According to the WHO, due to iodine deficiency in the Earth's 1.5 billion people are at risk of iodine deficiency disorders (IDD), from 740 million identified endemic goiter (EG), while 11 million have a pronounced mental retardation with clinical manifestations of endemic cretinism.

Complex indicators of environmental pollution, as well as comprehensive health indicators, can not alone describe the state sanitary and epidemiological situation.

The incidence in the general population and children, including diffuse nontoxic goiter in the territory of endemic goiter, as one of the criteria for assessing the quality of the environment, is gaining social importance. In the current environmental situation is urgent study of the relationship between the levels of pollution, duration of residence in areas of high human dangers and tensions endemic goiter.

According to conservative estimates, inadequate intake of iodine poses a threat to the health of 15 million people in Uzbekistan. The consequences of iodine deficiency depend on the age at which the body felt the lack of it. The most severe consequences of iodine deficiency occur in the early stages of development of the organism, beginning with pre-natal and completing puberty. During pregnancy, the mother is the sole source of iodine to the fetus. Iodine readily crosses the placenta and is used for the synthesis of thyroid hormones.

Iodine in pregnancy one of the most important trace elements. We could avoid a lot of problems pregnant women who received it in the right quantities of iodine during pregnancy

Increasing requirements for iodine during pregnancy is due to two factors. First, the observed increase in pregnancy loss of iodine in the urine, and secondly a portion of the parent iodine passes into the fetus and is used for the synthesis of thyroid hormone thyroid it.

The daily nutritional requirement for iodine adults is 150 mcg, pregnant and lactating women - 200 mcg.

As a result of iodine deficiency in women during pregnancy develops endemic goiter diffuse, and the fetus a range of pathologies such as congenital anomalies, neurological cretinism (mental retardation, deafness, strabismus), myxedema cretinism (hypothyroidism, dwarfism), psychomotor disorders, neonatal hypothyroidism. In addition, iodine deficiency affects the course of the pregnancy, causing abortions, stillbirths, infant mortality.

A sufficient intake of iodine and the normal functioning of the thyroid gland are essential physiological development of pregnancy and the fetus. Maternal thyroid hormones provide a complete anatomical and morphological bookmark the main components of the CNS at the stage of embryonic life, the maturation of nerve endings in the fetal stage, and others.

Pregnancy and childbirth in women with thyroid disease in 18-54% of cases are complicated. According to WHO, these complications include spontaneous abortion, congenital malformations, increased perinatal and infant mortality, neurological and psychomotor disturbances. Endemic goiter and its prevention during pregnancy is the most urgent problem today.

Natural iodine deficiency, characteristic Uzbekistan conditions and observed defects in the systematic prevention of iodine retain tension endemic goiter in certain regions, especially noticeable in high-risk groups. Meanwhile, iodine deficiency adversely affects not only the health of the woman and her reproductive function, but also on the development of the fetus and newborn.

ORGANIZE OF CONTROLLING SANITARY CONDITION OF SOIL IN POPULATION AREAS AND TASKS OF THE SANITARY- EPIDEMIOLOGICAL SERVICE IN THE IMPLEMENTATION OF HEALTHY MEASURES

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Sanitary protection against pollution of the soil, one of the main factors of the environment, is an important task of the Sanitary service of Uzbekistan. Currently, due to the increasing industrial development in urban and rural areas, and chemical substance used in agriculture, the sanitary condition of the soil has become very important. Until recent years, basic sanitary measures to protect of soil from pollution were antiepidemic character, given the possibility of long-term preservation of soil pathogens intestinal infections and eggs of geohelminthes. In this regard, the main measures to protect soil from pollution were reduced to organizing an effective cleaning of populated areas and the control of its implementation. In Uzbekistan, the main treatment systems in urban and rural localities are scheduled home-stead and campaign door-shaped cleaning of solid waste. The introduction of these systems greatly improved the sanitary condition of cities and towns. However, the increase in the height of new houses equipped with the garbage disposal as a mandatory element of improvement, will, apparently, to the need to abandon the scheduled door-cleaning in the large cities of the country, in spite of its high efficiency. Of all the available means of disposal and decontamination of waste in Uzbekistan, the most widely purchased improved landfill. Currently, however, is a more modern waste disposal at waste treatment plants, where part of the waste can be disposed in the national economy, and the transformation of the organic waste into compost that can be used in agriculture, accelerated. Unfortunately, design and construction of such enterprises in the country has been delayed, despite the advantages that these companies have in the sanitary relation. The development of industry and agriculture confronts sanitary control bodies new tasks, box tied increase in industrial emissions, the amount of chemical fertilizers and pesticides compounds- entering into the environment. Research passed many years in Kiev Pedagogical University of the Department of General and Communal Hygiene. A.N. Marzeev showed that substances such as compounds of zinc, arsenic and mercury into the atmosphere with industrial waste settle to the soil surface, migrate into it and can move from the polluted soil to plants through the root system, it can not alert the control sanitary organization. Persistent pesticides, used for the treatment of orchards and vineyards, capable of cumulate person's body, were determined in the soil on the territory of pre-school children and health institutions located at a distance of 0.5 km from the processed objects. This is extremely important, given the close contact of children of preschool age with the soil and the possibility of additional revenue that pesticides in the child's body. The increasing use of irrigation and agricultural crops and industrial waste water and sludge containing toxic substances. As shown by studies of the Kiev University of the Department of General and Communal Hygiene, with the soil, and from there into plants can do different compounds, committed to human health. All these factors must be considered bodies of sanitary supervision. To control the sanitary condition of the soil is necessary to require the design, construction, organization, industry compliance with sanitary protection zones, introduction of effec-

tive methods of treatment of industrial waste water and emissions. In agriculture, it is necessary to control the cost of pesticides on 1 hectare, ensure that applied only to the cost of pesticides on 1 hectare, ensure that applied only approved plant protection chemicals, demand the replacement of toxic and stable in an environment of pesticides of low toxicity and unstable, when necessary processing facilities located near people living areas, children establishment, treatment - preventive establishment, health care and others. institutions.

EPIDEMIOLOGY OF DIABETES

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Diabetes is a severe chronic disease characterized by disturbance of all types of metabolism, and, particularly, a carbohydrate. The World Health Organization (WHO) considers diabetes epidemic as a special non-infectious diseases. The prevalence, early disability of patients, high mortality were basis to consider diabetes mellitus (DM) as one of the leading medical and social problems of modern medicine, and the struggle against it is considered to be a priority national health systems. In recent years, in all advanced countries, there is a marked increase in the incidence of diabetes. Financial expenses for the treatment of patients with diabetes and its complications reach astronomical figures.

Experts say diabetes is the global epidemic that threatens the world: according to the International Diabetes Federation (IDF), by 2030 552 million people in the world will be suffering from diabetes, i.e 9.9% of the population of the planet!

According to epidemiological data in Uzbekistan, the incidence of diabetes composes five percent. However, about 136 thousand patients are on the dispensary.

Diabetes is dangerous because it causes damage to the blood vessels of the heart, brain, limbs, kidney, retina, what consequently results in the development of myocardial infarction, stroke, gangrene, blindness.

Myocardial infarction and stroke in patients with diabetes there are observed 5-6 times more likely than among people without this disease. Society of the Blind consists for 60-70% of patients with diabetes mellitus. Amputation of the lower extremities is carried out 5-6 times more frequently in comparison with the general population.

Modern classification of diabetes mellitus was adopted by the World Health Organization and identifies several types of it. Most patients with diabetes mellitus belong to type 1 and 2.

Type 1 diabetes (once called insulin-dependent) is developed at a young age, most children (in most cases up to 30 years, although they can get sick, and at a later age). The beginning of the disease is always accompanied by severe symptoms of hyperglycemia (high blood sugar): the patient loses weight, feels weak, thirsty, emits large amounts of urine, the urine contains acetone. The reason for type 1 diabetes is the cessation of insulin production by the pancreas due to beta-cell death.

Diabetes mellitus type II (non-insulin dependent) is often called the diabetes of elderly. It was mistakenly believed earlier that diabetes is older - a mild form of diabetes. The name "non-insulin-dependent" comes from the fact that in the first stages of the disease insulin is usually not necessary applied to the treatment of diet and

drugs that is slowed down by absorption of glucose in the gastro-intestinal tract or stimulating the release of insulin by the pancreas.

Type II diabetes begins gradually, typically by reducing the susceptibility of tissues to their own insulin, the insulin level in the blood rises, but also the glucose level is growing. As a result, the beta cells are depleted due to the increased load and the destructive action of a large number of circulating blood glucose and insulin production decreases. Such patients have a relative insulin deficiency. Even if the pancreas produces enough hormone, sensitivity of the organism to it can be reduced.

Even 20 years ago, the diagnosis "type 2 diabetes" was set mainly to patients older than 60, but every year the disease rapidly "becomes younger" and goes around the world rapidly.

Today, there are observed cases of the second type of diabetes among 40 years old people, and even among children.

The frequency of disability among patients with diabetes mellitus was 56.7% (all children with diabetes are handicapped child). Frequency and duration of hospitalization of patients with diabetes is twice as high, which leads to enormous direct and indirect expenses for the health system.

In spite of investigations and studies of that are conducted related to this disease, the issue of the diabetes is still one of the most essential one in Uzbekistan.

STUDYING OF THE ACTUAL FOOD OF STUDENTS OF THE PHYSICIAN OF PEDAGOGICAL FACULTY

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The important role in ensuring quality of human life, its physical and mental health, life expectancy is a balanced diet. It is obvious that optimization of food is not only a medical, but also social problem. Food together with physical activity belongs to the elements of daily behavior forming the health of the person.

Research objective. Studying of the actual food and assessment of the food status of students of higher educational institutions.

Materials and methods. The food behavior of students who were studied during specially developed questionnaire within 10 days became object of the research conducted by us. In the questionnaire there were following questions: A full name, age, sex, whether always you have breakfast before leaving for study, how many times a day do you eat? Food reception hours. How many times a day do you accept hot dishes? List of dishes (products) consumed by you yesterday for breakfast, a lunch, a mid-morning snack, a dinner. Students of 3 courses of the European stream of medico-pedagogical faculty of the Fergana branch of the Tashkent medical academy were interrogated. The total number of students - 40. The males among respondents were 28, females 12.

Results of research. The analysis of frequency rate of meals of students showed that only 25% of respondents eat 4 times a day, most of respondents eat 3 times a day. During poll it was found out that only 5,6% of students have a full-fledged breakfast.

The analysis of answers to a question, "What products prevail in your diet?" showed that 100% of participants daily give preference bakery and flour-grinding products, tea, to fruit and products of their processing (50%), dairy products

(78,5%), sugar and confectionery – 65%, fish and products of the sea – 1% .

Answering more certain question "What products do you use during the day?" 100% of respondents answered that in their diet there is constantly a bread, 87,5% of respondents answered that consume soup dishes, and 75% of respondents answered that consume samosa, generally in a lunch break, in 50% of cases in a diet all respondents have a chocolate, plov and salad. Regularly eat from dairy products: sour cream, cream and cottage cheese (on 12,5%), butter, firm cheese and condensed milk (on 25%), eggs of hens – 37,5%, sweets prevail in a diet: on 37,5% - jam and cake, honey – 25%. From drinks more than a half of 67,5% prefer tea and coffee, juice (25%) and compote (12,5%), sausages is available only for 25% of students. From fruit in a diet there is an apple (37,5%), citrus – 12,5%.

Showed to data of questioning that generally, respondents in a day receive on average 52,45 mg of proteins, 64,19 mg of fats and 195,96 mg of carbohydrates. The power value of food made 1469,9 kcal. In norm of a proteins, fats and carbohydrates for the first group of intensity of work, that is for the persons who are engaged in brainwork on average have to make 80-100, 90-110 and 350-400 g accordingly. The power value of food has to average 2200-2500 kcal.

Conclusion. Thus, according to the conducted sociological research it is established that the students of the Fergana branch of the Tashkent medical academy who initially have sufficient I.Q., motivated on findings of high level of professional knowledge are not accustomed, motivations for observance of rules of optimum food, so and for formation and maintenance of health. Results of poll testify that the diet of students does not correspond to the hygienic principles of optimum food, their daily diet generally carbohydrate, with insufficient amount of animal protein, deficiency of vitamins and microcells. The hobby for tea, coffee comes to light.

CLINICAL SYMPTOMS OF VITAMIN DEFICIENCY IN PATIENTS WITH CHRONIC RENAL INSUFFICIENCY

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Vitamins are combinations which consist of various chemical features of little molecules. They are useful for functions of organism of human being. They are regarded as unexchangeable substances. As they have contradiction nicotine acid, they are not synthesized in organism, and they join to organism of human through food products. Differing from other vital food substances (unexchangeable amino acid and etc.) Vitamins don't possess plastic and energetic features. They take part in exchange of substances and they keep the normality of biological and physiological processes. They don't possess sufficient quantity of vitamins and it is related to biochemical and physiological functions in organism. That's why, it is essential in terms of diagnosis to study the supply of vitamins in human's organism.

The aim of work is to research lack of vitamins of 6 patients which are racked with shortage of liver. The research shows that lack of vitamins is 4% in men's organism and 6% in women's organism, swelling in the months of autumn and winter, bleeding of gums decreased 2% than the months of summer.

Falicular giperkerdos (3,8%) 4 in winter, (4,8)5 in summer and autumn were identified in the patients which were checked during the research.

The dryness of skin and giporlerator was faced in comparison with the previous labels for several times. The checked patients consisted of chronic renal insufficiency (CRI) (96) at the end of winter-spring, a/4, in summer-autumn months 83,8%. Food effects were observed (angular dentistry, in men's organs and women's) (1-0%).

The patients which were racked with Silior inflection (perecorneol) CRI as well. Their results were observed in winter-spring months a 30 (28,6%), summer - Autumn (30/31,4%). The level in lack of vitamins which was mostly faced is the tongue soother of gipertion.

In periods of winter and summer their results showed 30 (29,6%), summer and spring (38 %) were identified in the patients were checked.

According to the results of research, eating fewer fruits, vegetables leads to lack of immunity, and it obviously brings them about worsening of fitness in CRI.

One of the most effective ways is that eating balanced diet with the flour which is covered in bread and vitamins B1, B2, PP and milk, sour milk and juice which is full of vitamins. The products which stated above should be consumed in order not to encounter various illnesses or shortage of immunity.

HEALTHY CHILD – DEVELOPMENT OF FUTURE

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Human health - an important set of internal factors and external impressions formed during growth and development. In this regard, the younger generation, and to strengthen our health care Hygienists one of the main problems contingent of children and adolescents is studying health indicators. Children studying the health and the health of the teenager or absence of diseases in accordance with the age of the efficiency of thematic but harmonious with the (harmonic) development, as well as the main indicators of the organism is determined by the state of normative level. Normalization healthy lifestyle should be for them.

Healthy lifestyle - specific health care of the population, to help restore and strengthen the style moral. To regain a healthy lifestyle not only medical, but also the socio-economic category as well, it will depend on the production and development of the relations of production. Choose a healthy lifestyle negative vital to the health of the person is connected to a separate social groups and the general public hygiene means to have a high level of culture.

Each is a group of people that it cared about the health of the boy. In this case, the family, school, neighborhood, health, physical education and sport institutions, and the need to help others.

Oxygen transportation system also provides tissue develops slowly and reaches the age of maturity 16-17. Taking into consideration that it Hygienists children are advised to limit physical workload. At the age of only adolescence heart and the cardiovascular and respiratory systems morfofunction mining continued to progress the development of the physical workload, performance and durability is inadequate.

We have a contingent of children with diseases of the blood vessels of the heart disease on the basis of statistical data twine. FERGANA REGION analysis of childhood diseases in 2014, Operation ill blind following results: They are 30-35% incidence of angina and myocardial infarction will. Total 4310 event rural population of 2032 people, the rural population between 1162 (49%) create girly. You were all registered as of March 1, the diagnosis thematics total INDICATORS 1142 (26%), and 504 (44%) create a more

girly. From this production, reduce child morbidity between the procedures and measures to prevent it should. because healthy children are our future prosperity.

Now Hygienists reduction in the open air on the watch division, decreased locomotor activity in children. The children's agenda is the basis of their mentally and physically to ensure the healthy development of the following.

1. House, and the main parts of the training school.
2. Be more than the free fall pivotal holiday.
3. Adequate and catering at the time.
4. Hygienic full sleep.

Thus, academic, labor and sport activities in relation to particular types of functional theoretical preparedness in the form of a time, so for a variety of activities also environmental factors analyzers or functional systems, the effect of the current should differential normalization. less than moving and, most importantly, the nervous stored in a psychiatric tensions. Defense should be the main task to explain.

IDENTIFICATION OF RISK FACTORS FOR OBESITY IN CHILDREN AND ADOLESCENTS LIVING IN TASHKENT CITY

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Obesity is a major public health problem in the twenty-first century. The use of integral approach to solving this problem will allow to take into account all its aspects - malnutrition, physical activity, as well as socio-economic and socio-political factors in this area. An important specificity of the last decade is the increase in the number and change in the balance of risk factors affecting the health of children and adolescents, the effective identification of which will target the prevention of obesity. Risk factors are those that determine the health affecting it negatively. They favor the occurrence and development of diseases. Risk factor is a sign that somehow related with the occurrence of the disease in the future.

Materials and methods. There observed 32 girls and 26 boys aged between 11 to 15 years, diagnosed with exogenous constitutional obesity degree I-II within three-four years living in Tashkent city.

The information was collected by questionnaire and the copy data of the medical records of children with obesity. Control group comprised the data of 50 children with normal weight (healthy). The study group included 58 children with excess body weight (obesity). Further, we identified the prevalence of these factors in the study and control groups using mathematical and statistical techniques. The relative risk ratios were calculated in their comparison.

Results. According to obtained data, we estimated the significance of risk factors for obesity in children. The study of social status of parents identified the relative risk (RR) 1.32, that was - the employees. In the study of pregnancy toxemia with the threat of miscarriage -RR was 2.9. In mothers who had artificial labors RR - 2.73. At artificial feeding RR was higher - 2.23. RR in children who were often ill - 1.77. Identification of comorbidity diseases in parents, including obesity degree III RR was 4.05, obesity degree I - 2.08, obesity degree II-2.4.

The child's diet at one time exposed to the factor of two times higher versus to control, the relative risk (RR) is 2.31; when consumed sweets and cakes the RR is 2.16; going to school by transport - 3.08; no walking in the fresh air - 4.06; watching

TV -2.3; activity with computer for 3 hours or more - 4,5; no help round the house - 2.67; satisfactory studying of the child - 3.4.

When determined the major factors contributing to the development of obesity in children and adolescents, on the basis of the relative risk it was revealed that the activity with the computer for 3 hours or more, parental obesity and inactivity instead of walking outdoors occupied the leading position.

Thus, summarizing the results of the research should be stated that children and adolescents with obesity are characterized by hypodynamic lifestyle, going to school by transport, not going in for sports, spending much time with computer, taking meals at one and the same time, eating sweets every day as well as parental obesity and feeding the baby with formula.

Conclusions: 1. Preventive measures for the prevention of obesity in children and adolescents should be carried out at an early age. 2. Healthy lifestyle, balanced diet, physical activity should be included in the medical care of children.

THE RESEARCH OF THE ENERGY EXPENDITURE OF STUDENTS AT FERGHANA BRANCH OF TASHKENT MEDICAL ACADEMY

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There are two types of energy expenditure in human organism: 1) unregulated waste of energy 2) regulated power consumption. Unregulated energy consumption includes energy expenditure for basic metabolism and energy cost for specifically-dynamic action of food. Energy, which was spent for basic metabolism, is used for keeping life-supporting organs up on the maintain data in the required conditions. Regulated energy waste includes consumption of energy during the work activity, domestic and household behavior, during the sport and other activities.

The purpose of the research. To study the energy consumption of the students of medical preventive faculty from 1th to 6th courses of Ferghana branch of Tashkent Medical Academy

The objective of the research. Determination of regulated and unregulated energy expenditure of student with the calculating method

Materials and methods of research. From the medical preventive faculty was selectively chosen 65 students from 1th to 6th course. The numbers of chosen students were: from 1st course - 16, from 2nd course -13, from 3rd course - 8, from 4th - 10, from 5th - 8, from 6th -12. To determine the regulated expenditure of energy was used method of timing and for this every student compiled a chronogram of the day that reflected the duration of performed work by its separate types, time of resting with the indication of work during it , duration of walking and sleeping. Unregulated energy expenditure including the value of basic metabolism was determined with the help of tables Harris-Benedict, and specifically-dynamic action of food (SDAF) was calculated from basic metabolism, which increases to 10% while mixed nutrition. The regulated and unregulated energy consumption were summarized to Determine The Daily Energy Expenditure.

Results of the research: regulated energy consumption of the students of 1st-course was an average of 2444 kcal, 2nd course 2431 kcal, 3rd course 2502 kcal, and

4th course 2285 kcal, 5th course 2320 kcal, 6th course 2240 kcal. The normal amount of regulated expenditure of energy for the first group of labor intensity is 2300 kcal.

Unregulated energy expenditure of 1st course amounted to 1820 kcal, respectively SDAF 182 calories, 2nd course 1415/142 kcal, 3rd course 1935/194 kcal, 4th course 1310/131 kcal, 5th course 690/169 kcal, , 6th course 1713/171 kcal. The value of basic metabolism averaged to 1647 kcal, specifically-dynamic action of food was 165 kcal.

Daily consumption of energy of students was in average 4181 kcal. The daily consumption of energy for People With Mental Activity Is In Average 3800 Kcal.

Conclusion. 1. During the research of regulated energy consumption of students from 1 to 3 courses were above the mark. This indicates that they spend the most of their time (3.2-4 hours) to do home assignments. 2. Unregulated energy expenditure of students 1, 3, 5, 6 courses was identified in large numbers. This explains the fact that in this courses researched contingent (70%) was male.

HYGIENIC ASPECTS OF SANITARY CLEANING OF TASHKENT CITY

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One of the most important events in the sanitary protection of the environment is sanitary cleaning of populated areas.

Household dregs contain significant amounts of organic matter, which is why in the untimely and incomplete removal, they are a source of pollution of soil, waters and air.

Of particular importance is the increasing number of industrial wastes often contain harmful substances. The role of the sanitary cleaning of populated areas in environmental protection is significantly increased in large cities due to a large payment for the population, the intensity of traffic and the increasing amount of waste.

Tashkent-city of high culture and urban planning meets the highest requirements of comfort and health improvement. Crescendo growing volume of housing construction, which necessitates the development of new territories. At present, cleaning the city covers a large range of activities for the collection, removal, disposal of waste, in winter and summer cleaning of streets, squares and becomes mechanized farming industry.

Established in the city planned regular system cleaning of removable containers from household waste, the implementation of which was completed in 2004, with the hygienic and economic points of view is justified in our conditions and evaluated positively.

Control entomological monitoring the developments related to the population sufferings are an objective indicator of the qualitative aspect of the removal of household waste.

In the city a few, including Almazar, Sheyhantaur, Yashnabadskom, Yunusabad, Chilonzor Separate collection and disposal of solid waste.

Under Tashkent conditions 30% of the housing stock is used musorovody enterprises "Mahsustrans."

Construction waste recycling plant dramatically improves the disposal of household waste and eliminate it as a source of pollution, would eliminate part of the landfills, agricultural fields receive a full fertilizer.

THE LEVEL OF KNOWLEDGE OF THE POPULATION ABOUT THE RISK FACTORS FOR HIV INFECTION

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AIDS is one of the most significant problem of the world in the late twentieth century. According to Gable L., Living L. O., Hodge J. G. (2008), by 2004 more than 1 million people were infected with HIV in South - East Asia. By 2007 in Europe and CIS countries there were more than 1.5 million infected. The total number of patients and carriers exceeds 42 000 000 people. AIDS is widely spread among people who use drugs intravenous injection. According to A. S. Hikmatullaev et al.(2010) to 43% of injecting drug users have signs of HIV infection. There are other transmission routes, in 2011 in Uzbekistan (Umarhojaev S. W. 2010) the proportion of parenteral transmission of infection amounted to 38.1%, sexual intercourse 45.9% vertical path 5%. In 2008 these figures were respectively 49, 24 and 4%. Almost 80 percent of all new infections registered in the CIS between 1997 and 2000, accounts for young people under the age of 29 years.

The aim of the study - to learn the awareness of population about risk factors for the emergence and spread of HIV infection.

Materials and methods. We carried out a case study based on personal interviews using a specially designed questionnaire to 100 respondents in Zangiata district of Tashkent region. The obtained data were statistically processed by applying the software package statistical analysis Excel program on computer Pentium-IV.

Results and discussion. There were 40% men and 60% women. We have surveyed 50 people (50%) at the age of 15-18 years, 30 –44aged were 35 people (35%), 45-59 aged - 5 (5%), and 60 years old and older were 10 people (10%). The average age of respondents was 30.5 ± 0.2 years. In terms of ethnic composition among all respondents Uzbeks were 80%, 8%-Russian and 12% - Kazakhs. In the group of teen-agers 76% were Uzbek, 10% - Russians and 14% - Kazakhs. In the group of adults 84% of the respondents were Uzbek, 26% - Russians and 10% Kazakhs. The level of education is important in the acquisition and assimilation of knowledge in various areas, including in prevention of diseases. Distribution of respondents on this basis showed that 65% were persons with secondary education, 13% secondary, 2 % with incomplete higher and 16% have higher education. Thus, 96% of respondents have medium and high education and a high opportunity to obtain information on medical issues, including AIDS, are presented in the periodical literature and the media.

The study of awareness in Zangiata district showed that 40% of respondents had no idea about the specifics of HIV infection, 65% did not know the extent of its prevalence and the duration of the latent period, and 75% were not aware of the initial signs of the disease development when infected with AIDS. Material distribution by age groups showed that respondents 15 – 18 years in 60% of cases had no clear idea about HIV infection, 70% had no idea about the prevalence of AIDS, the duration of the latent period did not know 70%, and 80% did not know about the initial manifestations of this disease. In the group older than 30 years were significantly lower (20%) of persons who know little or nothing about AIDS as the disease ($p \leq 0.01$). However, when answers to more specific questions: about the prevalence and the initial symptoms did not know, respectively 60 and 70 % of persons of this age, however, the dif-

ference by 10% compared with a group of young people is not statistically significant.

Distribution of the population Zangiata district on the knowledge about the sources of infection and routes of transmission of HIV showed that in the group aged over 30 years, the level of no awareness about the sources of infection is somewhat lower (26%) than among youth 40%. Significant difference has also been observed in the level of awareness about the transmission of HIV among adults is 10% and among youth by 48% ($p \leq 0.01$). The number of persons aged 15-18 years, who had not idea about the methods of diagnostics of HIV, 3 times higher than the same group among 48 adults and 12%, respectively. Had not proper idea about the transmission of pathology 48% of respondents among the youth and only 10% of the population aged 30-75 years. Of intrauterine infection of the child from the sick mother knew 52% of young people and only 30% of adults.

Prevention is the primary means of combating the spread of AIDS around the world, so the level of knowledge of the population in this area is of paramount importance. Despite going to work to promote healthy lifestyles among the population by health workers, education authorities and the media, the population of Zangiata district of Tashkent region showed relatively low awareness in these matters. Every fourth Respondent did not know the answer to the question about the main risk groups and preventive measures. More than a third of teen-agers have not adequate knowledge about the risk groups the techniques of prevention of HIV infection. Among adults this figure is lower by 2.4 times ($p \leq 0.01$).

Conclusion. The awareness of population in Zangiata district of the Tashkent region on the epidemiological characteristics of the prevalence and prevention of HIV is very low. The level of knowledge among teen-agers 15 – 18 years lower than among the adult population. It is necessary to intensify the education in the prevention of AIDS among the entire population, but especially among youth that will contribute to reducing the risk of emergence and spread of this disease.

TO MEDICAL CHARACTERISTICS OF PENSIONERS

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The aim of the study was to examine the medical characteristics of pensioners living in Tashkent.

Material and methods. Study of the state of medical characteristics of pensioners, has been studied by interviewing, according to the developed questionnaire. The sample was formed by typological method, which included lonely pensioners living in Yunusabad, Mirzo Ulugbek and Sobir Rakhimov districts. Total 307 questionnaires filled. All the data were statistically processed and summarized.

Results. We examined 307 pensioners, living in Tashkent, of whom 17.3% were male, and 82.7% - women.

Analysis of the results showed that the structure of pensioners is mainly made elderly people (48.5%) aged 75 to 89 years.

The main part of the surveyed was elderly and people of Russian nationality (65.1%), to a lesser extent other ethnic groups (20.5%) and only 14.3% of the patients were single pensioners Uzbeks.

The survey found that 74.3% of pensioners in need of constant care fully and can dress yourself, at 16.9% - this kind of self partially restricted, 7.5% - may dress only

outside help, and 1.3% single pensioners in need of constant care - are not able to perform this type of self-service. 66.1% of the examined fully and independently run by his bed, at 22.5% - this kind of self-limited, 8.5% - can fill your bed with assistance, and 2.9% - not able to fill his bed. 79.8% of single pensioners in need of constant care alone take food and water, in 4.3% - this kind of self-service is partially restricted, 5.9% - can make eating and drinking for help.

A survey of types of single pensioners in need of home care showed that the main part of their 192 (62.5%) are elderly lonely type, 46 (15.0%) - the patient type, 33 (10.7%) - the family type, by 11 (3.6%) cases - the creative and the fading types, 6 (2.0%) - the religious type, in 4 cases (1.3%) - the social and political types.

Conclusions. **1.** The structure of pensioners mostly old people were (48.5%) aged 75 to 89 years of age and older people (44.6%) and 75. **2.** The largest group were surveyed persons with secondary (25.7%) and secondary special education. However, one in five patients (19.2%) had a higher education. The greatest part of the surveyed - 182 (59.3%) of people of working professions, 118 (38.4%) - employees. **3.** Despite the fact that the majority (66.1% or more) can be examined on their own dress, fill the bed, cook and eat, to 22.5% of the cases surveyed have limitations in performing this work, and the majority of the patients, based on of their disability, not able to carry out work in the yard.

ASSESSMENT OF SEVERITY AND INTENSITY OF WORKING PROCESS OF "MAHSUSTRANS" ASSOCIATION'S WORKERS IN TASHKENT CITY

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Nowadays, removing and disposing of municipal solid waste (MSW) is still one of the most urgent problems of the environment, hygiene and sanitary conditions of the city. Cleaning of populated areas includes all measures for collecting, removing, disposing and recycling of waste. The waste collecting and recycling system should be based on the maximum limitation of influence of waste on the environment principle. This requires regular and uninterrupted removing of all formed by households and companies MSW to an organized and safe place for recycling and disposing. The main technical elements of treating of MSW includes next subsystems: collecting and intermediate storage, removing, processing and burial of non-utilized solid waste fractions. Thus, the aim of our research is assessment of severity and intensity of working process of "Mahsustrans" association's stuff in Tashkent city in the first step of neutralization (collecting and saving) of MSW. Our research based on Sanitary rules and regulations of the Republic of Uzbekistan №0141-03 "Hygienic classification of working conditions in terms of hazards and risks in the industrial environment, the severity and intensity of the working process". The object of our research were the drivers and loaders of the specialized machines for MSW transportation.

Taking into account that the labor activities of loaders of the specialized machines are characterized by significant physical activities, we evaluated the severity of working process by weight lifted and moved by hand, the working pose, numbers of stereotypical movements and inclinations of the body in the working process per shift. So, labor of the loaders of "Mahsustrans" association here in Tashkent was

classified as 3rd class by severity (hard work). 1st class by weight lifted and moved manually for men (over 30 kg), with physical and dynamic load which requires of dominantly using of arm and shoulder muscles (over 5000 per shift), also it requires to be in compelled operating body pose (up to 50% of the working day) with sloping up to 200 times per shift. Also I studied the working process intensity of the special machines' drivers. This labor classified as 3rd class and it is a 2nd degree stressful work. The work of drivers requires to be very attentive (up to 75% of the time), they should observe 9-15 industrial objects simultaneously. They have high degree of responsibility, which could lead to traffic accidents, with regulated regime of work with not enough breaks.

Thus, the working conditions of the workers of "Mahsustrans" association here in Tashkent may be characterized as "harmful" with production factors intensity, hardness and stressfulness of working process from 1st till 2nd degree range of 3rd class working conditions. They have harmful production factors in the working process which exceed the hygienic standards and have an adverse effect on their body.

A FOOD AS THE LEADING FACTOR IN MAINTENANCE OF HEALTH OF WOMEN OF REPRODUCTIVE AGE

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In connection with technical achievements of the XX-th century and in this connection, decrease in power inputs and physical activity, at the modern person the diet and food structure has essentially changed. In it deficiency of many micronutrients is marked different degree of expressiveness.

The Aim Of The Research is scientific justification to increase the efficiency of power in maintaining the health of women of childbearing age Fergana region.

Materials And Methods. Studying of a food also was spent to 2014-2015 by questioning on casual samples of women of 15-49 years on the Fergana area.

Results Of The Study. Women with an ill health on the Fergana area made - 11,7%. A parity of fats and carbohydrates in a daily food allowance of women, on the average, did not correspond to the sizes recommended the CART. The power contribution has made: fats - 22-24%; the squirrel - 8-9%; carbohydrates - 67-69%. At the majority of the interrogated women of size of their consumption did not correspond to norms of consumption and did not answer principles of a healthy food. Deficiency of vitamin C, calcium, vitamin B1, vitamin B2 and iron was observed. Food habits of the majority of the interrogated women do not correspond to principles of a healthy food: only 15-26% of women used recommended quantity of fruit and vegetables daily; only 25-50% of women used usual (3,2-3,5: fat contents) milk; more than 50% of women used butter for sandwiches; About 40% of women used superfluous quantity of salt.

As a result of our researches, at 16 women and girls the increase in the sizes of a thyroid gland is revealed. 61-70% surveyed suffer an anaemia, among them prevail iron-deficiency anaemia. In such women are found out insufficiency of vitamins A, B-12, B-6. According to poll, 39,8 % interrogated use meat and meat products 1-2 times a week, (9% - 1-2 times a month, 17,7% - are more rare, 46,7% interrogated use fruit during the winter period 3-4 times a week, 20,7% - 1-2 times a month,

17,3% - are rare. The given indicators at investigated group of women on 35-40% are worse, than among men of similar age group. Studying of an anaemia among 1500 women фертильного age from the Fergana area, has shown that the given pathology meets among women is more senior 35 years (44%), than in age categories of 15-18 years (28,5%) and 19-35 years (25,1%) much more often. Among women frequency of an anaemia of heavy degree in 2 times above (1,7%) is more senior 35 years, than at women is elderly till 35 years (0,76%). Among this category of women such actions, as weekly reception of preparations of iron, the use of enriched flour production, balanced diet propagation are most effective.

Conclusion. 1. The alimentary factor is the leader in maintenance of health of women fertile age. 2. The importance of alimentary factors, including biologically active additives in maintenance of healthy reproductive function of women, has the certain laws connected with superfluous and insufficient receipt with food in an organism valuable nutrients, pharmacological substances of food. 3. Among local foodstuff there is wide enough assortment of kinds and the grades, the physical maintenance physical and mental status of women fertile age.

HEALTH PROBLEMS ADOLESCENTS ATTENDING VOCATIONAL COLLEGES MINING AND METALLURGICAL PROFILE

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Preparation of qualified workers in the vocational education system is one of the national objectives is closely related to the intensification of production. In addition, the question of preserving the health of teenagers, students at vocational colleges in the mining and metallurgical acquires special relevance today.

The purpose and objectives of the study. In this connection, we have a study on the state of health of students of the third year of study of mining and metallurgical college of Almalyk, Tashkent region, acquiring the profession of metallurgist. Object of study. Research on the health status by a thorough medical examination of students. The survey covered 98 adolescents. The physical examination was attended by doctors following specialties: surgeon therapist, audiologist, a psychiatrist, a dentist, an endocrinologist, a dermatologist, and others.

The students of the college sector, in the third year of study are practical training in the workplace, along with human experts. The results showed that the working conditions of adolescents during the passage of the qualifying practices were characterized by the following set of climatic and production factors: changeable weather conditions, which determine a large variability of climate in the workplace, low atmospheric pressure, especially the location of jobs on the slopes, dusty air of a working area, noise and vibration. and processing of copper ore, causing tension of the functional state of the body of students, especially the cardiovascular system, respiratory, neuro-muscular system and the central nervous system, leading to a marked reduction of capacity and the development of fatigue by the end of the work shift.

College students in groups of health, as follows: 1 course- group I-18,1%, II group-59,7%, III group -22.2%, 2nd year Group I-16,3%, II group- 57,5%, III group,

26.2%, 3 course- group I-11,7%, II group- 50,8%, III group-37.5%. Thus, the state of health of students of mining and metallurgical college in the 1st, 2nd and 3rd year of training are different. In particular, the number of patients on the 3rd year, when training time allowed for work experience was the most high, indicating that the adverse influence of the conditions of production practices on the body of teenagers. On the basis of the research developed hygiene guidelines for the rational organization of educational and job training, and reduce morbidity.

THE ANALYSIS OF RESULTS OF MEDICAL INSPECTION OF PERSONS MARRYING

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Marriage - is primarily a complex physiological process, which is intended to the conception and birth of a child. Early marriage can cause infertility, premature birth and other adverse outcomes of women and children.

According to this scientific anatomical and physiological become fully mature women and men after 20 years. According to medical criteria girl 17 years are not fully developed physiologically pelvic bones are still developing. In the event of pregnancy at this age, fetal development and birth process will be very difficult. A child may be born with low birth weight, or congenital anomalies. Even in the case of a birth in this age of a healthy baby, it can be difficult when nursing.

Decree of the Cabinet of Ministers № 365, adopted August 25, 2003 "On approval of the medical examination of persons entering into marriage" has become a solid foundation for the construction of family relationships. Under this decree, all persons who marry must undergo a medical examination. The positive results yielded by the fact that the Scientific and Practical Center "Family", city and district "Government civil registration", as well as family planning centers to inform the persons entering into a marriage, about the benefits of the medical examination before marriage.

Purpose of the study. Analysis of the results of medical examination of persons entering into a marriage in Tashkent for 2014.

Results and discussion. Based on the Decree of the Cabinet of Ministers №365, adopted August 25, 2003 "On approval of the medical examination of persons entering into marriage," from 1 January 2004, persons who marry, undergo a medical examination to detect psychiatric, substance abuse, sexually transmitted diseases by tuberculosis and HIV/AIDS and others. Medical examination of this population in public health institutions is free of charge. Those who marry, the direction of the survey prepared regional medical associations. Marriage is registered only after a full examination of young people [1,3].

In 2014, the Department of Civil Registry Office of the Chilanzar district of Tashkent city received 2913 applications. All persons obrativishesya a statement passed a medical examination. Age applied - from 16 to 30 years of age or older. Women 16-17 years old accounted for 2% 18-19 years - 4%, 19-21 years - 12-16%, 22-24 years - 8-10%, 25-27 years - 4-6%, 28-29 years - 2%. Men 18-19 years amounted to 2%, 20-22 years - 2-4%, 23 years - 12%, 24 years - 22%, 25-26 - 12-14% of years, 27 years - 16%, 28-29 s - 2%, 30 years or older than 6%.

Information about the results of the medical examination of persons entering into marriage are regularly communicated clinics residence for the patronage of a young family. According to medical examinations anemia was diagnosed in 159 (17.6%) patients, diffuse toxic goiter - in 123 (13.6%), myopia - in 205 (22.8%), other diseases - at 899 (27,6%). The results of the medical examination were analyzed and then head of the department of family health centers and district offices of the Civil Registry Office developed a plan of action.

Conclusions. Thus it is necessary to raise the level of medical culture in the family, which will help improve the health of growing generation and the birth of a healthy generation. Since the birth of the child's family must pay particular attention to his health. Only healthy children as adults will be able to ensure the birth of healthy offspring and healthy children born only from healthy parents.

THE IMPORTANCE OF GOOD FOOD IN THE FAMILY AS A FACTOR IN THE PREVENTION OF TUBERCULOSIS

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According to WHO, a high risk of tuberculosis are economically undeveloped countries. According to the forecast for the next 30 years the number of tuberculosis cases could reach 90 million. Currently, the globe recorded 9 million. TB patients, 60% of them in developing countries. Every year, tuberculosis kills about 3.4 million. People. In Uzbekistan, a number of authors fully explored distribution, and for the incidence of tuberculosis. But despite the advances in diagnosis and treatment of disease, the incidence remains high. Hygienic assessment of nutritional status and development of measures for the balanced nutrition of the population of the Republic of Uzbekistan among the risk factors for tuberculosis are not fully understood.

The Purpose And Research Problems. To study the incidence of tuberculosis in the Fergana region, and to develop a balanced diet for patients with tuberculosis.

Materials And Methods Of Research. In the study of family nutrition used interrogatory-weighting and weighting methods.

Results Of The Study. The incidence of tuberculosis in the Fergana region amounted in 2000 - 50.6%, 2001 - 60.0%, 2003 - 70.0% to 100 thousand. Population, the highest rate was in 2006 - 65,9%. Of the above it is clear that in 2006 - compared to 2000, the incidence of TB has increased by 15.3%.

In the study of actual nutrition patients with tuberculosis energy value of the diet was 2300 kcal. It was established deficiency of proteins, fats and vitamins. Carried out hygienic assessment of actual nutrition patients with tuberculosis made it possible to create, develop objectives and principles of good nutrition. In the study of dietary energy it was scientifically proved full payment of lost energy, stimulation of assimilation, repair, improvement and balanced unbalanced immunological reactions of the body against disease factors.

In the study of dietary intake among TB patients showed the following performance indicators are as follows: in 46% of cases - not complied with the diet, 29% - do not eat breakfast, 55-63% - did not comply with a balanced diet, in turn, intervals and meal-time. The results indicate the failure of the following elements: protein - 21% fat - 29% of essential amino acids - 31% vitamins - 27% and minerals - 21%.

Conclusions. We found that a violation of the balance of nutrients in the daily diet, failure to comply with a variety of food and sanitation, the discrepancy comes from food into the body of energy in comparison with the energy consumed, leading to the development of the disease.

When the permanent status of the power structure and function of the body is not disturbed, increased adaptation to external factors. When stress states of the organism in an optimum position not observed shifts and homeostasis.

As a result, unbalanced, inadequate nutrition and waste, as well as under the influence of other negative factors in the body may experience a decrease in functions and adaptation leading to the development of Mycobacterium tuberculosis in the organism. To prevent the disease in the daily diet should enter poultry meat, grapes, pomegranate, pumpkin juice, tea with honey, mother's milk, goat's milk and honey. Enrichment of the diet in essential amino acids (methionine, cystine), half-saturated fatty acids (arachidonyl, linola) and vitamins A, B1, B2, B6, B12, B15 is particularly important in the prevention of various forms of tuberculosis.

URBANIZATION AND HEALTH OF THE PERSON

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One of the most typical features of development of a modern society is the tachyauxis of cities, continuous rate of augmentation of number of their inhabitants, augmentation of a role of cities in society lives, transformation of countryside in city, and also agricultural population migration in cities.

Urbanization (from the Lat. Urbanus - city) is a process of increase of a role of cities in society development. The special city attitudes cover socially-professional and demographic frame of the population, its mode of life, placement of production and moving. Urbanization preconditions are: industry growth, an excavation of territorial division of labor, development of cultural and political functions of cities. Cities existed from an extreme antiquity; however the urbanity civilization has arisen only in our century. If the planet population as a whole doubles for 35 years, urban population - for 11 years. And the largest centers grow twice faster small cities. In the XIX-th century beginning in world cities lived only 29,3 million persons (3% of the population of the Earth); by 1900 - 224,4 million (13,6 %); by 1950 - 729 million, (28,8%); and to 1980 - 1821 million (41,1%). It is possible to tell that now the majority of citizens of the world are born by townspeople. The urban population lobe in Europe compounds 69%, in Asia - 38%, in Africa - 20%, in the North America - 75%, Latin America - 65%, in Australia and Oceania - 76%. The urban population lobe in the educed countries is especially great: in the USA - about 73%, in France - 78 %, in Germany - about 85 %, in Great Britain - 91 %. The country is considered almost completely urbanized if 4/5 its population lives in cities.

In big cities have interlaced both positive, and negative sides of scientific and technical progress and industrialization. The new ecological medium with high concentration of anthropogenic factors is created. One them, such as free air contamination, a noise high level, electromagnetic radiations, are industrialization immediate product, others, such as a concentration of the enterprises in the circumscribed terrain, a dense population, migratory processes and so on- an urbanization consequence as moving forms.

Health of people appreciably depends on quality both connatural, and anthropogenic medium. In the conditions of a big city influence on the person of a connatural component is relaxed, and action of anthropogenic factors is sharply enhanced. Cities in which in rather small terrains a considerable quantity of people concentrates, motor transport and the various enterprises, are the centers of technogenic influence on the nature. Gas and dust exhausts of the industrial enterprises, shunt by them in surrounding reservoirs of sewage, a municipal and household waste of a big city pollute environment various chemical elements.

The urbanization ambiguously reacts on a human society: on the one hand, the city gives the person a series of socioeconomic, social and cultural advantages affects its intellectual development, gives the chance for the best realization of professional and creative abilities, with another - the person keeps away by nature and gets on medium with harmful effects - contaminated air, noise and the vibration circumscribed inhabited terrain, the complicated system of supply, dependence on transport, the constant forced dialogue with set of strangers - all it unfavorable affects on its physical and mental health.

The problems bound to urbanization, it is necessary to solve not separate private actions, finding precocious and ineffective decisions, and having developed a complex of interdependent social, ecological, technical and other measures. In all cases the person and environment should be considered as a unit.

SOME ASPECTS OF THE ACTIVITIES OF PRIMARY HEALTH INSTITUTIONS TO DETECT ONCOPATHOLOGY IN CHILDREN

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Goal. The main principles of prevention of oncological diseases of childhood, based on evaluation of the quality of medical and social care for children with cancer.

Materials and methods. For definitions of some indicators of primary outpatient was conducted continuous retrospective study of 524 outpatients children from birth to 14 years with malignant tumors (External testing) on the basis of oncological dispensaries for the period from 2005 to 2009. Among them: Tashkent -256; Khorezm - 215; Navoi - 53.

Results. Among the children surveyed was significantly dominated by boys $56,7 \pm 2,16\%$ compared with the girls $43,3 \pm 2,16\%$ ($p \leq 0.05$). The largest number of patients in the age group 2-4 years and 10-14 years. The smallest number of children in the group of patients from 0 to 1 year $13,1 \pm 1,48\%$, 8-9 years $14,89 \pm 1,56\%$, 5-7 years $20,04 \pm 1,75\%$, 2-4 years $24,62 \pm 1,88\%$ and 10-14 years reaches the maximum number of ($27,29 \pm 1,95\%$). In Navoi region the most children with cancer account for the age group 8-9 years, $18,9 \pm 5,38\%$ and 10-14 years $41,5 \pm 6,77\%$ ($p \leq 0.05$). In Tashkent, the maximum number of visits to the doctor of primary health care facilities in the community ($88,3 \pm 2,03\%$) accounted for the first three months after the first symptoms of the disease, and a minimum number of patients to consult a doctor after 6 months ($18,8 \pm 2,44\%$) and one year later ($0,39 \pm 0,39\%$). In Khorezm region more than a quarter ($25,6 \pm 2,98\%$) patients sought medical help only after 6 months from the onset of the disease, and $4,7 \pm 1,44\%$ a year. In Navoi region the majority of children with cancer ($54,8 \pm 6,84\%$) applied to the clinic after 6-12 months

after the first symptoms of the disease, and only $24,5 \pm 5,91\%$ during the first three months. In Tashkent, the first day after the treatment in the Oncology Center was directed $18,0 \pm 2,40\%$ of patients, in the Khorezm region $41,9 \pm 3,36\%$, in Navoi region $30,2 \pm 6,31\%$. So later, access to a doctor led to the fact that $53,82 \pm 2,18\%$ of patients the disease is detected in stage III-IV.

The main burden of the preliminary diagnosis of cancer pathology in children, it is necessary on general practitioners and pediatricians $31,1 \pm 2,0\%$, the second - children's oncologists $26,9 \pm 1,9\%$, the third $20,9 \pm 1,8\%$ pediatric surgeons. This is consistent with the structure of morbidity, where the first place in the specific gravity of leukemias are $36,6 \pm 2,1\%$, it is with them for the first time, patients are turning to GPs and pediatricians, then a brain tumor, soft tissue and osteochondral system ($11,36 \pm 1,3\%$; $11,1 \pm 1,3\%$ and $8,4 \pm 1,2\%$) is mainly the prerogative of doctors of surgical profile. The timely take on a clinical account a specialized agency within the first month after diagnosis under observation received: Tashkent $17,6 \pm 1,7\%$, in Khorezm $15,8 \pm 2,5\%$ and $7,5 \pm 3,6\%$ Navoi. The majority of patients are taken to account in Tashkent and Navoi just a year after the discovery of $40,2 \pm 2,1\%$ and $56,6 \pm 6,8\%$, respectively, in the Khorezm region and up to six months $45,6 \pm 3,4\%$. However, it can be said reliably ($p \leq 0,05$), that percentage is not being on dispensary entirely in Khorezm 1,9 times higher than in Tashkent and 3,4 higher than in Navoi.

Conclusions. Late referral of patients with malignant neoplasm of medical care shows a low health literacy, absence of oncological alertness parents. In terms of preventive work among the population is necessary to strengthen measures on the promotion of primary knowledge and oncological alertness.

DYNAMICS OF STATISTICAL INDICATORS OF PNEUMONIA IN CHILDREN UNDER 14 YEARS FERGANA

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Pneumonia - the most common and very alarming disease in a person's life. According to statistics, the incidence of pneumonia ranges from 3 to 30 per 1000 population. Pneumonia is the direct cause of death in 20-25% of cases and is the fifth leading cause of death. According to the National Institutes of Health, each year more than 4000000 Americans suffer pneumonia, of which 25% require hospitalization. In Russia, the incidence of pneumonia was 385.7 per 100 000 population. Despite the success of antibiotic therapy, the mortality rate from pneumonia is increasing worldwide, from 1989 to 1993, this figure has almost tripled - from 6.6 to 18 per 100 000 adults. According to WHO statistics, deaths from community-acquired pneumonia in children is 5% of nosocomial - 20% among the elderly - 30%. Errors in diagnosis of pneumonia reach 30%, a diagnosis of pneumonia during the first three days is put in 35% of cases.

The Aim Of The Research. The study of the dynamics of the development of statistical indicators for 2011-2013, of pneumonia. children under the age of 14 years in Fergana.

Materials And Methods. An collection of data on the incidence of pneumonia in patients under 14 years, according to medical records and statistics in the regional statistical office. There was a statistical method of research based on statistical pro-

cessing of absolute numbers with the calculation of intensive indicators.

Results Of The Study. This research work has revealed the dynamics of the development of pneumonia in children. As a result of our research in 2011. The disease cases registered amounted to 948.62 in 2012 - 662.65, in 2013 - 636.59 (per 100 thousand. Population). First identified the disease in 2011 amounted to - 425.3, in 2012 - 353.5 in 2013 - 377.85. Taken on the "D" records made in 2011 - 317.3, in 2012 - 309.1, in 2013 - 313.5. From this we can conclude that by 2013 the trend of increasing incidence of pneumonia according to research. Factors contributing to the occurrence of pneumonia in young children include: violation of, care and feeding, cooling, rickets, dystrophy, allergic diathesis, immunodeficiency, reduced secretor IgA, a violation of the mucociliary barrier bronchi. To reduce the incidence of pneumonia in children can draw the following.

Conclusion. 1. It is necessary to provide timely qualified medical aid. 2. Systematically conduct health education among the population in kindergartens, schools, adherence, nutrition and child care. 3. Promptly treat infectious diseases, especially of the nose and pharynx. 4. Tempered, strengthen the immune system, exercise. 5. Get rid of bad habits, especially smoking. 6. Wash your hands if necessary. 7. Eat right. 8. The right to rest.

DEVELOPMENT OF REHABILITATION PROGRAMS OF THE MANUFACTURER B GOVERNMENTAL PRODUCTION

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Health workers, safe working conditions, prevention of occupational and general morbidity reduction is one of the most important tasks of social policy of the Republic of Uzbekistan. Currently it is developing rapidly glassworks. An increasing number of enterprises producing new types of glass which are widely used in various industries, agriculture, home.

Methods. Sanitary inspection Sanitary sosleduyuschim description and instrumentalno-Other laboratory and mathematical methods.

Results of the study. workers "OAO Quartz". The company employs 1700 person is them women 203, men 1497. Consider the number of workers on the shop №3 example for the production of glass - products. The shop employs 20 people. Leading unfavorable factors of industrial environment are microclimate heating radiation-convection type in most workplaces workshop production of bottles; cooling microclimate in the workplace Loader workshop training Shih - you; intensive industrial noise exceeding hygienic standards by 15-16 dBA; Nali - Chiyo in the working area of chemicals and dust, the average concentrations whose shop Preparations charge exceeded MPC by 1.4-2.8 times.

Findings In the production of glass workers may be exposed to noise. Hearing loss is a common occupational disease in the manufacture of container glass. In the process of forming glass high pressure container used in the cooling and molding products, may cause a high noise level. Noise from work units at the Press vaniyu glass can reach 100 dBA or more, which can lead to hearing loss. The workers used ear plugs not to damage your hearing. Risk Injury should be minimization Zero van by automating operations Plate glass and software working protective gloves and long apron.

Conclusion. In order to optimize working conditions in modern enterprises for

the production of glass containers has prioritized in the sanitary and health preventive measures as follows: **1.** The use of modern technological equipment that meets current health standards. **2.** In order to reduce the adverse effects of industrial noise and microclimate recommend heating device remote controls (protection time) with the introduction of together - to change professions and mandatory use of personal protective equipment.

HUMAN IMMUNODEFICIENCY VIRUS (HIV) INFECTION IN CHILDREN AND IT'S PREVENTIVE MAINTENANCE

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Globally, the number of new HIV infections continues to fall. There were 2,5 million new HIV infections [2,2–2,8 million] in 2012. The drop in new HIV infections is most pronounced among children.

Definition. AIDS, or Acquired Immunodeficiency Syndrome is a disease that attacks the human immune system making it difficult and impossible to fight off diseases and illnesses. HIV, or Human immunodeficiency Virus is the virus that attacks the immune system cells that helps in fighting off diseases and illnesses.

(HIV) infection is a viral infection that progressively destroys certain white blood cells and causes acquired immunodeficiency syndrome (AIDS). Human immunodeficiency virus (HIV) infection is caused by the viruses HIV-1 and HIV-2 and, in young children, is typically acquired from the mother at the time of birth. Signs of infection include slowed growth, enlargement of lymph nodes in several areas of the body, developmental delay, recurring bacterial infections, and lung inflammation.

The diagnosis is based on Specific method IF. Children who receive anti-HIV drug therapy (called antiretroviral therapy or ART) can live to adulthood. Infected mothers can prevent transmitting the infection to their newborn by taking antiretroviral therapy, feeding their newborn formula rather than breast milk, and, for some women, undergoing a cesarean delivery. Children are treated with the same drugs as adults. For HIV infection in adults, see Human Immunodeficiency Virus (HIV) Infection. There are two human immunodeficiency viruses: HIV-1 HIV-2

Infection with HIV-1 is by far more common than infection with HIV-2 in almost all geographic areas. Both progressively destroy certain types of white blood cells called lymphocytes, which are an important part of the body's immune defenses. When these lymphocytes are destroyed, the body becomes susceptible to attack by many other infectious organisms. Many of the symptoms and complications of HIV infection, including death, are the result of these other infections and not of the HIV infection itself. HIV infection may lead to various troublesome infections with organisms that do not ordinarily infect healthy people. These are called opportunistic infections because they take advantage of a weakened immune system. Opportunistic infections may result from viruses, parasites, fungi, and, unlike in adults, sometimes bacteria.

Acquired immunodeficiency syndrome (AIDS) is the most severe form of HIV infection. A child with HIV infection is considered to have AIDS when at least one complicating illness develops or when there is a significant decline in the body's ability to defend itself from infection. About 7,9 % of the people infected with HIV in the city Tashkent are children or adolescents. In 2012, an estimated 57 new cases were diagnosed in children under 14 years of age. Transmission of HIV Infection young children HIV is most com-

monly transmitted to children by an infected mother before birth or during birth.

The preventive maintenance of the issue HIV from full-grown child by means of ARV preparation does not influence upon results of the examination by method PChR DNA HIV, since viral DNA continues to be revealed in mononuclear periphery shelters infected of child. AIDS is a universal problem. Always keep prevention in mind. All together we shall be able to stop spreading the AIDS!

MEDICAL AND BIOLOGICAL SECTIONS

PHARMACOLOGICAL PROPERTIES OF WILLIO-HERB

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Ivan Tea is a genus of perennial plants of the family kipreyny . Parts of willow-herb harvested this way are used for the preparation of decoctions , infusions , tinctures and other preparations of the plant. The composition of young leaves and roots kipreya uzkolistnogo includes from 10 to 20 % of tannin . Leaves contain about 15% of the mucus . Also, the leaves of the plant are rich in fiber, which normalizes the bowels , but it does not split

If Oral use tannins have pronounced anti-inflammatory effect on the gastrointestinal tract , so foods containing tannin, recommended for use in these diseases . Also tannins exhibit antibacterial and hemostatic properties help to eliminate or prevent the unpleasant symptoms of bites bees. Provides normal digestion ; It improves memory and muscle reflexes , reduces irritability ;

It normalizes blood glucose levels; Essential for the synthesis of interferon in the body. The leaves kipreya uzkolistnogo detected macronutrients such as magnesium, calcium, sodium, potassium, phosphorus and others. It plays an important role in the absorption of ascorbic acid, potassium, calcium, sodium and phosphorus; It reduces the negative effects of stress and depression; It enables a number of enzymes that provide carbohydrate and energy metabolism. Potassium is an essential element for the normal functioning of all organs, including heart; Adjust the water-salt metabolism in the body;

Ivan - tea is an excellent anti-inflammatory agent used in a number of inflammatory diseases. Among them we should highlight the male and female reproductive system inflammatory disease , and inflammatory disorders of the respiratory system , digestive tract, urinary system . As Cyprus angustifolia helps with colds and respiratory diseases, but only if supplementation plant was started in the first two days after the first symptoms of disease.

If you start to use willow-tea later, either no effect, or it will be reversed. Cyprus angustifolia has a strong enveloping and astringent - so the plant is recommended to use in pathologies of the digestive tract - gastritis, colitis, ulcers. Like Leonurus cardiaca, willow-herb has a mild sedative and hypnotic effect. The antioxidant properties of fireweed angustifolium provided by the content in the plant phenolic compounds, which are particularly powerful antioxidants, and vitamins A and C. Due to this property, willow-herb is often recommended as a means of prolonging youth.

Sosudoukreplyayuschee property fireweed angustifolium caused by the content of bioflavonoids , which strengthen the walls of capillaries and blood vessels , mak-

ing them less brittle and more elastic and protect them from the formation of atherosclerotic plaques . Ivan tea is used in the following pathologies : nausea, vomiting ; stomach ulcer; chronic fatigue syndrome ; avitaminosis; overwork; joint pain; decreased visual acuity ; BPH; prostatitis; atherosclerosis; heart and vascular disease ;migraine; insomnia; arterial hypertension; depression; neurosis ; inflammatory diseases of the genitourinary system ; anemia; sinusitis , sinusitis; bronchitis, pneumonia ; influenza ; menopause, menopause ; irregular, heavy periods; whites; oncological diseases; alcoholism, alcohol withdrawal syndrome ; intoxication , including alcohol ; Smoking (helps to quit) . Ivan - tea : structure , properties , preparation - videos Koporye tea History of Tea angustifolium fireweed has been known since ancient times.

Also called willow-tea, tea oporsky, Russian tea. Useful properties of willow-herb (Koporsky tea) Ivan-tea with a wonderful aroma and pleasant taste, with a very useful plant, has a number of medicinal properties. Dentists recognize its anti-inflammatory effect, as well as the ability to prevent tooth decay. Therapists say that in the use of willow-herb increases resistance to respiratory viral infectious disease, normal liver and kidney function, increased potency.

SPREADING DEPRESSION AT YOUNG PEOPLE

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Currently one of every five residents of our planet, regardless of age, sex or social status, faces with some type of mental health problems. Nowadays, depression is one of the most widespread disease among these problems. It is estimated that approximately 120 million of population worldwide suffer from this disease. "Depression" is known from ancient times. Hippocrates, the ancient Greek scientist, explained "Depression" as "Melancholy" in detail. There are various causes of disease: traumatic situations, inherited genetic factors, alcoholism, drug addiction. Most of the people are under stress as a result of brain overloading which increases the tension. The main symptoms of the disease include: 1) descent of mood 2) loss of interest in lovely profession, 3) fatigue during the day. This trio is essential. In medicine it is called "Triads". The disease has already been spread. Such people always keep their heads down and their eyes look at a point, are not interested in conversation. They say that they are not able to be happy. This disease can commence at any age. Women suffer from this disease two times more than men. Probability to be exposed to this disease is more at a young age, causes of emergence differ from adults. At a young age disease is stimulated by changes in biological neurohormonal processes in the body. These changes, including amongst youth, increase levels of mental stress. The tension of the young people who do not share with anyone inside, separate from the general communication. The young people cannot share their tension inside with anyone, commonly they move off the communication. They do not talk about their problems with the relatives, feeling themselves lonely and helpless as a way out they suicide under undesirable conditions like throwing themselves down, poisoning, hanging. The disease carries seasonal nature. It occurs most of all in autumn and spring months. Autumn is a visionary season. In spring everywhere becomes green and beautiful. As if the nature takes its beauty from people's energy. An

important role in formation of depression plays biogenic factors. When researchers examined the human brain they observed the lack of substances called serotonin, noradrenaline. Serotonin is a "Happyness" hormon. There are some world's most famous people suffering from depression.

1) N.V. Gogol – the great russian writer of the 19th century, died from this disease in his office. 2) UK prime minister W. Churchill. 3) The popular "Harry Potter" novel author John Rawlings.

I would like to direct your attention to a theory of the founder of the science of psychiatry psycho-neurologist Austrian scientist S. Freud according to which depression is not really a sign of weakness. This is the sign that a man always wants to stay strong.

Thus, depression is actually a weakness of will, not a mental disorder, it's a medical problem. In order to solve this problem we need to apply to the specialized psychiatrists. Timely treatment by doctors can prevent and treat the condition successfully and effectively in its earlier stages. Your successful life and bright future are in the doctors' healing hands.

MODERN PHARMACOTHERAPY FOR "DIABETES MELLITUS"

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Diabetes mellitus (DM) is one of the most serious diseases that could result in severe complications, disability and death cases, characterized by disorders of all types of metabolism and vital activity body as a whole. Currently diabetes widespread worldwide. In this diabetes can be called non-infectious epidemic of the XXI century. According to the World Organization Health Protection (WHO), worldwide there are more than 320 million people with diabetes, of which 4-5% are children. Consequently, a catastrophic increase in the number of cases assumes the character of infectious epidemics. Obesity and diabetes on the one hand, hypertension and coronary heart disease, on the other, make up the so-called metabolic syndrome "Deadly Quartet". In Uzbekistan only dispensary composition of the more than 118 thousand patients with diabetes mellitus. In Uzbekistan, as in the other the efforts of the world, the incidence of diabetes increases annually. SD in the Republic of Uzbekistan in the structure of all endocrinopathies is second only illness thyroid cancer, and its share is 31.3%.

According to the WHO for 15 years 2% of patients with diabetes develop blindness and 10% of diagnosed severe visual impairment. Also, the disease is among the leading causes of kidney failure, which kills 10-20% of patients. Thus, according to the International Diabetes Organization, in 2011 the number of people with diabetes has reached the level of 366 million. According to the WHO, in 2005-2030. Mortality from this disease will increase 2 raza.V Modern pharmacotherapy diabetes use insulin and oral hypoglycemic agents sulfonylureas, biguanides, α -glucosidase inhibitors, and others. Most of these drugs are imported, the expensive and they have various side effects. Based on this finding and pharmacological study of new hypoglycemic agents based on local natural resources of the republic is a very urgent task. In folk medicine, theplant Chicory use dasa sedative, anti-inflammatory, antipyretic, antibacterial, blood purifier, cholagogue, vitamins, diuretic, vasodilator, improves metabolism means. According to the literature, the main active ingredient is chicory inulin that stimulates glucose transport through the cell membrane and lead to hypoglycemia. Currently, a new diabetes drug on the basis of the chicory

plant. Thanks hypoglycemic property decoction of chicory has insulin-like effect, so it can be used to treat diabetes. From the above it can be said that the preparations made by the plant Chicory replaced insulin are convenient to use, but also financially beneficial, affordable and accessible drugs that assigns them not only for treatment but also for prevention of diabetes.

THE INFLUENCE OF MUSIC ON THE BRAIN

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Trial Objectives and Purposes. To verify the rightness of the hypothesis that classical music positively impacts on the students' memory and that earphones, on the contrary, are deleterious and negatively impact on the recall.

Materials and Techniques: thirty 1st and 2nd year students of Tashkent Medical Academy; questionnaires; Computer Electroencephalograph; red-and-black-table by Platonov and Schulte; headphones; speakers; Johann Sebastian Bach's "Air on the G String". The research consists of three phases. On the first phase sixty two first and second year students of Tashkent Medical Academy were conducted a survey whereby thirty of them were selected. Students who have ever had any head injuries, who are able to play a musical instrument and/or has a musical education, who were taking any nootropic drugs were excluded. On the next phase, previously selected thirty students were taking a test. A test consisted of three stages, each of which had four similar tasks. The first task composed five rows of digits. An examiner wrote digits row by row on the desk. Then in five seconds she erased them. Students had to memorize each row and write them down on the sheet. The second task contained ten two-digit numbers. The examiner wrote numbers and erased them successively, so that students had to keep in mind all of them. As the examiner turned towards students, they had to take their pencils and write down all the numbers they had remembered. The third and the fourth tasks were similar to the previous two ones, but they composed syllables instead of digits and words instead of numbers. The first stage was carried out using earphones with Johann Sebastian Bach's "Air on the G String"; the second one was conducted in a silence (control group); and the third stage was carried out with the same music but in speakers. During the last third phase of the research, which was conducted in Republican Sport Medicine Scientific Practical Centre under National Olympic Committee of Uzbekistan with help of recreation therapist and sport psychologist Pardaboev O.B., 30 students were taken an electroencephalogram using red-and-black-table Platonov Schulte (24 red and 25 black numbers). The EEG was carried out following the protocol: 1) The record of a baseline EEG, while a student was matching numbers from 1 to 25 in right order in a silence; 2) A recess during 1 hour in order the student could forget the numbers combination; 3) The record of an EEG with a music using speakers for listening to music while student was matching numbers from 1 to 25 in right order; 4) A recess during 1 hour in order the student could forget the numbers combination; 5) The record of an EEG with a music using headphones for listening to music while student was matching numbers from 1 to 25 in right order.

Results. I In the first experiment it is found out that the process of memorizing decreases while listening to baroque music using earphones (the per cent of mistakes is 17.3%) and increases while listening to the same music using speakers (the per cent of mistakes is 11.8%), comparing with the control group (the per cent of mistakes is 15%). As a result of the second research with EEG and red-and-black-table

ble by Platonov and Schulte (24 red and 25 black numbers) it is ascertained that the expression of alpha-rhythm increases (from 9.17 μV in a baseline EEG to 10 μV while using speakers). The expression of delta-rhythm was within the normal range. Using headphones decreased the expression of alpha-rhythm comparing with speakers (9,5 μV) and increased the expression of delta-rhythm (from 11 μV in a baseline EEG to 11,83 μV while using headphones). Switching and distribution consideration which was determined using red-and-black-table by Platonov and Schulte increased while students were listening to music, comparing with the same test in a silence (from 39sec in a silence to 32sec while listening to music).

Conclusion. The obtained data indicate that the functional activity of the brain declines and show the prevalence of inhibitory processes while using earphones. However listening to classical music without earphones improves learning capacity and can help to enhance memorizing process while preparing for examinations..

DYNAMICS OF DEVELOPMENT, FORMATION AND DEVELOPMENT OF MICROVASCULAR STOMACH IN OLD POSTNATAL ONTOGENESIS

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Among endocrine diseases diabetes is the most common. In some regions of the world, its share comes to 56%. He damaging vessels of various calibres, causing macro- and microangiopathy, metabolic changes in the microvasculature of, promotes their structural and functional lesions, various complications.

The reason for the early development of vascular lesions and diseases of the internal organs, according to many reports, is hyperglycemia.

The aim of the Research. The study of the dynamics of development, the formation and the formation of microvascular stomach in old postnatal ontogenesis (2 years) with diabetes mellitus.

Materials and methods. To study angioarchitectonics stomach through the thoracic aorta was slowly introduced into the mass Gerota H.H.Kamilova modification. The material obtained by the method of antireflection Malygina and after appropriate wiring embedded in paraffin. Sections enlightened drugs thickness of 60-90 m in the subsequent dew axing concluded polystyrene. Thereafter, the slides were stained with haematoxylin-eosin.

It was determined diameters, the thickness of each layer microvessels and percentage. Statistical treatment of the results was performed using standard methods of variation statistics using Student's t-test.

Results of the Study. The results indicate that after two years the simulation of alloxan diabetes in rats in the interstitial tissue of all layers of the stomach wall and around the vessels noted more significant growth of connective tissue with the formation of thick layers and hyalinises foci. Consequently, arterioles and capillaries is significantly narrowed. Especially pronounced sclerotic changes around the arteries, the wall is considerably thicker. In this, the endothelium and smooth muscle cells fuse to form a single layer in the wall of the hyperchromic arterioles. Around these vessels muscular layer of the stomach loosened and infiltrated connective tissue cells and collagen fibres penetrated. The submucosa of the gastric funds, described inflammatory and sclerotic changes are more pronounced than in other departments. Perivascular infiltration causes deformation, thickening of the vessel

walls, narrowing of the lumen with marked venous stasis. In the lamina propriety glands between the thickened layer of fibrous connective tissue, decreases the capillary, which indicates atrophy of the glands.

Conclusion: 1. When alloxan diabetes observed in the stomach wall thinning and thickening of the endothelial basement membrane adventitia of arterioles and capillaries, the progression of inflammatory and sclerotic processes in the mucosa and submucosa.

2. In the subsequent (2 years) sclerotic changes include other membrane of the stomach, causing degenerative changes in the walls of the stomach, irregular changes in microvascular lumen, leading to hypoxia and organ failure.

THE INDEX OF LIPID PEROXIDATION IN THE BRAIN DUE TO ALCOHOL CONSUMPTION

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Importance and relevance of the research topic. Alcoholism is a burning tissue in today's society. Furthermore it is a medical problem, because alcohol consumption results in different diseases, including damage to the brain, other tissues and organs.

The purpose of the research. o study changes amount of malondialdehyde in various parts of the rats' brain due to the effects of alcohol.

Materials and methods. The research was conducted on 40 white barren rats weighing 150-200 g. Solution of ethanol 25% intragastric injection was given to 32 rats within 28 days. Control group consists of 8 rats and they were given intragastric injection with distilled water. Animals were decapitated after 7,14,21 and 28 days from the beginning of the experiment. A level of MDA in the homogenate of thalamus, large hemispheres and trunk of the brain was defined by a method developed by Andreeva and her coauthors in the homogenate of thalamus, large hemispheres and trunk of the brain.

Results and findings. The results showed that lipid peroxidation intensified in all tissues of tested animals as well as in the brain, but its dynamics and intensity were different. It was observed that the amount of MDA in plasma tended to increase during the days 7-14 , then its amount increased sharply on the 28 th day of the experiment and exceeded the normal index by 2.53 ($P<0.001$). The MDA concentration in the brain hemispheres increased gradually by 1.03 , 1.05 times between day 7 and 14. It was observed that it rose noticeably on days 21 and 28 (1.16 ;1.20 times , $P<0.001$). The following changes took place in the thalamus of the brain.(statistically significant 1.03, 1.03, 1.04 and 1.28 times). The amount of MDA increased considerably in the trunk compared to other parts of the brain by 1.12 times from day 7 and it rose by 1.25;1.26; and 1.5 times on days 14,21 and 28.

Conclusion. Lipid peroxidation increased in the brain like other organs .Dramatic changes that occurred in other tissues did not take place in the brain, but there was a significant rise in the amount of MDA. MDA concentration increased in the brain hemispheres and thalamus only during last days of the experiment, whereas there was a considerable rise in the amount of MDA starting from the initial stage of the test. This is related to free radicals formed by alcohol and its consumption leads to deterioration of membranes and tissues dystrophy.

3-D PRINTING OF HUMAN ORGANS – EXCITING INVENTION

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The emerging process of 3-D printing, which uses computer-created digital models to create real-world objects, has produced everything from toys to jewelry to food. Soon, however, 3-D printers may be spitting out something far more complex, and controversial: human organs.

For years now, medical researchers have been reproducing human cells in laboratories by hand to create blood vessels, urine tubes, skin tissue and other living body parts. But engineering full organs, with their complicated cell structures, is much more difficult. Enter 3-D printers, which because of their precise process can reproduce the vascular systems required to make organs viable. Scientists are already using the machines to print tiny strips of organ tissue. And while printing whole human organs for surgical transplants is still years away, the technology is rapidly developing. The idea of printing a human kidney or liver in a lab may seem incomprehensible. But to many scientists in the field, bioprinting holds great promise. Authentic printed organs could be used for drug or vaccine testing, freeing researchers from less accurate methods such as tests on animals or on synthetic models.

Then there's the hope that 3-D printers could someday produce much-needed organs for transplants. Some 18 people die in the United States each day waiting in vain for transplants because of a shortage of donated organs -- a problem that Anthony Atala, director of the Wake Forest Institute for Regenerative Medicine and a pioneer in bioprinting, calls "a major health crisis."

Bioprinting works like this: Scientists harvest human cells from biopsies or stem cells, then allow them to multiply in a petri dish. The resulting mixture, a sort of biological ink, is fed into a 3-D printer, which is programmed to arrange different cell types, along with other materials, into a precise three-dimensional shape. Doctors hope that when placed in the body, these 3-D-printed cells will integrate with existing tissues.

The process already is seeing some success. Last year a 2-year-old girl in Illinois, born without a trachea, received a windpipe built with her own stem cells. The U.S. government has funded a university-led "body on a chip" project that prints tissue samples that mimic the functions of the heart, liver, lungs and other organs. The samples are placed on a microchip and connected with a blood substitute to keep the cells alive, allowing doctors to test specific treatments and monitor their effectiveness.

For years doctors and surgeons have utilised CT and MRI scanners to delve into the inner workings of the human body in order to diagnose and plan surgeries. These systems produce a 3 dimensional scan, however the scanned data is only presented and analysed in 2D. At 3D Medical we understand the importance of accurate information projection and understand the value of 3D printing. Therefore our system enables the scanned information to be converted directly into a physical 3D model, as accurate as the scan itself. 3D printing or additive manufacturing involves the process of systematically building a physical model layer by layer from the ground up. There are many different processes that are categorised as 3D printing however the principle behind each is the same. Generally 3D printing has been used by the manufacturing industry to quickly and cheaply produce prototype parts for testing or trials prior to mass production. However here at 3D Medical we're focused purely on the clinical benefits and medical applications 3D printing presents.

At 3D Medical we utilise two main 3D printing processes. A colour printing sys-

tem, which enables; blood vessels, major arteries, tumours and lesions to be highlighted for use as diagnostic, pre-surgical aids and patient engagement. The other key system produces parts in a hard nylon polymer, commonly used by orthopaedic surgeons in pre-surgical planning. This material is hard, can be cut and drilled into. Plates and brackets can be tested and surgeons can carefully plan bone breaks and screw placement prior to surgery.

We believe that the greater use and application of 3D printing and the incorporation of its use into best practice protocols offers clinicians, researchers and hospital providers the opportunity for greater effectiveness and efficiency and, for patients, improved outcomes.

PARTICIPATION OF YOUNG TEACHERS IN THE IMPLEMENTATION OF MODERN INFORMATIONAL TECHNOLOGIES AND ENGLISH LANGUAGE IN THE EDUCATIONAL PROCESS

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At present, it is difficult to imagine a modern physician without knowledge of the English language. The availability of the Internet allows the doctor to have the results of the most recent achievements in the various fields of medicine, allows access to libraries around the world, and allows access to foreign colleagues. The possibility of internships abroad already opened. The learning process of students is based on the active mastering of information on obstetrics and gynecology. The introduction of modern information sources in the learning process is indisputably the most important achievement is a major opportunity to increase the level of learning and teaching in our department. Today in the department 30% are just young teachers. The criteria for admission to employment as an assistant of the department was the level of professional knowledge in the field of obstetrics and gynecology, have a master's degree TMA, the presence of teacher training, must have a certificate IELTS, work experience in the department from 1 to 3 years.

The learning process of students in our department is made up of all of the following components: inter-professional collaboration, interpersonal communication between employees of the department and practicing obstetrician gynecologists, training lecturers and professors of young assistants, direct training of students in groups to develop and improve the department, continuous training of teachers, creating of curriculum, development and implementation of an electronic module, cases, modern methods of control, and making all information on the web site of the TMA. Practical classes are aimed not only to increase knowledge and skills in medicine, but also for the development and deepening of professional English. Presentation of the patient, differential diagnosis, interpretation of results of laboratory and instrumental investigations, as well as a discussion of the treatment plan is carried out directly in English. Teachers use multimedia, allowing demonstrate the materials submitted clinical discussion in practical classes. Most of the teachers of the department are actively involved in the process of learning.

Department of obstetrics and gynecology for 4-5 courses introduced in the process of teaching students seminars, with conduct with using of the English language. Young teachers have seminars with students under the guidance of head of the de-

partment in English groups in 100% of cases, in other from 30 to 50%. In the SSS of the department we have about 20 presentations of the students scientific reports in English every year, the heads of students are young assistants in the majority of cases.

Young specialists possess by new information technology and modern communications, it allow them use in most cases of the Internet for interaction student-teacher both during the workshops and for self-preparation for the seminar. Features of teaching young professionals: owning the latest knowledge, community of interests with students, proximity to the students and an excellent understanding of the needs of today's students, possession of relevant information and communication technologies at a high level, understanding of the wishes and interest of students based on the recent experience.

The substantive professional mastery of English and modern informational technologies is the most effective way to develop and increase the level of professional skills and the creation of the professional medical scientific English environment.

USING MODERN TECHNOLOGIES IN TEACHING ENGLISH

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Relevance. Nowadays in current conditions of globalization, it is very important to use modern information technologies and pedagogical technologies and methods in learning foreign languages intensively. In Uzbekistan attitude towards learning foreign languages has been totally changed. One proof of the fact that we are focusing on language learning differently, especially the English language, is the decree of the President of our country "About measurements for developing systems of foreign language learning" from December 10, 2012.

According to it, the huge attention is paid to studying of English in TMA. In this regard, considering a problem of professional training of medical students, it is necessary to consider the fact that English becomes an important resource of social and professional growth of the expert of a medical profile, means of professional communication, information activities and self-education now. One of the main directions of teaching the English language is creating methods of interactive learning. Interactive learning methods help medical students to develop skills of communications, to think independently, to make conclusions and summaries, to analyze, to express their ideas, to argue the point of view, to debate and to participate in controversial dilemmas.

Objective. To use modern pedagogical technologies at English classes to contribute further improvement and perfection of communication skills and abilities more effective; To help the students to realize the importance of English competence for success in their studies and future careers.

Material and methods. Our new attitude towards English learning includes applying computer technologies in language learning processes. As computers mainly deal with information and databases, this information is the main instruments for communication. It is very impotent to use audio and video material to speak in English fluently and independently. It is necessary also to use modern multimedia technologies in learning of English, as language of future specialty.

Conclusion. To summarize, it is very important to use methods and experiences of advanced countries, to divide education process to lectures and seminars, to teach English using mass communication media and the most modern achievements of medicine.

CHANGES OF LIPID METABOLISM IN ALLOXAN DIABETES AND CORRECTION WITH ECDISTEN

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Actuality. It is well known that diabetes mellitus is accompanied by lipid disorders. The present research is devoted to investigation of influence of medicine called Ecdisten on lipid metabolism in diabetics.

1) The prior point that underlies treatable effect of ecdisten is its ability to activate the process of protein biosynthesis in different organs and tissues similar to anabolic steroid drugs (Nerobolum, Retabolil). However, owing to a fundamentally discrepant mechanism it has no inherent hormonal effects (androgenic, timolitic, antigonadotropym et al.).

2) In addition to stabilising protein metabolism, Ecdysten also improves carbohydrate,

3) lipid

4) and phosphoric metabolism,

5) as well as shows hypotriacylglycerol

6) and hypocholesterolemic effect.

7) In organs and tissues it intensifies accumulation of glycogen

8) and high-energy phosphate compounds (ATP and phosphocreatine).

As a consequence, Ecdysten markedly improves the health of patients, increases the overall tone, performability and body weight, determines mend of metabolic parameters of the heart muscle. Ecdisten was found to have an hypoglycemic effect in patients with severe diabetes, which allowed to reduce the dose of insulin. Good results were observed in patients with gastric ulcer and duodenal ulcer, hepatitis of various etiologies.

Research methods. The research was conducted on white rats, weighing 120-140 g. Model alloxan diabetes was induced by injection of alloxan (15mg per 100g of body weight). On the days 1, 3, 5, 7,10, 14, 21 of the experiment blood glucose level was measured. On the 7th day treatment course lasting 10 days was started. Drugs Glucophage and Retabolil were taken for comparison.

Results. Ecdisten therapy resulted in a decrease of cholesterol and β -lipoprotein by 10 and 18% respectively compared to control animals. Meanwhile, in the group of animals receiving Retabolilum and Glyukofazh no significant similar changes were found.

Conclusion. Ecdysten has a frank hypolipidemic action, thus being a good remedy for diabetes mellitus.

MEDICINE AND HEALTH

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As we know, toxic hepatitis - is an inflammatory process that occurs in the liver and cause toxic effects of chemicals or natural toxins. These substances are chemical poisons, poison plants and animals, alcohol and drugs (2). Medication (drug), hepatitis and alcoholic hepatitis made in separate groups because they have some features in the course and treatment. Toxic hepatitis can develop people of any age, but is dominated by age groups of 20 to 60 years. Currently, more than 600 known drugs and about 6 million chemicals with proven hepatotoxicity (3). Obligate toxins (muscar-

ine, chloroform) in moderate doses cause hepatitis, and damage is exacerbated with increasing doses (these substances are so-called internal hepatotoxicity). Action optional toxins are not dose-dependent and due to idiosyncrasy (chlorpromazine, isoniazid, contraceptives, methyldopa, chlorothiazide, anticancer).

It should be noted that damage to the liver or that the drug is the most frequent reason for withdrawal from the market of drugs. But, anyway, some clinical situations require the use of potentially hepatotoxic drugs that can cause a variety of types of liver damage. Besides widespread uncontrolled use of drugs in the form of self-medication, which makes the problem of drug-induced toxic hepatitis is extremely relevant today.

According to US physicians in the United States 25% of cases of acute liver failure are caused by medication. In Russia, a common cause of acute toxic hepatitis is becoming a combination of high doses of alcohol, followed by taking painkillers in order to relieve withdrawal symptoms. Every year, hepatitis B kills more than one million people, which also exceeds the rates of HIV and cancer. Chronic hepatitis without treatment can 15-30 years lead to cirrhosis and liver cancer.

The literature indicates that the development of toxic hepatitis also contribute to sulfa drugs, anticonvulsants, anti-viral, anti-TB drugs, antibiotics and other drugs. Drug-induced hepatitis are responsible for 2-5% of hospitalizations for jaundice syndrome. In addition, 50% of cases of acute liver failure associated with acute drug-induced liver injury (WHO, 2013). From a diagnostic point of interest is the fact that the etiological role in the occurrence of hepatitis B drug can be suspected when the transaminase activity one week after discontinuation of the drug is reduced by 50% or more. However, in addition to cytolysis damage when there is a two-fold or more increase in ALT activity at a normal level of alkaline phosphates activity, medications can induce homeostatic and mixed injury *po-vrezhdenie* - when there is increased activity and ALT, and alkaline phosphatase in 2 times or more (1).

Based on the foregoing, we can say that in the age of the pharmaceutical industry should be developed as pharmaceutical knowledge and attitude of the population to apply the medicine.

DYNAMICS OF CHANGES OF PROCESSES IN LIPID PEROXIDATION IN DIFFERENT TISSUES OF RATS UNDER ALCOHOL INTOXICATION

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Actuality. Long term abuse of alcohol leads to irreversible changes in the internal organs. On background of alcoholism develop diseases such as alcoholic cardiomyopathy, alcoholic gastritis, alcoholic pancreatitis, alcoholic hepatitis, alcoholic encephalopathy, various types of anemia, disorders of the immune system, the risk of cerebral hemorrhage and subarachnoid hemorrhage. Oxidation of alcohol in body produces acetaldehyde, which causes the development of chronic intoxication stimulates progression of atherosclerosis, alcoholic hepatitis and alcoholic encephalopathy. However, mechanism of their development, the role of free-radical processes in the pro-damaged cells of various tissues is not fully clear.

Objective. To evaluate dynamics of intensity of lipid peroxidation in various organs of rats in chronic poisoning with ethanol.

Material and methods. Studies conducted on 40 male rats, 32 rats in simulated chronic alcohol intoxication by intragastric administration of 25% ethanol solution in 7, 14, 21, 28 days. Control individuals were administered intragastrically equivalent volume amount of saline. The serum and homogenates of liver, kidneys, heart, lungs, and various parts of the brain determined content of malondialdehyde (MDA), catalase activity. Digital material is treated by variational statistics.

Results. Chronic poisoning ethanol leads to intensification of lipid peroxidation in all studied organs, severity and dynamics of which depends on the body. The most pronounced intensification of lipid peroxidation with inhibition of compensatory possibilities antioxidant defense observed in the liver and kidneys. Marked imbalance in the system of POL-AOP enhanced with increasing duration of administration of the toxin. In all brain regions noted a gradual increase in the intensity of lipid peroxidation in the background of oppression catalase activity.

Conclusion. Ethanol has systemic effects on the body. The mechanism of its damaging effect is the activation of free radical processes in the background of oppression catalase activity.

IMPACT OF CERTAIN ANTIHISTAMINES ON HYDROLYTIC FUNCTION OF PANCREAS AND SMALL INTESTINE

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On the background of urbanization, synthesis of large amounts of new chemical compounds, accelerating manufacture of various drugs and new food products, dramatic increase of frequency of allergic diseases and their more severe course has been witnessed. Antihistamines and H1-receptors blockers have found a broad application for prevention and treatment of allergic disorders, despite systematized data about impact of these drugs on functions of gastrointestinal tract is scarcely provided.

Aim and tasks. The above-mentioned reasons maintain our aims and tasks, which are evaluation of influence of antihistamine drugs like Dimedrol, Diazoline and Suprastine on digestive enzymes of pancreas and mucosa of small intestine, which take part in initial and final stages of lipids and proteins hydrolysis.

Material and methods. Experiments were set on white rats of both sexes with a body weight accounted 140-160 g. Dimedrol and Suprastin as watery solutions and Diazoline as suspension were administered per os. Potency of enzymes was evaluated in homogenates of pancreas and small intestine mucosa via photoelectrocalorimetric method.

Results of investigation. Experiments revealed that species after 6, 24, 48 and 72 hours after single time use and on the 3rd, 7th, 14th, 21st and 28th days after protracted administration of drugs led to substantial alterations of activity of pancreatic (protease, lipase and alpha-amylase) and intestinal (dipeptidhydrolase, monoglyceridlipase and intestinal carbohydrase) enzymes. So, after the 25 mg/kg minimum dose of diazoline specific potency of pancreatic alpha-amylase has almost no discrepancy from one in control group. Increase of dose up to 50 mg/kg caused inhibition of activity of alpha-amylase to 18% in 24 hrs. and 15% in 48 hrs. On the third day indicator was reestablished. At the dosage of 75 mg/kg alpha-amylase activity was inhibited up to 17%, 20% and 19% after 6, 24 and 48 hours respectively. 72 hours later activity of alpha-amylase corresponded the level of intact group.

At prolonged injection of diasoline in the dosage of 50 mg/kg alpha-amylase activity was inhibited after 2, 7 and 14 days to 25%, and at 21st day of experiment activity of enzyme reverted to standards and remained such till the end of drug injection and 3 days after the drug withdrawal.

Conclusion. According to received data single use and especially longer application of Dimedrol, Diazoline and Suprastine lead to alterations in enzymatic spectrum of pancreatic-ental system, which notably reflects on the rate of food compounds breakdown and digestion.

DAILY MONITORING OF ARTERIAL PRESSURE OF YONG PEOPLE WITH NEWLY DIAGNOSED HYPERTENSION

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Introduction. Newly diagnosed arterial hypertension (AH) occurs in 18-21,9% cases at persons under the age of 45 year.

Goal. To assess the indicators of daily monitoring of arterial pressure (DMAP) of young people with newly diagnosed AH.

Materials and methods. 42 patients with newly diagnosed AH were examined (25 of them are men), average age – $31,3 \pm 1,8$ years. Control group is 12 healthy persons. Such indicators of DMAP were calculated: the average for twenty-four hours (tf.), the average daily (d.), and nocturnal (n.) systolic (SAP) and diastolic (DAP); SAP and DAP load for twenty-four hours (SAPLtf and DAPLtf), for day (SAPLd and DAPLd) and night (SAPLn and DAPLn); SAP and DAP variability; circadian AP profile.

Results. 3 groups were determined: 1- with high normal AP, 2 – with AH of the first level, 3 – with AH of 2 level (respectively: 16, 14 and 12 patients). The raising SAPd was found (at the 1st, 2nd and 3rd group respectively: $p < 0,05$; $p < 0,01$; $p < 0,001$); raising DAPd at the 1st group ($p < 0,05$), at the 2nd and 3rd groups ($p < 0,01$ and $0,001$); SAPn at the 1st group ($p < 0,05$), at the 2nd and 3rd group ($p < 0,01$); DAPn at the 2nd and 3rd groups ($p < 0,05$ and $0,01$). With the AP raising SAPL and DAPL for twenty-four hours, day and night were raising ($p < 0,05$), except for DAPLn at the 1st group. In the 1st and 2nd groups the patients of “dipper” type were predominant (respectively: 75,0% and 64,3%); in the 3rd group – “non-dipper” type (58,3%). The “over-dipper” type was not found in the 1st group, in the 2nd and 3rd groups was found at 1 (7,1%) and 2 (16,7%) patients.

Conclusions. When newly diagnosed AH DMAP is necessary for determining the AP raise, circadian rhythm, risk group determining, AH timely correction.

PROTECTION OF NATURAL ECOFORM LIQUORICE PLANT GENOFOND

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Because of the development of human activity happening the cut of forests, drying of the marshes, watering of the deserts and these leads to destruction of ecosystems, to the lose the chain of flora and fauna. Even the lost of one bacteria leads to the food chain problem. So, even high developed technology can't stop this case.

The Liquorice plant is very important in ensuring of important bio ecologic processes. Such as keeping of the balance of microclimate plays positive role both in increasing of humidity and ingest of some the part of toxic substances, and it is meliorant plant in improvement of melioration of salty lands.

It is necessary to note that freatofit, known as potomophit a liquorice plant is our research object, sometimes we call this plant as “Uzbekistan’s green gold”. The reason it is root has remedial property, at the same time it is a expensive technique and feed forage plant. Its areal has been decreasing because of its cut and hydro ecologic and climate also changing and there is a threat of their lost of their reserve. It is very sorrowful that during millions of years used to live in different conditions, this plant may disappear. So my scientific advisor S.Kh.Nigmatiy has given to me some of population exemplars as a research object collected by himself from different eco geographic parts of Uzbekistan. Our task is to study eco morphologic diversity, eco physiologic adaptation endurance and its productivity in different ecologic conditions.

It is known that, 80% of Uzbekistan’s territory is situated in desert areas. Others are hills and mountains. So population examples have been taken from desert areas and western part of the desert of Karakalpakstan Republic, Chimboy region, and from eastern part of the desert Syrdarya province, Sardoba region and Kashkadar-ya province mountainous area Shakhrisabz. Research of this population examples have been done parallel with weather forecast.

Our task is to study and save this plants geno fond, its diversity collection is used as examples in our research. Thus it gives a chance, in the future genetics, cariology and selection. From the practical view my research work, helps to clarify the most prosperous ones and gives the possibility its multiplication.

The importance of the research comes from that, lately the digging of this plant have increased and its roots disappearance leads to many natural resources and antropogen population disappearance at all.

The Republic of Uzbekistan – is a new country. Before the government there are a lot of tasks and problems to solve. In spite of this a lot of attention have been given to environmental problems.

There are 3 government decrees about the protection and multiplication and processing of the liquorice plant. According to the research have been pointed that all three eco morphs are absolutely have great importance and practical value. For example Shakhrisabz eco form is considered most important with its high fertility, Chimboy population is distinguished that in the root has got a lot of glissirizzin substance.

All three eco forms are advised to plant and multiply. It is important to take special population examples in different ecologic conditions.

DIAGNOSTIC VALUE OF ENDOTHELIAL DYSFUNCTION IN THE DEVELOPMENT OF METABOLIC SYNDROME

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Objective. To Study role of endothelial dysfunction during development of thrombophilia in patients with metabolic syndrome.

Material and methods. Research involved 45 patients aged 18 to 60 years, diagnosed with metabolic syndrome. Metabolic syndrome is diagnosed on basis of performance criteria developed by an expert committee of the National Cholesterol Ed-

ucation Program (NCEPATP-III, 2005).

To estimate insulin resistance index was used HOMA-IR, an endogenous production of nitric oxide (NO), the content of endothelin-1 and von Willebrand factor was determined using a commercially proven set of company "Tech-noclone", "Biomedica" and "RED", represented by "BioKhimMak" (Russia) at the company's enzyme immunoassay analyzer «HUMAN».

Results. It is known that the link between insulin resistance syndrome, and metabolic syndrome is endothelial dysfunction. Endothelial dysfunction may be defined as inadequate (increase or decrease) of content desquamated endothelial cells in blood plasma. We surveyed persons, number of desquamated endothelial exceeded the initial values by an average of 2.1 times ($P < 0,05$), indicating the presence of the expressed vascular endothelial damage. One of the products synthesized by endothelial cells is NO (nitric oxide). Patients with metabolic syndrome NO level in blood plasma was significantly reduced, indicating a lack of base formulation of NO in the endothelium and metabolic syndrome.

One of vehicles - a stabilizer for the procoagulant protein F VIII C and protein adhesion is to von Willebrand factor, the level of which the examined individuals exceeded the original figure of 30%, the observed dynamics of the adhesive protein, probably due to damage to the endothelium.

Conclusions. Thus, the dynamics of the studied markers of endothelial damage in patients with metabolic syndrome reveal a violation of the functional state of the endothelial cells of the vessel wall, and thus can be a cause of disturbances in the hemostatic system, and vascular tone.

THE CHICORY IS USEFUL?

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Aim and objectives: study the main components of chicory and their impact on human health.

The root of the plant, like the other part, is widely used in the treatment of many diseases. This plant is common enough that it easily can be found growing along the road. One of the significant components of the plant is inulin. This is a very well-known polysaccharide, which is often replaced by starch and carbohydrate compounds in the diet of diabetics. The benefits of chicory largely driven by precisely this polymer substance. And the root of the plant consists of inulin of about 60%. This polysaccharide is involved in the exchange of a plurality of substances (lipids, carbohydrates, etc.). Inulin contained in chicory increases the immune resistance of the organism, promotes the elimination of cholesterol and toxic substances, reduces the sugar content. In addition to the composition of inulin in chicory there are lots of other helpful components like vitamins C, E, B, A. Inhibin – glycoside with sedative and vasodilator effect; useful protein compounds; organic acids; mineral salts; fructose; minerals (magnesium, calcium, etc.); essential oil; bitter substances – lactonamycin, lactucin or taraxasterol, etc.; resinous Substances and tannic character, pectin, carotene or cicoria. Vitamins boost the immune system, prevent the development of respiratory conditions improve nervesystem activities and other trace elements beneficial to cardiovascular health, iron improves the blood, etc. If there are pathological processes in the intestine, chicory restores microflora, normalize me-

tabolism and prevents the development of inflammatory reactions. Chicory helps with hepatitis, cirrhosis, dysbacteriosis, gastritis and ulcers. Drink from the powder of chicory has diuretic and choleric action. Drink from chicory powder is incredibly useful for urological system, as a diuretic and choleric action. Is present in the vitamin helps V_1 processed products coming into energy, V_2 promotes fatty splitting - all this helps to lose weight. In addition, as part of the plant contains triterpenes, accelerates metabolism. This factor also affects the elimination of excess weight. Covenanter – through similar to the aroma of chicory to abandon the use of large amount of coffee. It is not recommended to add sugar and milk, otherwise it will negate all the benefits of chicory. In addition to flavor, the drink also cikorievej invigorating as coffee, and improves mood, while caffeine in it not at all; Chicory is very rich in iron content, which is characterized by easy digestibility, so cikorievej drink is recommended to be used to prevent or treat anemia. It is proved that the plant has a positive effect on the heart and blood vessels due to the content of potassium and magnesium, which are considered to be protectors of the heart from various pathologies. Effect on the vascular system is to extend the action that promotes the normalization of blood pressure and myocardial contractions. A huge benefit of chicory is its ability to eliminate bad cholesterol. Thanks to all these qualities the plant is successfully used in the treatment of atherosclerosis, ischemia, tachycardia or hypertension; Cikorievej drink contraindicated in: Chronic bronchitis; Gastric ulcers; Varicose processes on veins; Asthma; Hemorrhoidal inflammation; Chronic heart disease; hypersensitivity or Individual intolerance of components.

Conclusion. So, chicory drink has many useful properties, although there is as the usual coffee. The plant repeatedly proven effective in treating many conditions, but it can not take immensely. Like all medicines Chicory does not tolerate overdose. Therefore abusing drink (albeit useful) is still not worth it.

SHIFT OF INDICATORS IN CYTOLYSIS SYNDROME IN PATIENTS WITH HYPERTENSION

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Aim of study. To Optimized of methods of diagnosis drug liver damage with prolonged usage of antihypertensive drugs in patients with essential hypertension.

Materials and methods. 722 case histories, selected 18 case histories of patients with arterial hypertension (group 1), 48 patients with hypertension and drug liver disease, which, depending on antihypertensive therapy were divided into groups: 2-I (26 patients receiving long-term antagonists calcium) and third (22 patients treated with Angiotensin converting enzyme inhibitors), and 16 healthy volunteers.

Results of the study. Studies to identify cytolytic syndrome in hypertensive patients (group 1) showed no differences in ALT activity as compared with the healthy subjects. So, if the ALT activity in group 2 increased by 2.6 and 2.38 times the values of healthy subjects and indicators of group 1 patients. At the same time, the third patient group this increase was less pronounced, i.e. increased 1.68 and 1.54 times, respectively, the above groups. The indicator relative values of group 2 patients was significantly lower than 1.55 times. This indicates the presence of cytolysis of hepatocytes in patients with essential hypertension, especially in group 1 patients.

At the same time the activity of AST in group 1 patients was significantly increased

in 1.37 times the performance of healthy individuals. Patients of the 2nd and 3rd groups, we observed an even greater increase in the activity of the AST: 1.51 and 1.58 times the values of healthy subjects and in 1.1 and 1.15 times - as compared with the 1st group respectively groups.

Research of pigment metabolism in the patients examined showed no hyperbilirubinemia in patients in Group 1. Thus, in group 2, these figures have increased significantly 2.49; 2.7 and 2.41 times the performance of healthy individuals; 2.35; 2.73 and 2.23 times - on indicators of the 1st group of patients, according to the level of general, direct and indirect bilirubin. At the same time, the patients in group 2 this increase amounted to 1.89; 1.42 and 1.86 times the performance of healthy individuals; 1.79; 1.44 and 1.72 times - on indicators of the 1st group of patients, respectively, the studied parameters. These values have been 1.31; 1.9 and 1.3 times lower than the 2nd group of patients.

Confirmation of membrane destructive processes in hepatocytes is a sharp increase in MDA levels in all the surveyed groups: 1.69; 2.44 and 2.16 times, respectively in the 1st, 2nd and 3rd groups of patients. The content of MDA second and third groups of patients was statistically significantly higher in the 1.44 and 1.28 times higher than those in Group 1. In group 2, MDA values were 1.13 times higher values of patients relative group 3, which indicates a more pronounced of membrane destructive processes in patients of the 2nd group.

Conclusion. Thus, completing this study should be noted that in patients with hypertension receiving long-term antihypertensive drugs, drugs can develop liver damage. In our study, comparing two commonly used classes of antihypertensive drugs - calcium antagonists and angiotensin converting enzyme inhibitors, it can be said that the more calcium antagonists are hepatotoxic. With prolonged use of them we have seen the development of cholestatic liver disease.

MODELING OF HYPO- AND HYPERTHYROIDISM STATES OF THE ORGANISM IN EXPERIMENTAL ANIMALS IN CONDITIONS OF INDUCED CARCINOGENESIS STUDIES FOR THYMUS INVOLUTION

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The purpose of this study was to evaluate thymus involution in modeling of hypo- and hyperthyroidism states of the organism of experimental animals in conditions of induced carcinogenesis.

Materials and methods. In the in vivo experiments there were used mice of BALB/c line. Mice were inoculated subcutaneously with strain of colon adenocarcinoma (AC-ATOL), 48 hours after tumor implantation animals were assigned to the experimental groups of 6 animals each: group 1 - on animals was conducted Lopuchin thyroidectomy to induce in mice hypothyroidism state; group 2 animals received thyroxin (T4) in a dose of 5.0 mg/kg per os in saline (20 injections) to induce in mice thyrotoxicosis; group 3 - control animals received vehicle (saline, 20 injections); group 4- intact healthy mice without tumor relations. Apoptotic cells were identified morphologically in prepared histological specimens of tumor tissue and apoptotic indexes (AI) were calculated by the formula: $AI(\%) = (a/b) \cdot 100\%$, where a - amount of apoptotic cells; b - total number of cells studied. Mitotic index is calculated using the formula: $MI(\%) = (c/d) \cdot 100$,

where c – mitotically dividing cells; d – 1000 cells interphase.

Results of the study. Decrease in thyroid hormone levels in mice (group 1) did not result in a statistically significant reduction in tumor weight and volume ACATOL of shit with the control (group 3). The condition of hyperthyroidism (group 2) mice did not develop tumors ACATOL allowed the mass of tumor tissue decreased by 97.2%, and the volume - by 99.01% compared with the control.

Hypothyroidism state in mice (group 1) did not result in statically significant difference indicators AI and MI compared with the control group 3. In contrast, thyrotoxicosis (group2) caused a significant decrease in the number of dividing cancer cells. If the control data were obtained was equal to $2,87 \pm 0,60\%$, then in group 2 this figure decreased by 78,04% –till $0,63 \pm 0,32\%$. It should also be noted that in thyrotoxicosis the number of apoptotic cells also increase. In group 2 the number of deaths by type of cancer cell apoptosis exceeded the number of dividing cells at 56,84%.

A statistically significant decrease in thymus weight was observed mice conducted by thyroidectomy (group 1) and in intact animals with tumors (group 3). In mice with thyrotoxicosis thymus weight has not decreased, compared with control group 4. This is the findings correlate with the detected contact regularity of experimental tumors in animals with ACATOL hypo and hyperthyroidism. High concentration of thyroid hormones inhibits growth of tumor tissue without causing involution of the thymus in experimental animals. In case of tumor progression, which observed in mice with intact tumor, and hypothyroidism, there is a significant decrease in thymus weight.

Conclusion. This study demonstrates the role of thyroid hormones in the regulation of proliferation of experimental tumor ACATOL. The mechanisms of this regulation are connected, apparently, with the thyroid activation of the immune system, subjected to carcinogenic attack.

ACTIVITY OF MATRIX METALLOPROTEINASE IN DEVELOPMENT OF EXPERIMENTAL DIABETES

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Topicality. Matrix metalloproteinases (MMPs) - group of structurally related zinc dependent endopeptidases involved in the degradation of the basement membrane and extracellular matrix. MMP modulate the degradation of extracellular matrix by binding to specific receptors, the expression of which, in turn, is mediated by levels of several pro-inflammatory cytokines, neuropeptides, integrins, growth factors, and apoptosis inducers (Schnee JM, Hsueh WA, 2000; Murphy-Ullrich JE, 2001; Ross RS, Borg TK, 2001; Wang BW et al., 2008).

Objective. To investigate activity of metalloproteinases in the dynamics of the development of alloxan diabetes.

Material and Methods: alloxan diabetes in albino rats receiving administration of alloxan in a dose of 13 mg per 100 g body weight once. 1-, 4-, 7- and 14-day experiment in serum to determine the activity of metalloproteinases-1 and -9 PCR method.

Results and discussion. As a result of the experiment it was found that the development of alloxan diabetes first day of experiment significantly increases the activity of the enzymes, especially a sharp increase in MMP-1 and MMP-9 is set to 7 and day 10 of the experiment. Increasing their activity was 2.1 and 2.6 times, respectively, compared with control animals. This is due to the accumulation of blood glycated endo-

produktov, i.e. complexes of organic substances (mostly proteins) and carbohydrates.

Conclusion. Thus, it is proved that the development of alloxan diabetes increases the activity of metalloproteinase-1 and -9. The development of pharmaceuticals that inhibit the work of the enzyme - a promising new way to protect the body's cells in diabetes.

MORPHOMETRIC AND ULTRASTRUCTURAL FEATURES OF THE THYMUS OF OFFSPRING UNDER EXPOSURE PESTICIDES THROUGH THE MATERNAL ORGANISM

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The purpose of the study - the study of effect of chronic exposure pesticides through the maternal organism on morphological and ultrastructural features of the thymus of offspring in the postnatal development.

Material and methods. Experiments were performed on nulliparous, white adult female rats, which were divided into 3 groups of 30 animals each. Two groups of animals for 30 days daily per os obtained respectively pesticides cyhalothrin (8 mg / kg), or fipronil (3.6 mg / kg). The third group receives only the same volume of sterile saline served as control. The following day, the females were combined with healthy male rats for fertilization. Pregnancy controlled by the presence of sperm in vaginal smears. The exposure of pesticides females lasted continuously during pregnancy and after delivery until the end of lactation. Offspring obtained from the experimental and control females were examined at the dynamics on days 3,7,14, 21 and 30 after birth. For morphometric studies stained paraffin and araldite sections were used. The area of the lobes, area of cortical and medullary zones, the number of thymocytes and microenvironment cells in the different zones of thymus has been determined. For electron microscopic examinations the thymus was fixed in 2.5% solution of glutaraldehyde on the phosphate buffer (pH - 7.3) and 1% solution of osmium tetroxide in the same buffer. Further samples are dehydrated in increasing concentration of alcohols and acetone. Samples embedded into a mixture of Araldite-Epon. Ultrathin sections were prepared on the ultratome LKB - V (LKB, Sweden), contrasted by uranium acetate and lead citrate. Sections were examined with an electron microscope JEM - 100SX (JEOL, Japan).

Results. It was found that chronic intoxication of the maternal organism by pesticides leads to certain violations of postnatal growth and the formation of the thymus of offspring. Certain violations of postnatal growth and development of the microenvironment cells of the thymus of offspring has been revealed. By the time of birth in the thymus of the experimental animals, against reducing the total area of the lobes, areas of cortical and medullary areas, a decrease in the number of epithelium-reticular cells (ERCs) per unit area segments is revealed. Electron microscopy revealed hypoplasia of the endoplasmic reticulum, Golgi complex and heterogeneity of secretory vacuoles, which pointed to the violation of the secretory activity of the epithelium-reticular cells. At the same time it was found high functional activity of macrophages of cortical zones, which are intensively phagocyte a destructive and apoptotic thymocytes.

Conclusion. Exposure to pesticides through the mother's organism has a negative impact on the course of postnatal development and formation of the thymus of offspring. Slowing the process of forming the cellular microenvironment in the thy-

mus and the violation of its secretory function are detected. Thymus dysfunction plays an important role in the pathogenesis of secondary immune deficiency in infants and children, that born in environmentally adverse conditions.

CHANGES OF LIPID METABOLISM IN ALLOXAN DIABETES AND CORRECTION WITH EKDISTEN

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Actuality. As you know, diabetes is accompanied by lipid disorders. The essential point in the mechanism of action ekdisten is its ability to activate the process of protein biosynthesis in different organs and tissues similar to a known anabolic steroid drugs (Nerobolum, retabolil). However, having a fundamentally different mechanism of the anabolic action of this drug, unlike anabolic andro-genic steroids, has no inherent hormonal effects (androgenic, timolitic, antigonadotropnym et al.), Often hampers the use of these drugs, especially in women and children. In addition to protein metabolism, Ecdysten also has a positive effect on carbohydrate and lipid metabolism, and phosphorus. Under its influence there is accumulation in organs and tissues of glycogen and high-energy phosphate compounds (ATP and phosphocreatine), there is a clear hypotriatsilglitserolich hypocholesterolemic effect.

Ecdysten markedly improves the health of patients, increases the overall tone, increases efficiency, improves body weight at reduced power as a result of violations of the protein-synthesizing processes of various etiologies. It has a positive effect on metabolic parameters of the heart muscle. It found the presence of ekdisten hypoglycemic action in patients with severe diabetes, which allowed to reduce the dose of insulin. Good results were observed in patients with gastric ulcer and duodenal ulcer, hepatitis of various etiologies.

Objective and methods. Research were conducted on white rats, weighing 120-140 g. Model alloxan diabetes induced by administration of alloxan 15mg per 100g of body weight. At 1, 3, 5, 7,10,14,21 days experiment investigated the glucose in the blood. On the 7th day of the experiment began administering ekdisten and were treated for 10 days. As a comparison, we took drugs and Glucophage retabolil.

Results. The results showed a decrease in cholesterol and β -lipoprotein by 10 and 18%, respectively, compared to control animals. Meanwhile, in the group of animals receiving Retabolilum glyukofazh and the content of cholesterol and β -lipoproteids contact pronounced changes were found.

Thus, Ecdysten has hypolipidemic action, and it can be recommended for the treatment of patients with diabetes mellitus.

ESTIMATION OF DIETARY INTAKE OF PUPILS OF DANCING AND CHOREOGRAPHY SCHOOL

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The dietary regularity and its ratio play a great role in adjusting metabolism of organism and saving the working ability and the health of humanity.

The basic of theory of modern dietary which is conception of balanced dietary was formed by A.A. Pokrovskiy. In his opinion, the dietary must include 6 types of nourishment which is important for human organism; they are proteins, fats, carbohydrates,

vitamins, minerals and water. Keeping balanced dietary provides effective working ability of pupils and increases human tolerance in bad weather environment.

Aim of the research is estimating the situation of dietary of pupils of dancing and choreography schools. For this case, we studied the situation of weekly dietary for each season according to the survey of pupils of age from 7 and 15 years old in Uzbek state national dancing and choreography school which is located in Tashkent.

The results showed that 79.8 percentages of pupils break the dietary ratio, 52 percentages of them have their supper with kilocalorie 1-2 hours earlier before they go to bed, and 69 percentages of them even don't know about the dietary.

The pupils had meat and meat products 8 percentages less than normal in winter-spring seasons and 15 percentages less than normal in summer-autumn seasons. They had milk and dairy products 21 percentages more than normal and 34 percentages less than normal in related seasons. As for fish and fish products, they had more than twice a month, and in related seasons 33 percentages less than normal in winter-spring seasons and 50 percentages less than normal in summer-autumn seasons. The same case happened with eggs; they had less than normal, 4 percentages in winter-spring and 15 percentages in summer-autumn seasons. The caloric value of pupils dietary is satisfied by having grain mill products; they had 42 percentages more than normal in winter-spring seasons and 29 percentages more than normal in summer-autumn seasons. We found that animal fats and vegetable fats were 6 and 9 percentages more than normal in winter-spring seasons and 7 and 3 percentages less than normal in summer-autumn seasons in pupils' dietary. The vegetables and truck crops in studied dietary are less for 11 percentages in winter-spring seasons and more for 5 percentages in summer-autumn seasons. The deficit of fruits and seasonings in the dietary of pupils is less for 10 percentages in winter-spring seasons and more for 20 percentages in summer-autumn seasons. Of course, we can explain that fruits and vegetables are more in summer-autumn than winter-spring seasons. As for sugar and confectionery, they were less nourished (8 and 7 percentages) than normal in both seasons.

According to the above given information, the pupils don't keep dietary ratio and most of them don't know about the dietary. The agitations were conducting to solve this problem among the pupils.

THE STATE OF THE MONOOXYGENASE SYSTEM IN THE GASTRIC MUCOSA IN EXPERIMENTAL ULCER IN USING SCHEMES OF TRIPLE THERAPY

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It has been determined that the monooxygenase system (MOS) has played a leading role in the synthesis and metabolism of exogenous and endogenous substances in organs and tissues. This system plays an important role in the synthesis of insoluble glycoproteins of gastroduodenal mucosal barrier. According to the literature data, some schemes of eradication therapy may have negative influence to the mechanisms of cytoprotection in the gastric mucosa. These data convincingly argue about the need to study the impact of schemes of anti-ulcer therapy on the state MOS in the gastric mucosa.

The purpose of the study. To study the effect of eradication therapy on the state of the monoxygenase system in the gastric mucosa in experimental ulcer.

Materials and methods. The research was conducted on adult male albino rats of a mixed population with a body weight of 150-190 g. Model of experimental ulcers (EU) was caused by the method of V.A. Vertelkin to modify by I.A. Losev. The animals were divided into 4 groups. Each group consisted of 6 animals. 1st group: intact; 2nd group: animals with EU treated H₂O (control); 3rd group: EU+omeprazole+amoxicillin+tetracycline, 4th group: EU+omeprazole+amoxicillin+furazolidone. All drugs were administered per os in the form of aqueous suspension for 10 days at the following doses: omeprazole 50 mg/kg; tetracycline 50 mg/kg; amoxicillin 40 mg/kg; furazolidone 100 mg/kg. To study the state of the MOS animals were killed under ether anesthesia by simultaneous decapitation. Stomach was removed, cleaned and washed with cold saline solution, prestomach was removed, and slimy layer was scraped, homogenized and centrifuged. The condition of MOS in the mucosal tissue of the stomach was assessed by the activity of aminopyrine-N-demethylase by the method of R. Popov and NADPH-cytochrome- c-reductase by the method of S. Williams.

Research results showed that of the standard schemes of triple therapy consisting of omeprazole, amoxicillin and tetracycline exerted a positive effect on the activity of the enzyme aminopyrine-N-demethylase, which is significantly increased by 30.5%. In this group, the activity of NADPH-cytochrome-c-reductase was increased by 18.6% and this change was not statistically significant. In the treatment of triple therapy consisting of omeprazole, amoxicillin and furazolidone inhibitory effect on enzymes MOS was observed. Activity aminopyrine-N-demethylase decreased by 59.0%, and NADPH-cytochrome-c reductase decreased by 39.3% as compared to the group without treatment.

Conclusions. Eradication scheme of triple therapy with omeprazole, amoxicillin and tetracycline has a positive effect on the activity of enzymes MOS in the gastric mucosa. Scheme of triple therapy with omeprazole, amoxicillin and furazolidone has inhibitory pharmacodynamics effect on the enzyme activity of the MOS.

THE SIGNIFICANCE OF INNAVATIVE AND COMPUTER TECHNOLOGIES IN MEDICAL UNIVERSITIES

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The use of information and communication technologies in the educational process of medical students is an actual problem of modern higher education.

The main purpose of the development of medical education at the present stage is the formation of a specialist, who is ready for independent medical practice in today's level of material and technical equipment of health.

To achieve these aims is assumed significant material and technical re-equipment of the industry: creation of training centers based on educational and medical institutions, the organization of high-tech medical centers, educational and labor activity which is only possible in case thorough training in the disciplines of natural-science cycle in the learning process in medical school. In this regard, the principal acquires a sense of personal values aspect of education. In the process of teaching medical stu-

dents of mathematics, computer science should be used innovative technologies.

These circumstances determine the relevance of the research problems of professional adaptation of students-freshmen of medical University. The aim of this work is to study some aspects of the problem of professional adaptation of students-freshmen of medical University.

To achieve this goal in the work is assumed to solve the following main tasks: to analyze the role of natural Sciences in the system of medical education; to identify the role of the courses of Informatics and medical statistics in teaching first-year students of medical school; to identify ways of increasing the subjectivity of their learning.

In this regard, speaking about the problem of adaptation of students of medical school, it should be noted a huge role of basic courses natural and mathematical and medico-biological disciplines such as chemistry, biology, physiology, physics, higher mathematics, Informatics.

Scientific knowledge largely determine the possibility and degree of readiness of the expert in the development of private medical practices, new medical technologies.

High refresh rate of scientific knowledge necessitates not only their learning, but effective, and this, in turn, requires learning the ability of future professionals to study in the course of their professional activities, and significant role in solving this problem belongs to pedagogy in the system of higher medical education.

Cognition of mathematics' elementary fundamentals is the Foundation for the study of physical, chemical, and biological processes ensuring the organization of living matter and the prospects for further deeper analysis of these processes using computer science as basic tools of scientific and practical work of the future doctor

Computer science, mathematics is the basis for modeling physical, chemical, and biological processes necessary for statistical data processing during the observation of patients and reporting and for the scientific work of doctor.

Accordingly, in practical classes of Informatics and information technologies we propose to handle the basic skills of students with extensive use of standard elementary concepts of higher mathematics and basic computer technology.

By mastering biophysical, biochemical and ecological research methods, and by the use of computers in biology and medicine, give students the opportunity to conduct system analysis and development of mathematical, computer and laboratory models of specific physical processes for medicine, application of mathematical methods of processing of medical images x-ray, magnetic resonance and ultrasound imaging and other medical diagnostics.

One of the most important subjects studied at medical schools in the last decade, is medical statistics. Its development goes not only in accordance with the traditions of this discipline, but also in close cooperation with the development and achievements of mathematical statistics, information technologies. Knowledge of medical statistics and experience required for each physician in medical research.

However, the mastering medical statistics by first-year students are often poorly motivated. Underestimation of the role of this subject on the part of students stems from the fact that, as a freshman, they insufficiently represent the application of mathematical statistics in medicine and consequently have little interest in mastering the studied material.

The main drawback of the existing educational literature in mathematics and statistics is that it presents an insufficient number of tasks biological, physiological,

medical content, appropriate to the level of knowledge of the first course.

Most often this kind of literature presents the tasks traditionally associated with tossing coins, dice, in the best case – the distribution of students growth or weight of infants; sometimes you can find the tasks about the change of activity of tetracycline or the blood levels of leukocytes, which corresponds to the students' knowledge of more senior years and requires extra thinking.

This issue worries the experts, however, the solution is not found yet.

In this regard, the level of knowledge of medical students in various statistical methods and in the skills of adequate use of them – remains low.

It seems necessary to focus the teaching of this subject in the practical use of statistical methods in solving problems close to medical research and practical work of students.

A statement of the methods of mathematical statistical analysis should be combined with consideration and recommendations in the use of modern office software.

The application of statistics is necessary because in these materials is required to specify estimates of the incidence of nosological forms, the number of patients consulted and treated over a period of time, the number of patients that underwent rehabilitation courses, to provide a ratio of visiting a doctor and treated patients, categorized by age and sex.

For such records for comparison commonly used absolute value (the number of patients treated in the clinic or the hospital), as well as a point sample estimate, often using confidence intervals, in accordance with the requirements of the practice of health administration qualification and commissions.

When teaching medical students to mathematics and computer science it is important to use innovative technologies, which include didactic teaching tools, focused on the realization of axiological aspects of material subjects.

The proposed algorithm is the introduction of first-year students to the problem solving of medical tasks administered in the region the necessity of mastering the skills of using modern CT scan not only to expand knowledge but also more effective practical analysis, diagnostic, treatment and surgical interventions in the treatment of diseases.

BIOMECHANICAL PROPERTIES OF SKELETAL MUSCLES

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Biomechanical properties of skeletal muscles - these are the characteristics that are recorded by mechanical action on the muscle. By the biomechanical properties of muscles include: contractility, stiffness, viscosity, strength and relaxation.

Contractility - the ability of muscles shorten during excitation, resulting in a force of traction.

It was found that during the contraction (shortening) muscle length of thick and thin filaments is not changed. This reduction is a constant feature of the central position of the thick filament in the sarcomere, midway between the Z-line.

Based on these observations, it has been put forward "the theory of moving threads." In accordance with this theory is due to the change in length of the sarcomere slide thick and thin filaments relative to each other (H.E. Huxley, J. Hanson., 1954; A.F. Huxley R. Niedergerke, 1954). The reduction is as follows. By ac-

tivating the muscles attached to opposite Z-thin membrane filaments slide along thick. Skimming occurs due to the presence of the projections (heads) to the myosin filaments, called cross-bridges. Since muscle contraction distance between the Z-membranes decreases, there is a decrease in muscle length. In view of the fact that the sarcomere is not flat and three-dimensional structure, muscle contraction is not only to reduce its length and increase its cross-sectional area (when the thin filaments are drawn in thick).

It was found that the dependence of the force developed by the sarcomere, depends on its length. It was revealed that there exists a critical length of the sarcomere, which develops when they force drops to zero. The first critical value sarcomere length equal to 1.27 μm . It corresponds to the maximum shortening of the muscle. In this condition the muscles regularly spaced strands is broken, they are bent. The second critical length is 3.65 μm . It corresponds to the maximum elongation of the muscles (overlapping thick and thin filaments are not). If longer length sarcomere 1.27 microns and less than 3.65 microns force value differs from zero. When the length of the sarcomere from 1.67 to 2.25 microns, it develops maximum power.

There is a limit value of sarcomere length in which is its gap. This value is 3.60 μm . In order not ruptured, when stretching the muscle fibers protective function takes on the connecting filament - Titina. Due to its elastic properties, it prevents the excessive stretching of the sarcomere (M.Dzh.Alter, 2001).

Rigidity - characteristics of the body, reflecting its resistance to change shape at distorting (VB Korenberg, 2004). The greater rigidity of the body, the less it is deformed by the force. The rigidity of the body is characterized by stiffness coefficient (k). The rigidity of the linear elastic system, such as a spring, is constant over the entire section deformation.

Unlike the spring arm is a system with non-linear properties. This is due to the fact that the muscle structure is very complex. The resulting in muscle strength is not proportional to the elastic elongation. At first, the muscle is stretched easily, then even a small stretch it necessary to apply more and more force. Therefore, part of the muscle compared with a knitted scarf, which is initially easy to stretch and then becomes practically inextensible. In other words, the rigidity of the muscle with its elongation increases. This implies that the muscle is a system that has a variable stiffness. It is found that the stiffness of the muscles in the active state is 4-5 times greater stiffness in the passive state. Muscle rigidity coefficient varies from 2000 to 3000 N / m.

In addition to muscle stiffness it has another important property - viscosity. Viscosity - a property of liquids, gases and "plastic" bodies neinertsionnoe provide resistance to movement of one relative to the other parts (the displacement of adjacent layers). In this part of the mechanical energy is converted into other forms, mainly into heat. This property of the contractile apparatus of muscle causes a loss of energy during muscle contraction, reaching to overcome the viscous friction. It is assumed that there is friction between the filaments of actin and myosin in muscle contraction. Furthermore, friction arises between excited and unexcited muscle fibers (type of muscle fibers are arranged in a mosaic muscle) because of the presence of muscle fibers compound collagen fibrils. Therefore, if you are excited all the muscle fibers, the friction must decrease. It is shown that the excitation of the muscles strong, its viscosity decreases sharply (GV Vasiukov, 1967).

Muscle has a higher viscosity will be characterized by greater area "hysteresis." You know that during exercise increases muscle temperature. Raising the tempera-

ture of muscles associated with viscoelastic properties of muscle and energy losses due to friction of muscle contraction. Warming muscles (warm-up) causes the viscosity of the muscle is reduced.

Tensile strength muscle estimated value of tensile force at which its rupture. It was found that the tensile strength of myofibrils is 16-25 kPa, muscles - 0.2-0.4 MPa, fascia - 14 MPa. For a long time it was thought (EK Zhukov, 1969 VM Zatsiorsky, 1979) that the immutability of muscle length during its operation in the isometric mode is associated with a sprained tendon, but the AA Vine (1990) it was pointed out that the strength of the tendon (the tendon tensile strength is 40-60 MPa) significantly exceeds the strength of the muscle fibers. Therefore, the latent period of excitation muscle tendons almost no change of its length, and thus the length of the muscle remains unchanged fibers and rigidly associated myofibrils. This is possible if some weaker elements myofibrils (sarcomeres) will stretch, while others are more severe - shortened.

Muscle relaxation - a property that is a decrease over time, muscle strength in its constant length.

To estimate the relaxation rate used - duration of relaxation (τ), i.e. the time interval during which the power of the muscle decreases e [3] times the initial value. Numerous studies have found that the height of jumping up from their seats depends on the length of the pause between squats and repulsion. The greater the interval, ie the longer the duration of the work the muscles in isometric mode, the less power and as a consequence - the height of jumping.

PHYSICAL PRINCIPLES OF BLOOD

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Rheology - an area of mechanics that studies the deformation and flow characteristics of real continuous media, some of whom are representatives of non-Newtonian fluid with the structural viscosity. A typical non-Newtonian fluid is blood. Rheology of blood or haemorheology studying mechanical laws, and especially changes fizkolloidnyh properties of blood in circulation at different speeds and in different parts of the vascular bed. The movement of blood in the body is determined by the contractility of the heart, the functional state of the bloodstream, the properties of the blood. With a relatively low linear flow velocities of blood particles move parallel to each other and to the axis of the vessel. In this case, the blood stream has a layered structure, and is called for laminar.

If the linear velocity increases and exceeds a certain amount, different for each vessel, the laminar flow turns into a chaotic, turbulent, which is called "turbulent". The velocity of the blood in which the laminar flow becomes turbulent, is determined by the Reynolds number, which is for the blood vessels is approximately 1160. Data on Reynolds numbers indicate that the turbulence is possible only at the beginning of the aorta and branch locations of large vessels. The movement of blood through the vessels of the majority of laminar. In addition to the linear and volumetric blood flow velocity movement of blood through the vessel is characterized by two other important parameters, so-called 'shear stress' and 'shear'. Shear stress is a force acting on one surface of the vessel in a direction tangential to the surface

and is measured in dyne/cm² or Pascals. The shear rate is measured in inverse seconds (s⁻¹) denotes the value of the gradient and the velocity of moving in parallel between fluid layers per unit distance between them.

The viscosity of blood is determined as the ratio of shear stress to shear rate, measured in mPas. Whole blood viscosity depends on the shear rate in the range of 0.1 - 120 s⁻¹. At a shear rate > 100 s⁻¹, viscosity change is not so pronounced, and after reaching a shear rate of 200 c⁻¹ blood viscosity remains almost unchanged. The viscosity measured at high shear (120 - 200 sec⁻¹), called asymptotic viscosity. The principal factors affecting the viscosity of the blood are the hematocrit, plasma properties, aggregation and deformability of the cellular elements. Given the vast majority of the erythrocytes compared with leukocytes and platelets, blood viscosity properties are determined mainly by red cells.

The most important factor in determining the viscosity of the blood, is the volume concentration of red blood cells (their content and the average volume), called the hematocrit. Hematocrit determined from blood samples by centrifugation, approximately 0.4 - 0.5 l/l. Plasma is a Newtonian fluid, the viscosity depends on the temperature and the composition is determined by blood proteins. Most of all, the viscosity of plasma fibrinogen affects (plasma viscosity is 20% higher serum viscosity) and globulin (particularly Y-globulins). According to some researchers increasingly important factor leading to a change in plasma viscosity is not the absolute amount of protein, and their relations: albumin/globulin, albumin/fibrinogen. The viscosity of blood is increased when its aggregation that defines non-Newtonian behavior of whole blood due to this property of the aggregation-term ability of erythrocytes. Physiological aggregation of red blood cells - the process is reversible. In a healthy organism occurs continuously dynamic process "aggregation - disaggregation" and disaggregation dominates aggregation.

Property of red blood cells to form aggregates depends on the hemodynamic-cal, plasma, electrostatic, mechanical, etc. Factors. Currently, there are several theories to explain the mechanism of platelet aggregation. The best known today is the theory of the bridging mechanism, according to which are adsorbed on the surface of red blood cell of fibrinogen bridges or other krupnomolekulyarnyh proteins, in particular Y-globulins that with decreasing shear forces contribute to platelet aggregation. The net power of aggregation is the difference between the strength in the bridge force of electrostatic repulsion of negatively charged red blood cells and shear force causing disaggregation. Locking mechanism on erythrocytes negatively charged macromolecules: fibrinogen, Y-globulin - is not yet clear. There is a view that cohesion molecules is due to the weak hydrogen bonds and dispersion of van der Waals forces.

There is an explanation of aggregation of erythrocytes depleted by - absence of high molecular weight proteins near erythrocytes, whereby there is a "pressure Interaction", similar in nature to the osmotic pressure of the macromolecular solution, that leads to the convergence of the suspended particles. Besides, there is the theory that the aggregation of red blood cells caused by the fact erythrocytic factors which lead to a reduction of the zeta potential of erythrocytes and change their shape and metabolism. Thus, due to the relationship between the ability of red blood cells aggregation and blood viscosity to evaluate the rheological properties of blood requires a comprehensive analysis of these indicators. One of the most common and widely available methods for measuring platelet aggregation is the estimation of erythrocyte sedimentation rate. However, in its typical embodiment, this test is uninformative, because it ignores the rheological characteristics of the blood.

INFORMATION AND COMMUNICATION TECHNOLOGY IN MEDICAL EDUCATION

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Information and communication technology (ICT) has brought many changes in medical education and practice in the last couple of decades. Teaching and learning medicine particularly has gone under profound changes due to computer technologies, and medical schools around the world, particularly in industrialized countries, have invested heavily in new computer technologies or in the process of adapting to this technological revolution. In order to catch up with the rest of the world, developing countries need to research their options, design the necessary process, and implement essential changes in adapting to new computer technologies.

As computer technology has evolved and improved through the time, it has become more integrated with and inseparable from medical knowledge due to exponential changes happening to the medical field itself. Computer technology has affected medical education from ease of storing and retrieving data, performing statistical analysis, and individualizing the medical education, to the creation of and access to gigantic medical research engines on the Internet, distant learning and practicing, and virtual simulators.

As the world becomes more globalized, having access to information, communication technologies, and information literacy, become extremely important for future physicians. Computer technology is being integrated into medical education as an effective tool for teaching, learning, plus allowing access to a wider variety and greater quantity of ever increasing information and research. However, educational leaders play an essential role in incorporating this new technology into medical education in order to maximize the efficacy of this integration and improve the quality of medical education as well as training informed and efficient physicians for twenty-first century. ICT's impact on medical education has evolved a great deal as both medical science and computer technology have gone under profound enhancement. While developed countries could harvest their investments in ICT, medical schools in developing countries are still struggling with designing, implementing, and delivering ICT required changes in medical education. Educational leaders in developing countries should be aware of this existing technological gap, and start to bring fundamental changes in their institutions with regard to ICT. Information and communication technologies are about to make a massive move into medical practice, not only in selected areas of 'high-tech' medicine, but throughout the field. Research in information technologies is needed in the areas of medical imaging, telecooperation, education and training.

Medical images are produced in such a number and richness of detail that they can only be analyzed with the help of the computer. Computers not only improve the quality of the images, but also help in reconstructing structures, detecting anomalies and measuring. In particular, computers help with an appropriate visualization to make the image contents understandable to the clinician. Three-dimensional images are used more and more. They have the inherent problem that it is extremely dif-

difficult to visualize images consisting of a cloud of material in different shades of grey. Mechanisms have to be found that render the interesting detail and hide other structures that are not relevant for a particular situation. The selection and composition of algorithms depend on the medical goals of a particular analysis and thus can only be determined together with medical experts. Images are needed to plan and control microinvasive surgical procedures. It is therefore necessary to design systems that support the physician with appropriate visualizations throughout the whole process from image acquisition, diagnosis, treatment planning, surgery to final control.

As medical professionals become more specialized, diagnosis and treatment occur in cooperation between different physicians that may be distributed. They have to use computers to exchange their medical data, in particular images. However, data transfer alone is not sufficient. They must also be able to communicate about their patients, to talk freely about medical data and refer to that data during their discussion. Merging these two communication channels (verbal and data communication) is a challenge that needs to be addressed before teleconsultation can be reasonably efficient. And finally, medical knowledge increases at an amazing pace. Physicians are required to keep up with new knowledge for their whole life. To ensure the quality of diagnosis and treatment, special emphasis on continuous education is needed. Computer-based techniques can help with this task, in particular if they provide training on the job, assisting in the analysis of images and teleconsultation. All these problems can be solved only in interdisciplinary teams. One needs physicians that are open-minded to think about new computer-based approaches. Computer scientists have to listen for the problems of their medical partners. Psychologists have to look at human-human and human-computer interaction. Engineers and administrators have to make things work. Systems must be addressed to real user problems. However, it is not possible to completely assess the value of a new development before it is taken into daily practice with real users. Developers must be ready to radically change their systems until these really meet the user needs. A constructive dialog between users and developers, involving a sequence of prototype systems, is needed to acquire the real user needs.

POSITRON EMISSION TOMOGRAPHY

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PET imaging can be used to evaluate normal and abnormal biological function of cells and organs. PET uses a radiopharmaceutical made up of a radioactive isotope attached to a natural body compound, usually glucose. The radiopharmaceutical concentrates in certain areas of the body and is detected by the PET scanner.

The PET scanner is made up of a circular arrangement of detectors. These detectors pick up the pattern of radioactivity from the radiopharmaceutical in the body. A computer analyzes the patterns and creates 3-dimensional colour images of the area being scanned. Different colours or degrees of brightness on a PET image represent different levels of tissue or organ function. The dose of x-rays or radioactive materials used in nuclear medicine imaging can vary widely. Dose depends on the type of procedure and body part being examined. In general, the dose of radiopharmaceutical given

is small and people are exposed to low levels of radiation during the test. The potential health risks from radiation exposure are low compared with the potential benefits. There are no known long-term adverse effects from such low-dose exposure.

The PET scanner is a new kind of medical instrument which is radically different from the tools which the physicians had to make images of the brain in a non-invasive way, that is, without having to open the skull in order to peer inside or to actually take samples of brain tissue. However, x-rays can show only the anatomical structures, and nothing else. The function of these structures could be inferred from anatomical changes, but only when they happened. Enlargement, movement and flow of substances could be observed in some selected organs (for example, the heart or the intestines, or, by using some liquids which are opaque to the x-rays, named contrasts), but not much more. Since the brain does not move, radiography is of little value to study function, particularly normal function.

The first PET scanners had a small number of radiation sensors to build the image, and they could do only a slice at a time. The slices were also very thick. Thus, the images obtained with the PET had a low quality and definition. It was impossible to get the finer details of localization of function in the brain, so their clinical usefulness was quite limited, as compared with modern models.

Modern PET scanners are very expensive and sophisticated pieces of equipment. They are also much easier to install and to operate, and have many new capabilities which clinicians use with advantage to perform many feats of brain imaging, such as a higher speed in obtaining results. For example, as shown here, they can be used to produce movies of parts of the body

Positron Emission Tomography (PET) is a radiotracer imaging technique, in which tracer compounds labelled with positron-emitting radionuclides are injected into the subject of the study. These tracer compounds can then be used to track biochemical and physiological processes in vivo. One of the prime reasons for the importance of PET in medical research and practice is the existence of positron-emitting isotopes of elements such as carbon, nitrogen, oxygen and fluorine which may be processed to create a range of tracer compounds which are similar to naturally occurring substances in the body. In neurology, PET has been used in a range of conditions, and in particular in severe focal epilepsy, where it may be used to complement Magnetic Resonance Imaging.

Another reason for the importance of PET lies in the fact that, unlike earlier radiotracer techniques it offers the possibility of quantitative measurements of biochemical and physiological processes in vivo. This is important in both research and in clinical applications. For example, it has been shown that semi-quantitative measurements of FDG uptake in tumours can be useful in the grading of disease (Strauss and Conti 1991). By modelling the kinetics of tracers in vivo it is also possible to obtain quantitative values of physiological parameters such as myocardial blood-flow in ml/min/g or FDG uptake in mmol/min/g providing the acquired data is an accurate measure of tracer concentration. Absolute values of myocardial blood flow can be useful in, for example, the identification of triple-vessel coronary artery disease and absolute values of FDG uptake can be useful in studies of cerebral metabolism.

APPLICATION AND USE OF WI-FI TECHNOLOGIES IN THE FORMATION AND IN THE CLINIC

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Wi-Fi technology has arisen due to the decision of the Federal Communications Commission of the United States (FCC, 1985) opening of several bands of the wireless spectrum for use without a state license. With this technology, the radio signal is spread over a wide frequency range, making the signal less sensitive to disturbances and difficult intercepted.

The practice of the clinic for the provision of services for setting up and installing wireless networks shows that the vast majority of people simply do not know what is actually Wi-Fi or wireless network.

Wi-Fi Internet access is not quite on the mark, saying that buying that equipment with the label Wi-Fi we get certified, a product that will work seamlessly with the same wireless network. The main use of Wi-Fi technology is to construct a wireless LAN network. Such deployed at airports, train stations, subways, cafes and restaurants in other words, in public places. Internet access services are provided on a fee or free of charge. Also looks justified social package-free access to the Internet for students in high schools or to patients at the clinic. If the organization paid access you need to take care about the convenience of payment for communication services, connection to the network should not take much time and cause problems with customers. In the meantime, we will address the main issue is the velocity of downloading data from the Internet. Naturally it would not coincide with a data rate in a local Wi-Fi network

Due to the fact that in order to connect to the Internet using any third-party provider, often providing services to the wired network. As a rule, the connection speed to the Internet is lower than the network speed Wi-Fi, so the exchange of data within the network is carried out on the statement, high speed and download speed of the Internet connection speed defined by the World Wide Web. Another of the areas of Wi-Fi use are games. Enjoy a game with each other, you can wirelessly, for example by means of consoles Nintendo Wii and Sony PSP. Many experts believe that the Revolution Wi-Fi started initiatives of ordinary consumers. People liked to share the connection to the network using wireless technology. Almost all modern notebook models and current models of cellular phones already equipped with Wi-Fi adapters. What can not affect the increase in the number of public and enterprise wireless networks. Many Wi-Fi operators are actively deploying its hot-foot and provide services as well, and the usual Internet providers for a monthly or one-time fee.

Wi-Fi and got to the aircraft. Some American and European airlines have already equipped their airliners Wi-Fi networks so that passengers can enjoy in-flight internet and talk to the ground on their mobile phones.

And what about the development of Wi-Fi with us? Uzbekistan is now the market is under development and its construction is somewhat different from the west. The fact that worldwide access points are created at the expense of investors and company owners of cafes, hotels, restaurants. In our country own Wi-Fi, and operators are inspired and implementing projects on the equipment of new points of access Wi-Fi.

It hinders the promotion of the technology and the fact that for the operation of Wi-Fi zone you must acquire a permit from the State of supervision communication and nevertheless a number of major Uzbek cities many airports, restaurants, large medical clinics and cafes have begun to actively deploy wireless networks. Undoubtedly for the Wi-

Fi technology future .Poetomu soon new access points will appear in the first instance in places where most paying customers in clinics, business centers, exhibition centers, hotels, restaurants and airports that is where their use is economically justified.

MORPHOLOGICAL CHARACTERISTICS OF LYMPHATIC NODES IN NEONATAL SEPSIS

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Research objective. Revealing of morphological changes in various morfo-functional zones of a lymph node in neonatal sepsis.

Material and research methods. Object of research were paratracheal and mesenteric lymphatic nodes which were during aytopcy from 38 died newborns from sepsis in neonatal period, For histologic research slices of lymph nodes have been processed by standard technique. Histologic incisions for general morphological researches have been painted by hemotoxic[eorine.

Results of research. As a result of studying of histologic preparations of lymph nodes the data confirming presence patomorphological of signs prenatal acquired and secondary immunodeficiency. It is established that at prenatal acquired developed immunodeficiency in the basic morfo-functional zones of lymph nodes developed immaturity, hepoplazy, insufficient settling lymphocitis immaturity. Thus reticuloendotelial stroma lymph node also urine in the form of insufficient formation both cellular, and vascular components,it seems due to inhibition and formation of tissue structures under the influence of mutagen pathological factors of matheres organism . At secondary immunodeficiency in lymph nodes their replacements reticuloendotelial and connecting tissue, and also absence of activation lymph node and the light centres link of immunity in the form of devastation of corresponding structurally functional zones. In lymph nodes T cellular immunodeficiency appeared thichened paracortical layer and absence of active lymph nodes. Humoral B cellular immunodeficiency accompanied thichened root of lymph nodes, hypoplasia int lymphatic follicles and absence of the reproduction centres of lymph nodes Also, at hymaral immunodeficiency were characteristic pathomorphological change reveled in brain layer of lymph nodes. Meat tension were thichened tissue and few celled, in them almost are absent macrophagus and active lymph nodes. Thus, the sepsis at prenatal period on the background of developed prenatal acquired immunodeficiency, or the sepsis leads to the development of secondary acquired postnatal immunodeficiency period.

Conclusions: 1. The Neonatal sepsis is accompanied by presence of lymph nodes of pathomorphological changes, characteristic as for prenatal acquired, and secondary, in postnatal immunodeficiency period.

2. Prenatal acquired immunodeficiency iapptars by immaturity, hypoplasia, insufficient settling lymph nodes mainly morfo-functional zones lymph node.

3. Secondary immunodeficiency accompanied by presence of pathomorphological changes depending on damage cellular or hymaral link of immunity in the form of devastation of corresponding structural-functional zones/replacement reticular and connecting tissue, and also absence of activation of lymphocytes and light centres of multiplication.

POSTNATAL ONTOGENESIS OF IMMUNE ORGANS HAVE PROGENY IN EXPERIMENTAL HYPOTHYROIDISM MOTHER

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The purpose of this study was to clarify the structural aspects of morphogenesis of the immune system in the offspring in experimental hypothyroidism in the mother. Hypothyroidism in female rats induced by introduce per os mercazolil 0.5 mg per 100 g body weight for 21 days. Served as control animals, receiving mercazolil instead of sterile saline. After the establishment of a sustainable reduction of T4 and T3 hormones, females are fertilized by healthy males. Pregnancy controls certain sperm on vaginal smears. After the pregnancy females injected by maintenance dose of mercazolil at 0.25 mg per 100 g body weight. Thymus, spleen and lymph nodes of rats from both experienced and from the control animals studied at 3, 7, 14, 21 and 30 days after birth.

It was revealed that maternal hypothyroidism leads to disruption of the formation of the immune system in the offspring. It noted a violation of the growth rate and the formation of both central and peripheral organs of the immune system. 1-3 days after birth in the experimental rats in the lobules of the thymus clearly distinguish between cortical and medullar zone, cortical area looks dark due to the dense arrangement of thymocytes. On day 7 noted moderate thinning of the cortical areas, and the proportion of brain areas is significantly increased. The boundary between the individual zones segments in most cases erased. The rate of growth of the thymus cortical zone of the experimental animals in almost all observation periods up to 30 days significantly lagged behind the controls. It was also noted reduction in the number of proliferating cells while increasing the number of apoptotic and destructive thymocytes.

In the experimental rats in the early period (3-7 days) postnatal ontogenesis white pulp of spleen was absent. Against the backdrop of multiple foci erythro- and granulocytopoiesis identified and isolated islands of lymphocytopoiesis. Periarterial area on 14-21 day still characterized by low-density lymphoid cells. Morphometric growth rate of white pulp, especially the area of T-dependent (periarteriolar) zones of the spleen significantly lagged behind the control group. It was found a significant decrease in the number of proliferating cells in the white pulp and a significant excess of the destructive cells, mainly lymphocytes and lymphoblasts in all periods of the study. Similar changes were observed in the lymph nodes.

Thus, hypothyroidism mother during pregnancy reduces the rate of formation and growth of the child's immune system. It is in danger of secondary immune deficiency in newborns.

FACTORS INFLUENCING TO THE USE OF ICT IN THE TASHKENT MEDICAL ACADEMY

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Review. Information and communications technology (ICT) is often used as an extended synonym for information technology (IT). It is a more extensive term of the integration of telecommunications and computers.

ICT questionnaire among lecturers. A questionnaire was developed based on basic ICT skills for lecturers in the World for the period between 2005 and 2015. Psychometric factor Instruments of technology acceptance theories were adapted.

Distribution of questionnaire. Online questionnaire form was sent to 634 lecturers individually through using corporative e-mail service of TMA.182 filled forms are returned.

Statistical analysis techniques. Descriptive statistic analysis of: Gender, Faculty, Age, and Position.

Inferential statistic analysis. Multiple Regression is used for To identify factors which are influencing the acceptability of ICT tools in education; Factors Performance Expectancy, Easy of use, Social Influence, Facilitating Conditions were tested to identify Behavioral Intention to use ICT in Education by TMA lecturers.

Results of descriptive analysis by faculty. Over all valid responses are 182:Medical 87; Med-pedagogical 57;Med-prophylactically 24; Nursing 14. Gender: Male – 79; Female – 103. AGE: The Youngest lecturer is 25.The oldest is 78.

Inferential statistics. Performance Expectancy factor was significant to predict Behavioral Intention to use ICT; Easy of Use factor was significant to predict Behavioral Intention to use ICT; Social Influence factor was not significant to predict Behavioral Intention to use ICT; Facilitating Conditions factor was significant to predict Behavioral Intention to use ICT; Behavioral Intention factor can explain 46% of Actual use of ICT in Education.

Findings. Findings indicate that 29 % (182) lecturers do not need administrative orders or influences to use ICT in Education. The findings of this study assume that Social Influence factor is necessary for 71% TMA staff. They (29% of 634 staff) understood the benefits of using ICT in education. 29 % TMA staff have adequate knowledge and recourses to learn ICT implementation for their daily basis teaching practices.

Conclusions. Until now, “Moodle” learning management system is not fully implemented in teaching and learning process of TMA. Other problems may be attitude of TMA staff toward ICT implementation and use. Because, it seems that all affords by TMA senior management will be useless, unless every member of this academy will understand and appreciate the benefits of ICT in their work.

TO DETERMINE THE POISON LEVEL OF “FILIPIL”

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There is a high demand for the cures which are out of bad results and effects in modern medicine .Thus the main problem of the pharmacists to determine and implement the cures which are not harmful in practice. It is known, more than 4500 plants which are grown in Uzbekistan, 500 plants out of them have been used in the public medicine in order to treat different diseases and prevent these diseases. Nowadays, more than 100 of them are widely used in scientific medicine. Furthermore, herbal remedies grow at the same time human body grows, therefore the medicine products which are made of them and they are close to the human organism, as a result of this they are cheaper. So, the demand for the herbal plants is increasing and the requirement of modern pharmacology to learn the main and toxic effects of these plants. In the same way ,we have also intended to learn the main effects as well as toxic effects of the remedy “Filipil” that is made of herbal plants.

Testing materials and methods. In order to run an experiment the liquid “Filipil” is required XI DF 1:10 example is also needed as well as 18-20 gram mice should be selected.Mice should be divided into 4 groups, an example of the 1:10 ratio of the liquid 0.25 mg/kg ,0.50 mg/kg , 0.75 mg/kg, 0,10 mg/kg will send via the mouth. Then dur-

ing 14 days the condition of the mice, action, action coordination, muscles strength, the speed of breathing and the depth, approach to food, the weight are observed.

The results. Learning 'Filipil' liquid is sent in a little portion, in particular 0.25-0.50 mg/kg, there is not any negative results. More larger portions (0.75-1.0 mg/kg) it is observed that the movement of the animals are slower for some time and noticed that equilibrium is partly damaged. Approach to food, breathe movements, the weight, were not noticed any significant changes as well as during 14 test days not identified any death.

Conclusions. 1. The remedies that are made of herbal and natural plants are less poisonous. 2. It can be concluded by the takes results that, Filipil in larger doses is less dangerous, it is harmless to organism.

NEW TECHNOLOGY IMPROVES ANATOMY TRAINING AT MEDICAL ACADEMY

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Purpose and Objectives. One of the challenges of teaching at the present stage is to humanize the learning process, which is reflected in the fact that along with the teaching learning objectives, much attention is paid to development goals of students, formation of their personality.

The need to meet the identified needs in a steadily growing informatization of educational process requires the teacher's knowledge and skills in using the latest educational technologies, possession of advanced methods and tools of modern science. Therefore, we must consider the search for ways of mastering modern technology as a promising and timely ways to improve the efficiency of the learning process. Multimedia is one of the didactic means that has a significant potential. Medicine preclinical and clinical areas based on deep knowledge of anatomy. Anatomy is considered to be the most important discipline in any medical and biological university. Without knowledge of the structure of the human body it is impossible to study any clinical discipline. But at the same time anatomy is one of the most difficult things for all medical students. That is why the quality of teaching of this course is critically important to graduate of decent professionals. The real breakthrough in the study of anatomy has become possible only in the beginning of XXI with the widespread introduction of 3D technology.

Material and Methods. For last years in our department using three-dimensional modeling of the human body, students can easily get acquainted not only with its general structure, they can be traced both in muscle contraction joints bend, as there is breathing or swallowing food. We can study the circulation of blood through the vessels, or to track the movement of food through the digestive system. In addition to the dynamic processes of computer modeling allows us to thoroughly examine any structure is only a couple of times clicking. For a better perception of the subject used a variety of interactive 3D multimedia, exemplified by the program Adam Anatomy 3D, 3ds Max features, Crocodile Technology and AnatomyTrains 3D programs for android system.

Results and Discussions. Introduction of innovative learning technologies in the educational process at the Department of Anatomy at the present time is an objective necessity. The increased need for individualized approach to education is in-

creased. Methods of spatial modeling organs and structures allow them to visualize the dynamic change in the operation. This makes it possible not only to demonstrate to students the static shots, but also effectively used in the learning process dynamic change of structures and symbols (presentations, animations), fragments of video footage of anatomical, histological structure, clinical cases. This information is used for lectures, orientation sessions, as well as practical training in the study of complex structures to demonstrate (for example, sections of the central and autonomic nervous system), which makes the material more accessible. The computer program will allow students to experience less stress during the exam procedures, and teachers to objectively evaluate and analyze student learning.

Interactive features: Highly detailed 3D anatomical models in the respective region with lots of interactive features that allow users to rotate or flip the model, add or remove layers of anatomy from the muscles to the bone, including more than 5,000 precisely defined structures.

Conclusions. The program will provide students with access to a modular program of interactive 3D anatomy software and content are hundreds of images that will help to strengthen the material of the course, providing an invaluable resource of knowledge. Tests allow the program to improve the learning process and consolidate their knowledge.

The success of using computer tools for teaching anatomy can be achieved with careful formatting information and meaningful and illustrative - visual component of the lectures, the understanding of quality differences and the electronic submission of written material, professional and high computer literacy lecturer.

IMMUNOHISTOCHEMICAL CHARACTERISTICS OF THE PROCESS OF APOPTOSIS IN THE THYMUS OF OFFSPRING UNDER EXPOSURE PESTICIDES THROUGH THE MATERNAL ORGANISM

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The purpose of the study - immunohistochemical evaluation of apoptosis in the thymus of offspring in a prenatal and early postnatal exposure to pesticides.

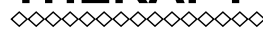
Material and methods. Experiments were performed on nulliparous, white adult female rats, which were divided into 3 groups of 30 animals each. Two groups of animals for 30 days daily per os obtained respectively pesticides cyhalothrin (8 mg/kg), or fipronil (3.6 mg/kg). The third group receives only the same volume of sterile saline served as control. The following day, the females were combined with healthy male rats for fertilization. Pregnancy controlled by the presence of sperm in vaginal smears. The exposure of pesticides females lasted continuously during pregnancy and after delivery until the end of lactation. Offspring obtained from the experimental and control females were examined at the dynamics on days 3,7,14, 21 and 30 after birth. For immunohistochemical assessment of apoptotic cells were used the paraffin sections of the thymus. Apoptotic cells were detected with monoclonal rabbit antibodies to fragments of caspase-3 and protein family p-53 (manufactured by Thermo Scientific, USA). Further imaging procedures of horseradish peroxidase-labeled apoptotic cells were carried out in the normal way through a set of reagents UltraVision (Thermo Scientific, USA). Sections were stained by methylene blue or neutral red. Further, the number of apoptotic cells were counted in the 1000 - 5000

cell slice and apoptosis index was calculated in per milli (%0). All figures have been processed by the method of variation statistics. Statistical significance between control and experimental groups were compared using Student's t test, and P values <0.05 were considered significant.

Results. It is found that the offspring of the control group originally index of apoptosis in the thymus remains high. With age there is a progressive increase in the index of apoptosis, which is the 30th day after the birth is almost 3 times higher than the 7 day old rats. It was found that exposure to pesticides through the mother's body leads to a marked strengthening of the process of apoptosis of thymocytes of the thymus of offspring. The most pronounced increase in apoptosis in experimental animals were observed for 7 days after birth, when the apoptotic index of 1.5 - 2.2 times higher than the benchmarks. Throughout all the experiments, fipronil caused a more pronounced induction of apoptosis compared with cyhalothrin.

Conclusion. Pesticides cyhalothrin and fipronil in conditions of prenatal and early postnatal exposure cause the induction of apoptosis in the thymus of offspring. Induction of apoptosis of thymocytes is one of the major mechanisms of immunotoxic action of modern pesticides. In the development of thymocyte apoptosis induction, along with direct toxic effects of drugs, the important role plays hypothyroidism and oxidative stress observed in the offspring. Discovery of the mechanisms of apoptosis induction under the influence of pesticides contributes to the development of a new generation of pathogenic methods of prevention and treatment of hidden toxic effects in pregnant women and their newborns.

THE THERAPY



EFFECTS OF GENE POLYMORPHISM NO SYNTHESSES ON ENDOTHELIAL DYSFUNCTION IN PATIENTS WITH CHRONIC HEART FAILURE

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Purpose. The study of the influence of gene polymorphism of NO synthase in the endothelial function in patients with chronic heart failure (CHF).

Materials and methods. The study involved 72 male patients, aged 40 to 55 with postinfarction cardiosclerosis (PICS) and they were divided into two groups depending on functional class (FC) of CHF according to the classification of New York Heart Association (NYHA) according to the test of 6-minute walk: the 1st group consisted of 35 patients with CHF FC II and the 2nd group - 37 patients with CHF class III classification NYHA. The control group consisted of 20 healthy volunteers. Vasomotor endothelial function of the brachial artery were evaluated on Doppler sonography by the method of DS Celemajer (1992) on the unit Medison Sonoace-X6 (South Korea). Genotyping was performed by polymerase chain reaction (PCR).

Results. Endothelial dysfunction in patients with heart failure has been associated with the progression of the disease and was characterized by a decrease in endothelial depending on vasodilatation expressed the paradoxical vasoconstriction, which were more pronounced in patients with FC III CHF. This endothelial depend-

ence on vasodilatation (EDVD) decreased in 66% of patients, 28% revealed pathological vasoconstriction, and EDVD remained normal in only 4% of patients. The study of gene polymorphism of NO synthase showed that the number of Glu polymorphic locus Glu298Asp eNOS gene in the homozygous state is associated with the severity of heart failure, and homozygotes for the allele Glu polymorphic locus Glu298Asp eNOS gene marked by a pronounced violation EDVD that showed a decrease in mean blood flow velocity of 23, 2% increase in resistance and pulsatory indices 21.4 and 14.3% ($P < 0.01$) as compared with those of the allele carriers 298Asp.

Conclusion. Thus, in patients with heart failure associative relationship of gene polymorphism of NO syntheses with the severity of the disease is set and the gene polymorphism of eNOS (Glu298Asp) is associated with the violation in endothelial depending on vasodilatation.

PSYCHIATRIC MANIFESTATION OF CARDIOCEREBRAL SYNDROME

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Background. Oneiroid syndrome (OS) is one of the whimsical conditions of consciousness impairment. OS can be manifestation of different diseases. In addition to cardiocerebral syndrome (CCS) has several types and one of them is OS too.

Purpose. The aim our study was to find changes manifestations of OS against the background of Myocardial Infarction (MI) carried in the past.

Methods and materials. We investigated 60 patients with OS and 120 patient with CCS in the Hospital Tashkent Medical Academy and Civil Clinic Psychiatric hospital. We estimated clinical case depend on Etiology, EKG and MRI.

Results. 27 Patients with OS have unknown background and stimulations factors, however 10 patients on this group have acute MI in the history case (3 absence pain type of MI). 7 patients with CCS have OS manifestation and 15 patients with CCS have elements of OS. After long researches we marked patient with OS against the background of heart failure have less fantastic imagination than other patients.

Conclusion. Examination of Patient with OS must include instrumental and laboratorial diagnostic events of heart, especially to exclude atypical type of MI. CCS can be basic of OS in the future and has less changes of consiouness.

STUDY HEARING LOSS IN CHRONIC MIDDLE EAR DISEASE

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Chronic suppurative otitis media is a stage of ear disease in which there is chronic infection of middle ear cleft i.e. Eustachian tube, middle ear and mastoid and in which a non-intact tympanic membrane (e.g. perforation) and discharge are present. The condition is widely prevalent worldwide. Studies have reported a high prevalence in certain populations in North America, and moderately high rates in certain natives of South Pacific Island.

Aims and objectives. The study was done to emphasize the need for regular assessment of sensorineural element in patients with CSOM. It is recommended that when this condition is diagnosed, active surgical or medical treatment should be started to obviate the sensorineural hearing handicap. 25 patients were selected who met the following criterias: Unilateral chronic suppurative otitis media; no history of head injury; no history of previous ear surgery involving bone drilling; no history of meningitis and no history of systemic disease that might affect hearing. This normal contralateral ear served as an excellent control because it eliminated variables such as noise, hereditary or congenital causes.

Methods. All the patients underwent complete clinical examination. Pure tone audiometry was performed by a calibrated audiometer in a sound-proof room and narrow band masking was used when appropriate.

Statistical analysis. Differences in bone threshold in diseased ears and control ears at five test frequencies (250HZ, 500HZ, 1KHZ, 2KHZ, 3KHZ & 4KHZ) were analysed.

Results. Of the 25 patients studied, 14 (56%) were male and 11 (44%) were female. Age ranged from 4 years to 63 years with a median of 35 years. The disease was in 12 (48%) right and 13 (52%) left ears. Thus male to female ratio and side of the ear affected were the same. Comparison of bone conduction thresholds in diseased and non-diseased ears (n=25). In 250 frequencies on normal ear 12.2 ± 5.5 and diseased ear 12.8 ± 7.7 , in 500 frequencies on normal ear 9.22 ± 7.0 and diseased 9.80 ± 9.6 , in 1000 frequencies on normal ear 8.41 ± 7.1 and diseased 9.11 ± 9.5 , in 2000 frequencies on normal ear 9.06 ± 7.6 and diseased 11.58 ± 10.1 , in 4000 frequencies in normal ear 15.19 ± 8.1 and diseased 17.64 ± 10.3 . In the present, study only unilateral cases of chronic suppurative otitis media were included and sensorineural hearing loss was evaluated as difference in bone conduction threshold between diseased and control ears. This was found to be significant (approximate 27 dB) especially at higher frequencies e.g. 2 kHz & 4 kHz.

Conclusions. Thus, it is emphasized that the cases of chronic suppurative otitis media should be diagnosed early, by increasing awareness amongst people and managed effectively so as to prevent the chances of developing sensorineural hearing loss.

THE DIFFERENTIATED TREATMENT OF PARKINSON'S DISEASE IN PATIENTS WITH CONCOMITANT DIABETES MELLITUS TYPE 2

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Objective. Tto study the state of lipid metabolism in PD patients with concomitant type 2 diabetes with different glucose tolerance and the influence of the DA agonist receptor bromocriptine on the clinical features of the disease.

Materials and methods. The survey of 96 PD patients at the age of 45-65 years with stage of disease 1.5-3.0 by Hoehn and Yahr. 63 patients were treated with bromocriptine at 7.5 mg / day for 25 days with basic antiparkinsonian therapy. According to the degree of violation of carbohydrate metabolism, the patients were divided into three groups: Group I - normal glucose tolerance (n = 45), II group - impaired glucose tolerance (IGT) (n = 22), group III - concomitant with type 2 diabetes (n = 29). The control group (CG) included 35 healthy individuals of appropriate age. The criteria for

diagnosis of NTG during oral GTT were taken the position recommended by the WHO Expert Committee on DM (1996). Status of lipid spectrum was assessed by blood concentrations of total cholesterol (TC), low cholesterol (LDL) and high (HDL) density, triglycerides (TG), apolipoprotein B (apo B); atherogenic index was calculated (AI).

Results. Studies have shown, that treatment with bromocriptine contributes to a significant improvement in lipid metabolism, especially in patients in II and III groups. Thus, the total cholesterol level decreased by 10.9% in Group II and by 12.3% in group III. The concentration of atherogenic LDL cholesterol in patients of I group decreased by 6%, group II - 28.6%, III group - by 18.2%. Noteworthy increase in anti-atherogenic HDL cholesterol in the blood plasma of patients with PD: in the I group - 25%, in the II - 27%, in the III - 26%. As expected, the most significant decrease concentration of triglycerides after a course of treatment with bromocriptine revealed in patients with impaired glucose tolerance (25.2%) and in patients with concomitant type 2 diabetes (26.1%). Reducing the concentration of apoB on a background of treatment with bromocriptine was particularly pronounced in patients in II and III groups. Reducing the total cholesterol and increasing HDL-C after treatment with bromocriptine reduced the AC (in the I group - by 33.3%, in II - 24.5%, in the III - 33.9%), which significantly reduces the risk of vascular disease. The observed in our study lipid-lowering effect of the medicine is associated with the central mechanisms of inhibition of lipogenesis.

Conclusion. Course bromocriptine treatment not only normalized the lipid metabolism, but also significantly improved the neurological status of patients. The data obtained allow to recommend DA receptor agonists as the drugs of choice in the differentiated treatment of patients with PD with impaired glucose tolerance at all stages of the disease for the prevention of vascular lesions of the brain.

THE INITIAL EMERGENCY MEASURES IN ADULT ACUTE EPIGLOTTITIS

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Introduction. Acute epiglottitis, a serious life-threatening disease because of its potential for sudden upper airway obstruction is most commonly seen in young children (between 2-7 ages), although it can occur in adults (between 40-45 ages). Because acute epiglottitis is rare in adults and it is often misdiagnosed. It is commonly caused by *H. influenzae*. The incidence in adults is 0,97-2,8/100 and the ranges of mortality is between 0-30%.

Goal: to study initial emergency measures in adults with acute epiglottitis.

Methods. Since 2014, April 48 patients with epiglottitis diagnosis turned to the Department of ENT of Baku Health Centre. 20 of them were women and 28 of them were men. Most of them were between the ages of 19-40 and 40- 65. Etiological factors of disease in 16 patients were infection-allergic, in 17 patients were trauma and in 4 patients were thermal. 4 of the patients were transferred to resuscitation and intensive therapy with stenosis of the larynx and respiratory failure. When patients were registered in our clinic, they had initial signs like throatache, hoarseness, dysphagia, hyperpyralism, high temperature, tachycardia, inspiratory stridor and orthopnoea [4]. In

addition, in some patients had coughing. By direct laryngoscopy was marked oedematous, reddish epiglottitis, loss of the vallecular air space. Lateral neck roentgenography played additional role in the confirmation of diagnosis [3]. 4 patients, who have been transferred to the department of resuscitation, were applied endotracheal intubation, intensive measures were implemented and after 3 days they have been transferred to department of ENT. All patients were assigned antibiotic therapy (parenteral), steroid therapy and antihistamine therapy within 10 days [2]

Results. All the patients who were presented with acute epiglottitis diagnosis to the ENT department in our Centre, had got good outcomes. During the examination we noticed a decrease in swelling and redness epiglottitis and improvement in breathing.

Conclusion. Accurate diagnosis and early undertaken initial emergency measures helped to have good results in all patients. The treatment of patients are led according to the international protocols, and our results are the same with the shown literature data.

THE CONDITION OF CEREBRAL HEMODYNAMICS IN THE SECONDARY VASCULAR PARKINSONISM

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It is known that Parkinsonism syndrome as a rule, linked with hemodynamic disturbance of middle brain arteries' deep branches. The Parkinsonism disease often accompanies with changes of extra cranial vessels' condition, because of this in many cases it leads to arise of lacunar infarction.

Objective: to study influence of narrowing lesion of the main brain arteries to progress of secondary vascular stenosis. Prognosticate stenosis degree and prevent risk factors in the vascular Parkinsonism, and prophylaxis of severe complications of the Parkinsonism, to conduct control over vascular course of disease

Material and methods: for investigation was selected 40 patients with tremor and tremor-rigid forms of Parkinsonism syndrome. Monitoring and examinations were carried out since at the angioneurology and neurology departments of the 1st and 2nd clinics of Tashkent Medical Academy and 16-family polyclinic in Tashkent. In all patients was conducted duplex scanning of the brachiocephalic blood vessels. The average age of all patients was between 48 and 75 age. Among them women are 16 between the ages of 48 and 67 (average 60,1) and their part was 40%. The number of men were 24 between ages of 51 and 75, their average age was 58,1, men composed 60% of the control group.

Results. In 24 from all patients with vascular Parkinsonism who had examined, was revealed narrowing of common carotid arteries. It was compiled 60% of control group. Totally, in 14 patient from 40 had bilateral carotid artery stenosis and it was considered as a 35%. In 4 patients was revealed right carotid artery stenosis. Left carotid artery stenosis was found in 6 patients. (15%). In 16 patients weren't considerable changes of the carotid arteries. (40%).

Conclusion. In patients with vascular Parkinsonism, it frequently occurs with carotid arteries stenosis. And it leads to narrowing of the brain arteries. To prevent its negative influence it should be conducted regular duplex scanning of brachiocephalic arteries in patients with vascular Parkinsonism. To progress of secondary vascular Parkinsonism, influence not only lesion of deep vessels, but also stenosis of main brain arteries.

EARLY DETECTION OF MORBIDITY WITH PARKINSONISM: COORDINATOR DISORDERS OF VISUAL MOTOR FUNCTION

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Actuality: parkinsonism is one of the actual problems of current neurology and geriatrics. Disorders of eye movement will improve diagnostic of several neurological diseases. Parkinson's disease is important to determine these signs and identify markers of disease with the help of following perspective methods.

Objective: early diagnose of Parkinson's disease, determine motor and coordination disorders of eyes in patients with Parkinsonism, early diagnose their relatives.

Material and methods. Totally 44 patients took part in examination (26 men and 18 women), among them men between 49-72 years of age an average is 63.4, women's average age was between 53-73 years an average is 65.7. All studies were carried out at the 1st and 2nd neurology departments, angioneurology department of the Tashkent Medical Academy and 16th family polyclinic of the Olmazor district. Patients were divided in 3 groups.

1. Patients with parkinsonism. Total 16 patients (9 male and 7 female)
2. Relatives of patients with parkinsonism. 15 person (7 men and 8 women)
3. Control group - 13 volunteers (10 men and 3 women)

All patients were completely examined by neurologist, ophthalmologist. Among special examinations were provided computer tomography of the brain and transcranial sonography.

Results: in 10 patients from 2nd group on the transcranial sonography were detected hyperechogenic zone in the black substation. In patients of 1st group were detected asymmetric parameters of saccades, lengthening of their latent growth time, regard to control group. In 5 patients' relatives from the control group were found hyper echogenic black substation and such neurologic and ophthalmologic disorders.

Conclusion: one of the early signs of Parkinsons' disease is saccades, changes of black substation structure is as the explanation of this. We think, that examination of visual motor coordination in patients who have hyper echogenic zones will play important role to diagnose Parkinson's disease.

LESIONS OF THE CARDIOVASCULAR SYSTEM IN PATIENTS WITH RHEUMATOID ARTHRITIS

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Introduction. Cardiovascular diseases are the leading cause of death among patients with rheumatoid arthritis (RA).

Purpose of the study. To set the frequency of cardiovascular lesions in patients with RA who were hospitalized in the 1st cardiorheumatology clinics of Tashkent Medical Academy (TMA) for 2014-2015 years.

Materials and Methods. A prospective analysis was conducted in 45 RA patients hospitalized to the cardiorheumatology department at the age of 45 to 55 years (43 women, 2 men). The median age was 51 ± 3 years. Average duration of the disease

was about 8 years. Seropositive patients 20 (44.4%), seronegative 25 (55.6%). All patients were performed instrumental examinations: electrocardiography (ECG).

Results and Discussion. Cardiac complaints were noted in 31 patients (68.9%), including increased blood pressure – 19 (42.2%), dyspnea – 4 (8.9%), pain in heart – 4 (8.9%), intermittent heart feeling – 5 (11.1%), palpitations – 30 (66.7%), dry cough – 1 (2.2%). In 14 (31.1%) cases, the ECG picture was interpreted as normal. Pathological changes include cardiac arrhythmias in 11.1% (5 persons), conductivity infringements – 6.7% (3 patients), symptoms of left ventricular hypertrophy – 33.3% (15 patients), signs of ischemia – 6.7% (3 patients), metabolic changes in the myocardium – 33.3% (15 patients).

Findings and conclusions. Thus, damage to the cardiovascular system is widespread among patients with RA. The frequency and number of complaints are correlated with duration and activity of the disease and the patients' age.

CLINICAL MANIFESTATIONS OF ACUTE EPIDIDYMITIS IN PATIENTS OF DIFFERENT AGE

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Introduction. Acute epididymitis, an infectious-inflammatory disease of the epididymis, lasts less than six weeks. In some cases, the inflammatory process is involved, along with involved testis, and then it comes epididymo-orchitis. In the structure of emergency urological incidence of acute epididymitis share ranges from 4.6 to 10.2%. Acute epididymitis fifth in the incidence of urological disease in men aged 18 to 50 years. Acute epididymitis is mostly one-sided, two-way process is observed in 9% of patients. In 15% of patients as a result of suffering an acute inflammation formed a chronic inflammatory process in the epididymis, which in turn is causing sclerotic, degenerative changes in it, a violation of patency of the vas deferens, leading to the development of obstructive infertility. The aim of our study was research clinical manifestations of acute epididymitis in patients of different age.

Materials and methods. The basis of the research results have made the examination and treatment of 60 patients with epididymitis, applied in "Republican Specialized Center of Urology" in the period from 2014 to 2015. The age of patients ranged from 18 to 60 years (mean age $39 \pm 6,5$ years). Depending on the causes of epididymitis, studied patients were divided into three age groups: Group 1 - 20 patients with age of patients from 18 to 35years., Group 2 - 20 patients with age of patients from 36 to 55 years . Group 3 -20 patients age group of patients over 55 years. Patients were carried out in accordance with the algorithm of examination of patients with epididymitis, adopted at the clinic, including assessment of complaints and medical history, physical examination, analysis of urine, bacterial urine culture if indicate, ultrasound examination. The study evaluated by common reasons of epididymitis, as well as depending upon the age.

Results. In the study of patients to detect acute epididymitis revealed the following: In the first group, 75% (15 patients) found sexually transmitted infections : Chlamydia spp. Neisseria gonorrhoeae; 15% (3 patients) trauma urethra; 10% (2 patients) after suffering a UTI at which found E.Coli, Klebsiella. In the second group revealed 80% (16 patients) after suffering a UTI at which found E.Coli, Klebsiella; 10% (2 patients) trauma urethra; 5% (1 patient) found sexually transmitted infections : Chlamydia spp.

Neisseria gonorrhoeae; 5% (1 patient) operated for hydrocele; In the third group revealed 80% (16 patients) after TURP, TUR of bladder tumors; 10% (2 patients) after suffering a UTI at which found *E.Coli*, *Klebsiella*; 10% (2 patients) after Bergman surgery (hydrocele).

Conclusion. From the above data it can be concluded that between 18 and 35 years, the cause of acute epididymitis found sexually transmitted infections in 75% of cases. So, mostly young sick epididymitis due to sexually transmitted infections. The second group of patients aged 36 to 55 years, the cause of acute epididymitis revealed 80% UTI, and patients of middle age suffer from acute epididymitis due UTI. The last third of the group aged above 55 years, 80% of the cases revealed state after TURP, TUR bladder tumors; On these patients we can say that the main cause of acute epididymitis was different operational intervention.

ASSESSMENT OF ANXIETY IN PATIENTS WITH TYPE 2 DIABETES

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Objective. To estimate disorders of cerebral blood flow and symptoms of anxiety in patients with diabetic encephalopathy

Materials and methods. The study included 46 patients (32 women - 69.5% -30.5% 14 men suffering from diabetes type 2 who were treated at the Department of Endocrinology 3rd clinics of Tashkent Medical Academy. The age of patients was $55,5 \pm 9,1$ years, body mass index (BMI) $31,3 \pm 3,6$ kg / m². The diagnosis of type 2 diabetes type and degree of compensation of carbohydrate metabolism are set according recommendation WHO (1999). All patients were evaluated with anthropometric parameters BMI calculation the formula Quetelet, conducted a study of carbohydrate metabolism -fasting blood glucose , postprandial blood glucose and glycated hemoglobin (HbA1c) for the quantification of the main symptoms of neuropathy (pain, burning, paresthesia, numbness) used a diagram of Neuropathic Symptomatic Account (NSA) both for individual symptoms, so and the total score. The clinical neurological examination was carried out to objectively assess the severity of sensory-motor disorders in accordance with the scale of the Neurological Deficit Syndrome. To determine the symptoms of anxiety and its degree of anxiety scale was used Spielberg (determined by situational and personal anxiety) - Spielberg State and Trait Anxiety Scale. We studied hemodynamics in cerebral arteries by Doppler ultrasound pulsed and continuous modes. We investigated total, external and internal carotid arteries, vertebral arteries using a sensor with a frequency of 4 MHz. The control group consisted of 10 healthy subjects matched for age and sex. Statistic processing was carried out using Excel. The significance of differences was assessed by Student's t-criterion. The calculation of the correlation coefficient was measured by Spearman rank. The statistical significance of the results was confirmed at $p < 0,05$.

Results. Characteristic for this category of patients was permanent cephalgic syndrome and a high percentage prevalence (90%) expressed enough asthenoneurotic manifestations. In all patients diagnosed with diabetic sensory neuropathy symmetrical. At the same time, the NSA averaged $9,43 \pm 0,7$ points, and the NDS- $8,6 \pm 0,3$ points. In the analysis of carbohydrate metabolism were identified by us: 8 (18.2%) diagnosed with the condition of compensation and in 36 (81.8%) patients - decompensation given BMI, SBP, DBP did not differ from the control group. At the same time there

is a significant increase in carbohydrate metabolism in patients examined in comparison with the control group. Since HbA1c, a compensation group increased by 36%, and in group decompensation by 48%, which reflects decompensation diabetes.

When analyzing the Doppler examination bra and vertebrobasilar arteries we found: atherosclerotic changes in the vertebral arteries, the common, internal and external carotid arteries. In analyzing the parameters of Doppler brachycephalic and vertebrobasilar vessels we found: Doppler ultrasound signs of carotid atherosclerosis and paravertebral vessels 9 (20.4%) patients diagnosed constrictive atherosclerosis left vertebral artery 11 (25%) - on the left external carotid artery. Critical cerebral vascular ischemia in patients were not detected. In these patients, there is a growing linear blood flow velocity compensated character. In patients with compensated anxiety absent in 60% of cases were mild in the remaining 40% of patients. In patients with decompensated diabetes in only 16% of patients with anxiety is absent, the remaining 84% of patients with mild anxiety prevailed, while in these patients, the median scale Spielberg was $37,4 \pm 5,8$ points. It should be noted that 80% of patients prevailed personal anxiety. Also, patients with prevalence of atherosclerosis in the vertebral arteries anxiety was more pronounced $-35,4 \pm 2,8$ points, compared, which dominates atherosclerosis of the carotid arteries. Average in this case amounted to $30,5 \pm 2,9$ points.

Conclusion. In patients with type 2 diabetes decrease in speed performance, increase index of peripheral resistance indicative of the progressive reduction of Elastic-tonic properties of a vascular wall, which ultimately helps to reduce cerebral blood flow and the development of diabetic encephalopathy.

IMAGING OF VERTEBRAL ARTERY: DIFFERENTIATION OF HYPOPLASIA FROM STENOSIS

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Posterior circulation stroke reckons at about 20% of ischemic strokes, and when there is the suspicion of vertebrobasilar ischemia, it is quite difficult to choose correct diagnostic investigation. Non-invasive imaging of vertebral stenosis is technically more complex compared with carotid stenosis. On Duplex ultrasound (DUS), most carotid stenosis can be clearly imaged, while only limited visualization of the vertebral artery is possible (S Khan, G C Cloud, S Kerry, H S Markus, 2007).

Purpose of our research was to establish specificity of Duplex ultrasound (DUS) and magnetic-resonance angiography (MRA) in differentiation of stenosis from hypoplastic vertebral artery (HVA).

Materials and Methods. We performed a retrospective review of 27 patients with chronic brain ischemia and 35 asymptomatic people at first clinic of Tashkent Medical Academy to validate the accuracy of the non-invasive imaging techniques DUS and MRA with computed tomographic angiography (CTA) as the reference standard. Age of patients ranged from 38 to 69 years. The first group with 30 patients were performed DUS, 32 patients – MRA (second group).

Results. In 19 patients from the first group the stenosis was diagnosed, whereas hypoplasia was shown in 11 patients. CTA confirmed 9 cases of hypoplasia. 17 and 15 patients from the second group had stenosis and HVA respectively. CTA confirmed 13 cases of HVA. Specificity of DUS and MRA amounted 81.8% and 86.7% respectively.

Discussion. There are no significant differences in distinction of HVA from vertebral artery stenosis by both mentioned diagnostic tools ($p < 0.01$). The average price of DUS is 45000 UZS, MRA 250000 UZS, so fivefold economic benefit is observed. Ultrasound is non-invasive, cheaper and usually more readily available. Non-contrast magnetic resonance angiography (MRA) allows improved visualization of the vertebral arteries, and more recently, contrast enhanced computed tomographic angiography (CTA) have been proposed as alternatives to the gold standard of intra-arterial angiography.

EFFECTIVENESS OF ROBOTIC MECHANOTHERAPY IN COMBINED PHYSICAL REHABILITATION IN CHILDREN WITH IMPAIRED MOVEMENT

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The main task of the treatment of cerebral palsy (CP): the most complete development of abilities and skills of the child and its communication. The priority of regenerative medicine is socialization of young patients, achievement of independence in everyday life and possibility to return to activity. Today, one of the most progressive methods of treatment of children with impaired movement is robotic mechanical therapy, a type of device which is "Lokomat".

Purpose of research: to develop a comprehensive program of physical rehabilitation by using robotic mechanotherapy in children with impaired movement and assessment its effectiveness.

Materials and methods: The study involved 36 children aged from 4 up to 14 years old who got rehabilitation in the Republican center of social adaptation of children with various forms of cerebral palsy associated with impaired motor functions. Among patients spastic quadriplegia was observed in 2%, spastic diplegia - 40%, hemiplegic form - 32%, dyskinetic form - 10%, ataxic form - 15%.

The program of physical rehabilitation was developed, which included, except of traditional complex of therapeutic exercises, massage, lessons with psychologist and speech therapist, training on robotic device "Lokomat". The contingent was divided into 2 groups depending on the ongoing rehabilitation programs: first group (basic) included patients in a rehabilitation program who trained on robotic device "Lokomat"; second group (control) - patients with traditional rehabilitation program. The course consisted of 20 procedures.

To evaluate the effectiveness of rehabilitation measures following methods were carried out: evaluation of physical development (somatoscopy, anthropometry), neurological status, measuring the range of motion in the affected limbs, electromyography, psychological testing.

Results. As a result of complex treatment indicators of motor activity of children changed to varying degree. There was a significant increase in muscle strength in the lower limbs in group 1 by 1.0-1.5 points higher compared with group 2. Muscle tone decreased by 0.8-1.2 points higher in the basic group than in the control group. Patients of group 1 (67%) are adapted to the vertical position by the 4-9 training sessions, and in group 2 (34%) patients 18 training sessions were not enough to be translated into a vertical position, the other adapted by 15-18 day. In 2-3.5 times the results of mobility and movement by auxiliary means higher in the group receiving robotic mechanotherapy. In assessing the psycho-emotional state while using a ro-

botic mechanotherapy, indicators of anxiety, depression and hypochondria in the first group at 1.5-2.5 times lower than in the second group.

Conclusions. The developed program of physical rehabilitation by using of device "Lokomat" improves postural and dynamic stability of the patient in the vertical position, strengthen muscular system in the affected limbs and raise the psycho-emotional status of the small patients, which significantly increases the motivation of the child to independent walking.

EFFECT OF L-ARGININE ON THE METABOLISM OF NITRIC OXIDE IN PATIENTS WITH DIABETIC NEPHROPATHY

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Objective. To study the metabolism of nitric oxide (NO) during the treatment with L-arginine in patients with diabetes mellitus (DM) type 2 with diabetic nephropathy (DN) IV stage (in Mogensen).

Materials and methods. The study involved 35 patients with DN stage IV, were hospitalized in the Republican Scientific and Practical Center of Nephrology-based III-TMA clinic from October 2014 to November 2015. The average age of the patients was $43 \pm 4,3$ years. The patients, in addition to general clinical and biochemical assays were studied following parameters characterizing the nitric oxide metabolism: the enzyme NO-synthase in the serum, the ratio NO_2/NO_3 by Graves's method. Checkpoints studies were 1, 10 and 30 days of treatment. Patients received a fixed rate of complex pathogenetic therapy in accordance with the approved national standards. In this part of the patients (23 people) in addition to the treatment was introduced L-Arginine in the form of the drug "Tivortin" 100,0ml at a dose of 4.2% solution intravenously the drip every day, a course of 10 injections, followed by outpatient oral administration of 5ml four times a day for 3 weeks.

Results of the study: As shown the results of the study, all patients with type 2 diabetes with DN stage IV (according to Mogensen) had a marked imbalance in the system of NO, which was manifested in a sharp increase in the content of NO-synthase by 200%, while a small decrease in the ratio of $\text{NO}_2 / \text{NO}_3$ 30% from the norm.

The ten-day course of the treatment of patients in both groups did not lead to significant changes in the metabolism of NO: NO-synthase content and the ratio of $\text{NO}_2 / \text{NO}_3$ changed insignificantly.

On day 30 in patients who did not receive L-arginine, these indicators remained unchanged. Thus, in patients receiving "Tivortin" found positive trend of similar parameters: the concentration of NO-synthase decreased from $296,6 \pm 13,7$ pg/ml to $248,48 \pm 18,8$ pg/ml ($p < 0.05$), wherein the ratio of NO_2/NO_3 not significantly changed, but there is a clear tendency to increase.

Conclusions: **1.** At patients with type 2 diabetes with DN stage IV (according to Mogensen) revealed a sharp increase in the level of the enzyme NO-synthase, with a small decrease in ratio of NO_2/NO_3 . **2.** Standart treatment of DN without NO donators for 30 days does not resolve the imbalance in the nitrogen oxide. **3.** The use of L-arginine per 30 days in the treatment of patients with DN largely eliminate the imbalance in the metabolism of NO, which is manifested reliable depression NO-synthase to normal levels, without significant effect on the ratio of NO_2/NO_3 .

THE OBSERVATION OF EFFECTIVENESS IN TREATMENT OF SYSTEMIC LUPUS ERYTHEMATOSUS COMPLICATED BY EPYACTIVITY ON EEG

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Background. Systemic lupus erythematosus (SLE) is a autoimmune disease of connective tissue, which etiology is not known characterized by production of organospecific autoantibodies directed to provoke the immune inflammation of not only internal organs but also central nervous system (CNS). Even though the changes of CNS does not often appear clearly in clinic picture, the dysfunction of cortex is confirmed on neurophysiological examinations.

Aim. the purpose of our research work is a study of cortex function on patients with SLE.

Material and methods. We examined 18 SLE patients (Patients age: 15 – 42; middle age $28,3 \pm 3,2$) at cardioreumatology department of Tashkent Medical Academy who treated with additional some cytostatics in treatment sheet and there were not any cytostatics in treatment sheet for 25 control group of SLE patients. All of these patients were women. All patients underwent EEG.

Results. On 55% SLE patients in main group was found epyactivity on EEG, but there was not any clinic signs. 11,67% Patients who suffered from SLE were afflicted by other several neurological complications but on 27,7% SLE patients were not determined any changes on EEG. On patients with SLE in control group were determined 24% epyactivity, 20% other changes respectively, but other 56% patients were healthy. After getting treatment course, patients were carried out the EEG iteratively. As a result on 5,5% SLE patients in main group kept epyactivity, some other changes were found on 11,1% ones and 83,33% patients who suffered from SLE got rid of from neurologic complications. Epyactivity was found on 16% SLE patients, on 12% ones were observed other complications and 72% of patients were far from some neurological changes on EEG in control group. EEG affirmed the positive effect in both group after treatment.

Conclusion. It should be noted that, EEG may be useful not only in determination of some neurologic modification but also observation of efficiency in cure of SLE patients.

STERIOD OSTEOPOROSIS IN PATIENTS WITH RHEUMATOID ARTHRITIS

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Introduction and Objective. Pathogenetic treatment of rheumatoid arthritis (RA) with glucocorticoids (GC) is justified with their ability to effect the system of proinflammatory cytokines, however long intake of support, minimal doses of GC has a negative effect on the bone.

Purpose – to determine the frequency of osteoporosis (OA) and osteopenia in patients with RA, with long-term GC intake.

Materials and Methods. The study included 45 patients ranging from 45 to 55 years old (average age 51 ± 3.07 years) with a reliable diagnosis of RA (RA diagnosis was defined according to criteria of the American College of Rheumatology, 1987).

To assess the status of bone we used ultrasonic densitometry. Laboratory studies included blood total calcium level.

Results and Discussion. According to anamnestic data of 45 medical histories, of which 43 women and 2 men. In most cases, female patients had menopause (86% of women). Reduced plasma calcium level partly confirms OP in patients with RA. Based on the conducted ultrasonic densitometry and results of the survey, OP was diagnosed in 36 (80%) patients with RA (t-criterion within 2.6 ± 0.03), osteopenia in 9 (20%) (T-criterion within 1.4 ± 0.06).

Findings and conclusions. The high risk of development of OP identified in RA patients receiving long-term low-dose GC ranging from 2.5 to 10 mg/day. Patients with long-term intake of GC in small doses, are recommended with regular (1 time per 6 months) densitometry and should be administered with calcium drugs on threshold values of t-test.

FIBRINOLYTIC THERAPY PROGNOSTIC FEATURES IN PATIENTS WITH ACUTE ST ELEVATION MYOCARDIAL INFARCTION

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Purpose. Fibrinolytic (thrombolytic) therapy was a major advance in the treatment of acute ST elevation myocardial infarction (STEMI), since over 90 percent of such patients have complete occlusion of the culprit artery due to thrombus. However, primary percutaneous coronary intervention (PCI) became the preferred reperfusion strategy for most patients suffering from STEMI, due to its better outcomes such as mortality and lower rates of recurrent ischemia and major complications such as intracranial hemorrhage. Nevertheless, due in part to limited availability of timely primary PCI, fibrinolysis remains an important reperfusion strategy in many locations.

Materials and methods. We investigated 300 patients by gender (200 males and 100 females) aged between 45 – 65 with diagnosis STEMI during 2010-2015 at Cardio-emergency department 1st clinic of Tashkent Medical Academy. Patients arrived at emergency department at different times from initial stages of the disease to anterioseptal, anterioseptolateral, posterior and inferior acute STEMI. From that, both conventional and fibrinolytic therapy were performed on 180 patients and the rest of the patients were administrated only standard therapy because of late arrival. Research was based on prospective study.

Results. The 5 year survival rate after thrombolytic therapy with intracoronary streptokinase was 81% (146 patients) compared with 68% (82 patients) after conventional therapy. The greatest improvement in survival was observed in patients with anterior infarction (85% versus 62% with thrombolytic therapy or conventional therapy, respectively). Left ventricular ejection (LVEF) fraction at the time of hospital discharge was better after thrombolytic therapy (from 42% to 65%). Thus, the salutary effects of thrombolytic therapy appear to be the result of myocardial salvage. Reinfarction within 3 years was observed more frequently after thrombolytic therapy, particularly in patients with inferior wall infarction and those with 90% stenosis of the infarct-related vessel at discharge. Coronary bypass surgery and coronary angioplasty were performed more frequently after thrombolytic therapy than in conventionally treated patients. In 5 years, approximately 40% of patients in both groups have not experienced reinfarction or additional revascularization procedures.

Conclusion. These observations demonstrate that the benefits of thrombolytic therapy are maintained throughout 5 year follow-up. The benefit of fibrinolysis is greatest when therapy is given within the first four hours after the onset of symptoms, particularly within the first 70 minutes as the resistance of cross-linked fibrin to fibrinolysis is time-dependent. Unfortunately, many patients go to hospital more than six hours after the onset of symptoms. Any longer delay decreases the amount of myocardial salvage and functional benefits.

EFFECTIVENES OF RADIAL SHOCK WAVE THERAPY IN THE TREATMENT OF MYOFASCIAL SYNDROME

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According to different authors, from 30 to 85% of the population suffer from myofascial pain syndrome with varying severity (V. Lisak, 2010; Sikorskaya MV, Remenyuk Yu, 2011). Selection of appropriate methods of influence on the trigger points and muscle affected is an urgent problem.

Goal. A comparative analysis of the treatment of patients using the method of shock wave therapy and the classic technique.

Materials and methods. We have observed 56 patients who were divided into 2 groups. Among the 32 patients of the study group were 20 women and 12 men, average age was $34,12 \pm 3,08$ years; in the control group of 24 patients, including 15 women and 9 men, average age - $32,43 \pm 2,18$ years. All patients of the main group had previously been training medical and physiotherapy treatment, noting their time efficiency. Patients in the control group were treated according to the standards accepted methods of using drug therapy (the use of anesthetics, NSAIDs, muscle relaxants), by administering stretching exercises muscles, trigger points impact on the ultrasound. In the study group were exposed to the trigger point shock wave therapy. The procedure is performed on an outpatient basis with an interval of 5-10 days, the course of treatment - 5-7 procedures. During the first 2 weeks of treatment, patients advised to reduce physical exertion and do exercises to strengthen the back muscles.

In assessing the results of treatment were analyzed the dynamics of reducing the severity of pain (at Antonov IL): I degree - a slight, disappearing at relaxation; Degree II - pain that continuous at rest, increases with the movement, but for small amount; Degree III - constant pain, periodically increasing; Grade IV - a sharp, constant pain, forced position of the patient, causing an urgent need for the use of analgesics.

Results. Patients of the main group at the beginning of the treatment on the degree of severity of pain treated III- 21 (65.6%) and IV - 11 (34.4%). In the control group at the beginning of the treatment on the degree of pain the patients were divided as follows: II degree - 3 patients (12.5%), grade III - 13 (54.1%), grade IV - 8 (33.3%) patients. After a course of treatment, all patients were under observation noted improvement in general condition, decrease or disappearance of pain in the cervical region and in the back. On palpation of trigger points in patients of the main group the pain are not marked, and in the control group, 6 patients (5%) reported minor pain (I degree). In the study group patients reported a decrease in pain over $2,5 \pm 0,7$ weeks of starting treatment, and by the end of therapy the pain regressed

completely. Bad effects from the ongoing procedures were not observed.

Conclusions. Carrying out the treatment method of radial shock-wave therapy for patients with myofascial syndrome is justified, as it promotes a more rapid and persistent reduction of pain symptoms

COMORBID ANXIETY AND DEPRESSIVE DISORDERS AT PATIENTS WITH ISCHEMIC HEART DISEASE WITH RHYTHM DISTURBANCES

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Actuality. Learning disorders psycho-emotional sphere is of great practical importance, since the presence and severity of anxiety and depressive disorders can be seen on coronary artery disease complicated by arrhythmias, predict prognosis.

The purpose. The main purpose of our study is to assess the level of severity of anxiety and depression in patients with stable angina without cardiac arrhythmias and complicated ventricular arrhythmia or persistent atrial fibrillation.

Materials and methods. The study included 62 men aged from 48 to 67 years (middle age $57,6 \pm 10,5$ years) with a diagnosis of stable angina II-III FC. All of the patients, depending on the absence or presence of PVCs class II by Lown or persistent AF, were divided into three groups. A certain level of mental and emotional status was carried out with the help of Hospital Anxiety and Depression Scale - HADS (AS Zigmond)

Results. By analyzing the psycho-emotional state of patients based on the interpretation of the results on a scale of HADS, it was found that the presence of arrhythmias associated with various forms of clinically severe and subclinical anxiety and depressive symptoms. The manifestations of anxiety symptoms were found in 14 patients of the 1st group (63.6%), 15 patients in group 2 (71.4%) and 17 patients (89.4%) Group 3. Depressive disorders were more frequent in groups with PVCs class II by Lown or persistent AF: 17 patients (80.9%) in group 2, and 17 (88.4%), Group 3 ($p < 0.01$) while the same were identified in 15 patients in the first group, which accounted for 68.1%. The absence of anxiety and / or depressive states was observed in 4 patients of the 1st group (18.1%), 2 patients (9.5%) in the 2 nd and 1 patient (5.2%) in the third group, that is, to a less extent in patients with persistent AF.

Thus, 23.3% of patients with the presence of PVCs class II by Lown and 28.4% of patients with persistent AF is amplified level of clinical anxiety by 8.3%, depressed by 9.7% compared with patients non-cardiac arrhythmias, which is consistent with the opinion of other authors, points to the fact that the presence of anxiety and depression is an unfavorable prognostic factor in terms of CHD patients. In the present study indicated that patients with stable angina II-III FC at 67.6% of the patients there are anxious and depressive disorders 78.4%, and a significant contribution to making available the clinical symptoms of AF, resulting in the disruption of mental activity, characterized neurotic behaviors, high internal stress, which in turn leads to a decrease in quality of patients' life.

Conclusions. In patients with stable angina II-III FC clinically significant anxiety symptoms diagnosed in 29.8%, from 46.5% of depressive patients. The level of anxiety and depression is more pronounced in patients with cardiac arrhythmias, with subclinical levels of anxiety and depression prevailed in the presence of patients with stable angina ventricular arrhythmia Lown class II, while clinical data level of affective disorders prevailed in the permanent form of atrial fibrillation.

EFFECT OF BETA BLOCKERS ON LATE REMODELING PROCESS OF MYOCARDIUM IN PATIENTS WITH POSTINFARCTION CARDIOSCLEROSIS

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The aim of this study was to examine the effect of carvedilol on the structural and geometric parameters of left ventricular myocardium in patients with postinfarction cardiosclerosis (PICS) and chronic heart failure (CHF), FC II-III.

Material and the methods of exploration. We have tested 44 men aged 40 to 68 years with CHF FC I-III of NYNA. Patients were divided into 2 groups: the first group consisted of 21 patients who received atenolol during 6 months; Group 2 - 23 patients who had taken carvedilol on the background of the basic treatment. Geometrical, structural and hemodynamic characteristics of the LV myocardium were evaluated according to echocardiography.

The results of the study. In the first study group, the indexes of EF in patients with CHF FC II and III accounted for $45,4 \pm 1,58$ and $35,73 \pm 2,24\%$ respectively, and $49, \pm 1,79$ and $39,82 \pm 2,52\%$ after 6 months of treatment. In the second group, the indexes of EF in patients with CHF FC II and III accounted for $45,7 \pm 0,949$ and $36,31 \pm 0,1,65\%$ respectively, and $53,2 \pm 1,48$ and $45,69 \pm 1,49\%$ after 6 months of treatment, that indicate a reliable increase of EF in the first and second group in long-term treatment of CHF ($p \leq 0,02$ and $p \leq 0,001$ respectively).

Conclusion. Thus, a long-term treatment of CHF with carvedilol, according to echocardiography information, is accompanied by a reliable decrease in the size and volume of the LV and LA, myocardial stress on the wall of the left ventricle, the normalization of blood pressure, the decrease of heart rate and the increase of the contractile force of the myocardium of LV (left ventricle).

PSYCHO-EMOTIONAL DISORDERS IN PATIENTS WITH TYPE 2 DIABETES

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Objective. To study the emotional state of patients with diabetes mellitus (DM) type 2, depending on the compensation, the duration and age.

Materials and methods. We have examined 20 patients with type 2 diabetes who were hospitalized in the department of Endocrinology 3rd Clinic of TMA. The average age of patients was $55,6 \pm 2,2$ years, with disease duration $3,5 \pm 0,5$ years, among them 11 women and 9 men. All patients had a questionnaire for the detection of mental and emotional disorders using the diagnostic questionnaire of Beck. According to Beck questionnaire from 0 to 9 points is assessed as not depressed, 10 to 15 is considered mild severity, 16-19 moderate depression, 20-29 moderate and 30-63 severe depression severity. Also, all patients examined fasting blood sugar, after a meal, and glycated hemoglobin.

Results. In patients surveyed in terms of carbohydrate metabolism fasting blood sugar revealed $8,3 \pm 0,5$ mmol/l after a meal $11,7 \pm 0,7$ mmol/l, and glycated hemoglo-

bin was $7.7 \pm 0.6\%$. As a result of the average score on Beck's scale in men was 20.3 ± 1.6 , in women 17.2 ± 1.0 . After determining the parameters of carbohydrate metabolism patients were divided into two groups. The first group included 6 patients with glycated hemoglobin $6,7 \pm 0.2\%$, corresponding as compensation. In the second group of 14 patients in which glycated hemoglobin average was $8.5 \pm 1.3\%$ corresponding like decompensation. According to the results of the Beck's questionnaire of the first group of patients was 16.4 ± 0.9 points in patients tripled group 18.2 ± 1.2 points. Also, the patients were divided according to age groups of 11 patients up to 50 years old and 9 patients older than 50 years old. Patients up to 50 years old, the average score on the Beck's scale 18.5 ± 1.6 , in patients older than 50 years old of 16.7 ± 1.5

Conclusions. Psycho-emotional violation more pronounced in men than women with the disease type 2 diabete, respect of glycated hemoglobin results of the study showed that the higher the glycated hemoglobin, the severe symptoms of psycho-emotional disorders. The younger age of the patients have more severe symptoms of depression then older patients.

COMPLICATIONS OF THE CORONARY AND CEREBRAL VESSELS IN PATIENTS WITH CAROTID ARTERY DISEASE

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Currently, the predominant pathology of atherosclerosis is considered a favorite in the localization of the coronary, cerebral and brachiocephalic vessels. The defeat of the arteries prognostically unfavorable, since it leads to complications such as myocardial infarction, cerebrovascular accident. Duplex ultrasound is an excellent method for assessing the severity of the carotid arteries (CA).

Objective: to study the relationship status of the CA with complications from coronary and cerebral vessels (myocardial infarction, cerebrovascular accident).

Material and methods. The study was performed in 72 patients, 43 men and 29 women aged 46-78 years. In addition to the general-clinical examination was carried duplex scanning SA. Exclusion criteria were acute vascular accident, diffuse connective tissue disease.

Results. As a result, the following changes have been identified: tortuosity of the ICA in 22 patients, stenosis at 50. Of these, 28 minor and 22 major. Internal CA (ICA) process was involved in 46 patients, bifurcation, 16, outside the CA at 10. In 51 patients the changes were bilateral, in 21 one-way. 19 left and 12 right. The ECG in 34 patients (47%) revealed scarring, mostly in patients with stenosis. In the history of patients with vascular tortuosity CA disaster occurred in 32% of patients, with a slight stenosis of 46% and a significant 93%, mostly in the form of cerebrovascular accident.

Conclusion. Thus, in the study were predominated the males of advanced age. In 70% of atherosclerosis was found mainly significant stenosis of the ICA with bilateral localization. Complications were almost all patients with significant stenosis and tortuosity of at least SA. Atherosclerosis tends to make the progression of heart disease and central nervous system and major causes of death in these patients. The ultrasonic method is ambulatory, widely accessible, informative and safety study.

Remodeling CA may serve as an indicator of the severity of the other vessels.

THE ROLE OF CONGENITAL ANOMALIES OF CEREBRAL VESSELS IN THE DEVELOPMENT OF CEPHALGIC SYNDROME

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Objective. To research the role of congenital anomalies of cerebral vessels in the development of cephalgic syndrome.

Methods. To analyze results of clinic-neurological, instrumental (CT angiography or MRI angiography and duplex scanning) research of 30 patients with pathological deformities of brachiocephalic vessels.

Results. The study included 30 patients with different strains of cerebral vessels, aged 17-45 years (mean age $22,3 \pm 2,5$ years), and shows that the type of vascular deformations kinking and coiling have a more incidence in women-53%, compared with in men-47%, whereas, significantly more in the internal carotid artery, 72.3%, than in the vertebral arteries-28.7%. It was also revealed hypoplasia of the vertebral artery, and its prevalence in 25.5% of cases, and in 13.5% of patients hypoplasia of the posterior communicating artery, which indicate the genetic etiology of pathological tortuosity. Pathological tortuosity was presented in the form of a C-shaped in 12% patients, S-shaped and loop-shaped in 14%, 8% cases. Most often diagnosed pathological tortuosity of the right internal carotid artery (42.3%) than the left (25.1%), in 32.6% cases was found bilateral tortuosity. These deformations manifested cephalgic syndrome that began in childhood, at 5-6 ages, therefore, was not associated with any use of foods rich in tyramine or a menstruation, and was not held at menopause. In patients, with frequency of cephalgic syndrome seizure 3-4 times a week, developed clinical presentation of vascular encephalopathy.

Conclusions: congenital deformities of the brain vessels can cause not only cephalgic syndrome, but the cause of varying severity of neurological deficits, depending on for effective vascular pool.

PSYCHOSOMATIC DISORDERS AT HEART FAILURE AND WAYS FOR THEIR CORRECTION

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The purpose of the research lies in studying of psychosomatic disorders at heart failure and to find the ways for their correction.

Tasks of the research: 1. To find and assess psychosomatic disorders at patients with cardiovascular pathology, complicated by heart failure. 2. To establish the influence of correction of psychosomatic disorders on the flow of somatic disease.

Research materials and methods. The object of the research included patients with cardiovascular pathology, complicated by heart failure, being watched at cardiological division. 44 patients were observed in stable health at age from 40 to 70 years, average age is $57,6 \pm 7,7$, from them 15 women and 29 men (66%), with heart failure II A, B III stages and FK 2, 3 (by NYHA). At use of correction all patients were divided to two groups: first one consisted from patients, which received sertraline with base therapy; the second group received only base therapy. Research methods: at research

general clinical methods of diagnostics were used: objective examination, neurology status, psychological status. Also the obligatory laboratory instrumental researches (general analysis of blood and urine, biochemical research of blood, instrumental methods of research like Electrocardiogram, chest x-ray, echocardiogram, echoencephalogram, Kholter monitoring of cardiac blood pressure for verification of heart failure diagnosis). The psychological state was studied with the use of psychometric test: hospital anxiety and depression scale (HADS). The observation was implemented on coming day, on day 10 and day 28 of the treatment.

Results. On the basis of psychological state of patients with heart failure, they are divided in the following way: 12 (27%) patients have sub clinically expressed anxiety, but depression activity is in normal limits. 14 (32%) patients have sub clinically expressed anxiety-depressive disorders (ADD). 18 (41%) patients have clinically expressed ADD. On day 10 and 28 of the treatment in group one the general condition of ADD changed to improvement of general condition of the patient, as a result it showed the following: 14 patients did not show any reliably expressed symptoms of anxiety or depression, 6 patients had sub clinically expressed anxiety state with absence of depression signs and 2 patients had sub clinically expressed ADD. In group two (patients received only base therapy) in the end (on day 28): 6 patients did not show any expressed signs of anxiety and depression, 10 patients had sub clinically expressed signs of anxiety without depression signs, and 4 patients had sub clinically expressed signs of ADD, 2 patients had clinically expressed signs of ADD. At observation of the general state of all patients in group one, objective and clinical data showed dynamics with improvement; in group two clinical data showed relative improvement as a result of constant base therapy, objective data in dynamics do not show any improvement.

Conclusion. Thus, ADD development risk at patients with cardiovascular pathology, complicated by heart failure, is quite high. At the same time, at this group of patients antidepressant drug of the selective serotonin reuptake inhibitor (SSRI) type can be considered as most effective method for correction on psychosomatic disorders. Because as a result of Sertraline use at treatment of psychosomatic disorders at heart failure, it also influences on the flow of the main disease, that brings to stabilization of somatic status of the patient, and as a result it improves patient wellbeing.

MENSTRUAL DISORDERS IN PRIMARY FEMALE INFERTILITY

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Background. The problem of infertility remains relevant in a region with a high birth rate, despite the high rate of population growth, there is a proportion of infertile couples for whom psychological and moral dissatisfaction due to infertility is more important in this particular environment.

Objective. Menstrual disorders are a common cause of infertility, we have studied these disorders in primary infertile women.

Patients and Methods. The study included 89 women in the clinic that deals with reproduction problems, aged 20 to 43 years (mean age was $26,8 \pm 0,55$ years), duration of infertility at the time of the observation was 4.5 ± 0.3 years. Examination of the following hormones was performed to all women: follicle-stimulating hormone (FSH),

luteinizing hormone (LH), prolactin, estradiol, testosterone; also was performed ultrasonic examination of the pelvic organs.

Results and Discussion. Depending on the character of the menstrual disorders, surveyed were divided into 3 groups: I group - amenorrhea (n = 5), II group - oligomenorrhea (n = 73) and III group - dysmenorrhea (n = 11). In the group with amenorrhea was observed the lowest levels of estradiol ($67.4 \pm 5,4$ pg/ml) and high numbers of LH (26.5 ± 5.2 MEg/L), FSH (33.5 ± 20.7 UI/L), and testosterone (1.6 ± 0.7 ng/ml) compared to the group with oligomenorrhea and dysmenorrhea. In the group with oligomenorrhea there were high numbers of prolactin (44.7 ± 14.2 ng/nml) and LH (11.2 ± 0.7 MEg/L). Study of the main reasons leading to disturbance of the menstrual cycle revealed that in the group with amenorrhea the main cause is hypergonadotropic hypogonadism, polycystic ovary syndrome. In the group with oligomenorrhea - polycystic ovary syndrome, hyperprolactinemic hypogonadism, and in the group with dysmenorrhea - chronic inflammatory diseases, polycystic ovary syndrome.

Conclusions. The most common menstrual disorders in primary female infertility manifest as oligomenorrhea, in all disturbances of menstrual function one of the reasons was the presence of polycystic ovary syndrome.

CARDIORENAL RELATIONSHIP IN PATIENTS WITH CHRONIC HEART FAILURE

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Aim and tasks. Chronic kidney disease (CKD) is formed in majority of patients with chronic heart failure (CHF), which develops in response to decreasing in myocardial contractility and increasing violation of systemic hemodynamics. Impaired renal function in patients with CHF significantly worsens its forecast, contributes to the progression of the disease, increases the frequency of hospitalization and the risk of mortality. The aim of our study was to examine changes in renal function and renal hemodynamics, their relationship with the severity of clinical symptoms in patients with CHF.

Material and methods. There were examined totally 20 patients (11 men and 9 women) with clinical manifestation of heart failure, which were hospitalized in the departments of cardiology and cardiorehabilitation of 3-clinics TMA, aged from 51 to 83 years old, the average age was $66,8 \pm 9,8$ years. We were excluded from the study patients with acute heart failure, acute myocardial infarction, unstable angina, idiopathic cardiomyopathy, pericarditis, rheumatic heart disease, myocarditis. All patients were examined conventional methods of research (clinical and biochemical blood tests, urinalysis, electrocardiogram, echocardiography, duplex scanning of the renal arteries). Diagnosis and assessment of heart failure was performed according to national guidelines RSSC and SHF for diagnosis and treatment of chronic heart failure (2012). CKD diagnosed according to the K/DOQI (2002). Echocardiography was performed in B- and M-mode with sensor of 2,5-3,5 MHz, measurements were carried out according to the recommendations of the American Society of echocardiography. Renal hemodynamics were evaluated using DSRA with sensor of 2,5-5,0 MHz with polypositional position of the patient. Statistical analysis was performed using Statistica for Windows program and significance of differences between the parameters were determined by Student's t test.

Results. In the study in patients with chronic heart failure in 15% was found $GFR > 90 \text{ mL/min/1,73 m}^2$, in 50% - $60-89 \text{ ml/min/1,73 m}^2$, in 20% - $45-59 \text{ ml/min/1,73 m}^2$, in 10% - $30-44 \text{ ml/min/1,73 m}^2$ and in 5% was determined - $15-29 \text{ mL/min/1.73 m}^2$. Thus, CKD with $GFR < 60 \text{ mL/min/1.73 m}^2$ was observed in 35% of patients with CHF. Analysis of age characteristics of the prevalence of CKD among patients with CHF showed a growth rate of GFR decline with increasing age of the patients, as well as with an increase in CHF FC. Linear (Vps, Ved) and volumetric blood flow velocity (COkgen, Clkgen, COkbas, Clkbas) in most patients with heart failure were lower and pulsating (PI) and resistive index (RI) - higher than in normal subjects ($p < 0,001$). Linear flow velocity indices of peripheral resistance and renal parameters renal blood flow volume correlated with indices of contractile function of the heart and the manifestations of renal dysfunction. Average CHF FC was $2,2 \pm 0,8$ in patients with normal kidney GFR, when associated with CKD the figure was higher ($2,6 \pm 0,7$ $p < 0,001$). Multivariate regression analysis showed independent connection of hemoglobin concentration and GFR ($p < 0,01$). Echocardiographic parameters such as end-diastolic dimension (EDD) was $51,43 \pm 6,4 \text{ mm}$ and end-systolic dimension (ESD) $35,6 \pm 4,5 \text{ mm}$ ($r < 0,1$) in patients with CHF, whereas when associated CKD these figures were $52,1 \pm 8,0 \text{ mm}$, $38,0 \pm 7,0 \text{ mm}$ ($r < 0,06$), respectively. In assessing the structural heart disease found that patients with heart failure with and without CKD did not differ in the value of left ventricular ejection fraction.

Conclusion. The course of chronic heart failure associated with chronic kidney disease, is characterized by more severe clinical manifestations and course of the disease.

EVALUATION BASED ON QUESTIONNAIRES ANTICONVULSANTS AT DIABETIC POLYNEUROPATHY

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Purpose and objectives of study: evaluation of the effectiveness of anticonvulsants on the basis of questionnaires in diabetic polyneuropathy.

Materials and methods. The study involved 40 patients with type 2 diabetes in the endocrinology department of clinic №3 TMA. The average age of patients examined was 56.74 ± 1.39 years, duration of diabetes 0.83 ± 7.56 years. Pain symptoms assessed the scale of the NSS (Neuropathy Symptom Score) and NDS (Neuropathy Disability Score). All patients received alpha-lipoic (thioctic) acid and vitamins of group B. Patients were divided into 2 groups. The control group consisted of 20 patients (50%), the main group consisted of 20 patients (50%), in which the pain is not reduced, and therefore, in addition to the complex therapy was scheduled pregabalin at a dose of 75-150 mg or gabapentin 300-600mg per day. Studies were conducted before treatment and at 3 months after treatment.

The results of research. In all patients according fasting and postprandial blood glucose and glycated hemoglobin diagnosed decompensation of diabetes ($10.33 \pm 0,48$; $13.43 \pm 0,58$ and $10.11 \pm 0.35\%$). Using hypoglycemic therapy all index carbohydrate metabolism decreased 40.6%, 36.17% and 19.55%, respectively. In main group, to treat the symptoms of neuropathy on the basis of questionnaires NSS and NDS was detected values of 9.43 ± 0.18 and $18.31 \pm 0,45$, after treatment with 5 ± 0.2 and $12.33 \pm 0,23$,

respectively. In the control group of symptomatic neuropathy based NSS and NDS before and after treatment was 9.52 ± 0.17 ; 18.63 ± 0.17 and 8.93 ± 0.18 ; 12.73 ± 0.18 respectively. Indicators NSS evaluating pain symptoms decreased in group 1 by 47.9%, while in group 2 at 6.2%.

Conclusions: 1. We observed patients with type 2 diabetes for more than 5 years, based on questionnaires of the NSS and NDS, all the patients were found to have diabetic polyneuropathy. 2. Indicators of the NSS evaluating pain symptoms decreased in group 1 by 47.9%, while in group 2 at 6.2%.

THE IMPORTANCE OF MULTISLICE COMPUTED TOMOGRAPHIC ANGIOGRAPHY IN THE DIAGNOSIS OF INTRACRANIAL CIRCULATION IN PATIENTS WITH THE STENOTIC LESION OF MAIN HEAD ARTERIES

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Objective. To evaluate the effectiveness MSCTA studies in assessment of intracranial circulation in patients with stenotic lesions of main head arteries.

Material and methods. The study involved 140 patients with varying degrees of chronic cerebrovascular disease and 30 healthy volunteers for the period from January 2013 to November 2015, who underwent MSCT angiography of extra- and intracranial cerebral vessels in the diagnostic center "Kuksaroy" with use of machine "General Electrics 64" USA. Out of 140 patients, 98 (70%) were men, women - 42 (30%). The average age of patients was $58, 2 \pm 3, 1$ years. Out of the 30 healthy patients 25 (50%) were men, 25 (50%) - women, average age was 52, male $2 \pm 4, 3$ years.

Results. During the examination in all cases, high-quality images of extra- and intracranial cerebral arteries were received. 13 patients with I - degree of chronic cerebrovascular insufficiency with use of MSCTA had the following changes: 5 patients had "C" - shaped abnormal deformation of the internal carotid artery (ICA); stenosis of ICA was observed in 6 patients; 2 patients had «S» shaped pathological deformation (kinking) of the ICA and right vertebral artery (VA). Combined and stenotic intracranial vascular lesions have not been identified 23 patients with II - degree of chronic cerebrovascular insufficiency with use of MSCTA showed following changes: 11 patients had stenosis and kinking of ICA; 7 patients had hypoplasia and deformation of the left vertebral artery, and in 5 patients posterior communicating artery was absent (SAR) on both sides. In 45 patients with III - degree of chronic cerebrovascular insufficiency with use of MSCTA, the following changes were identified: 21 patients had stenosis and kinking of ICA, 4 patients had coiling of ICA, 12 patients had pathological deformation and stenosis of VA, more was on the left, 8 patients had occlusion and hypoplasia of intracranial parts of VA. In all cases, 33 patients lacked either the right or the left posterior communicating artery. Various degrees of stenotic lesions of extracranial cerebral artery were revealed in 59 patients with IV-degree of chronic cerebrovascular insufficiency. With the use of MSCTA, the following pathologies of intracranial vessels were identified in these patients: 34 patients had stenosis of the middle cerebral artery (MCA), 8 patients had stenosis of basilar artery, hypoplasia was seen

in 11 patients and 2 patients had aplasia of extra - and intracranial parts of VA, 4 patients had occlusion of the posterior cerebral artery. Thus, MSCTA allowed to reveal in patients with chronic cerebrovascular insufficiency, various types of anomalies of vessels structure with pathological kinking - 73.8%, aplasia or hypoplasia of intracranial vessels - 20.6%, Willis open circle - 71.9%, stenotic lesions of the carotid vessels - 76.6% or vertebral vessels - 25.2%.

Conclusion. MSCTA is a modern highly sensitive diagnostic study of brain and neck vessels, that allows you to diagnose abnormalities of the vessels structure and stenosing lesions even on asymptomatic stage of chronic cerebrovascular insufficiency; Early diagnosis of vascular lesions of the brain allows you to get a full picture of the state of cerebral hemodynamics and to conduct the intervention, eliminating abnormal vascular tortuosity and hemodynamically significant shortage of blood.

A VALUE OF PULSE THERAPY IN THE TREATMENT OF RELAPSING POLYCHONDROITIS

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Introduction. Relapsing polychondritis (RP) - is a rare systemic disease with undulating course, presumably autoimmune origin characterized by recurring exacerbations of inflammation in the cartilage tissue, leading to their destruction. Clinical manifestations of RP are divided according to location, severity and duration. In the pathological process may involve all types of cartilage and other structures, rich proteoglycans: eyes, internal ear and vessels. So far, a unified approach to the treatment of RP in terms of evidence-based medicine does not exist. Due to the rarity of the disease clinical studies for comparative evaluation of different drugs have been conducted. For relief of attacks polychondritis most commonly used nonsteroidal anti-inflammatory drugs (NSAIDs) and glucocorticoid therapy (corticosteroids), but there is no evidence of their impact on the progression of the process and to prevent relapse.

Purpose is to study the efficiency of pulse therapy in patients with RP.

Materials and methods. 3 patients with RP were hospitalized in the clinic of I cardiorheumatological department of Tashkent Medical Academy (TMA). The diagnosis was made on the basis of diagnostic criteria developed by Macadam. All patients underwent clinical, immunological, biochemical studies, chest X-ray, ECG.

Results of research. Patients were performed following treatment, Prednisolone 30 mg/day per os, NSAIDs and combination pulse therapy course (1st and 3rd - days solumedrol 1.0 g intravenously, the second day solumedrol 1.0 g in combination with cyclophosphamide 800 mg). The therapy was showed improvement of general condition of patients, decreased pain in the cartilage of nose and swelling of ears, back pain, general weakness. Patients were discharged under the supervision of district therapist and rheumatologist with recommendations to continue receiving NSAIDs, corticosteroids and program of the pulse therapy for 6 months.

Conclusion. Thus, the use in the treatment of RP pulse therapy had a positive effect on the clinical condition of patients and prevent progression of disease.

THE EFFICACY OF LEFLUNOMIDE IN PATIENTS PSORIATIC ARTHRITIS

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Actuality of theme. Psoriatic arthritis is a type of inflammatory arthritis that will develop in up to 30 percent of people who have the chronic skin condition psoriasis. Psoriatic arthritis tends to appear about 10 years after the first signs of psoriasis. For the majority of people this is between the ages of 30 and 55, but the disease can also affect children.

The purpose of the work. To evaluate the efficacy and tolerability of Leflunomide in patients with active form of PsA.

Material and methods. The study was performed in 24 patients with PsA (15 men and 9 women) aged from 32 to 60 years (mean age $46,5 \pm 5.6$ years) with disease duration from 6 months to 10 years. Of the 24 patients had II degree of disease activity (n=14, or 58,33%) and III (n=10, or 41,67%) extent of disease activity. All patients were assigned to Leflunomide (LF) in a dose of 100 mg/day for 3 days and 20 mg/day for 6 months, In 4 (16,67%) patients the duration of PsA at the time of appointment LF was less than 3 years, in 15 (62,5%) – from 3 to 10 years, in 5 (20,83%) – 10 years and more. The majority of patients (n=20, or 83,33%) before inclusion in the study received 1 or more disease-modifying drugs (DMD) - methotrexate, sulfasalazine, 4 patients underwent glucocorticosteroids (GCS) therapy (mainly in the form of intraarticular injections). All patients before participation in the study were prescribed various anti-inflammatory NSAIDs at standard dosages. The drug was administered according to the standard scheme: the first 3 days to 100 mg/day, then 20 mg/day. Dose was temporarily reduced in some patients up to 10 mg/day when intolerance reactions. The main parameter of treatment efficacy in this study was PsARC extension (Psoriatic Arthritis Response Criteria.)

Results. By the end of treatment "responders" in accordance with the PsARC extension, steel 18 of 24 patients (75%). All 24 patients included in the study, LF participated at least 1 month, 20 (83,33%) patients completed the 6-month course of treatment in accordance with the study Protocol. Terminated participation in the study 4 (16,67%) patients because of adverse events. There was no effect on LF ESR ($p=0,367$).

Conclusion. Thus, the use of LF in patients with PsA for 3 months significantly reduces the number of painful joints and number of inflamed joints. Portability LF rated as satisfactory. The use of LF in a daily dose of 100 mg in the first 3 days with subsequent transition to 20 mg 1 time per day reliably characterized by high efficiency and a satisfactory tolerability in patients with PA. The high efficiency LF criteria PsARC extension that can be recommended for patients with PsA.

VASCULAR REACTIVITY ABNORMALITIES IN CADASIL SYNDROME

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Background and purpose: CADASIL (cerebral autosomal dominant arteriopathy with subcortical infarcts and leukoencephalopathy) is a rare genetic disease caused by NOTCH3 gene mutations. A dysfunction in vasoreactivity has been pro-

posed as an early event in the pathogenesis of the disease. The aim of this study was to verify whether endothelium dependent and/or independent function is altered in CADASIL patients with respect to controls.

Methods: vasoreactivity was studied by a non-invasive pletismographic method in 49 mildly disabled CADASIL patients (30e65 years, 58% male, Rankin scale #2) and 25 controls. Endothelium dependent vasodilatation was assessed by reactive hyperaemia (flow mediated dilationeperipheral arterial tone (FMD-PAT)) and endothelium independent vasoreactivity by glyceryl trinitrate (GTN) administration (GTN-PAT).

Results: patients and controls showed comparable age, gender and cardiovascular risk factor distribution. GTN-PAT values were significantly lower in CADASIL patients (1.54 (1.01 to 2.25)) than in controls (1.89 (1.61 to 2.59); p=0.041). FMD-PAT scores did not differ between patients and controls (1.88 (1.57 to 2.43) vs 2.08 (1.81 to 2.58); p=0.126) but 17 CADASIL patients (35%) had FMDPAT scores below the fifth percentile of controls. FMD-PAT and GTN-PAT values correlated both in controls) and CADASIL patients). By multivariable logistic regression for clinical and laboratory variables, only GTN-PAT was independently associated with FMD-PAT below the fifth percentile in CADASIL patients.

Conclusions. The impaired vasoreactivity observed in CADASIL patients highlights the fact that both endothelial and smooth muscle functional alterations may already be present in mildly disabled subjects. The improvement in vascular function could be a new target for pharmacological trials in CADASIL patients.

CLINICAL AND NEUROIMAGING PARALLELS IN PATIENTS WITH VASCULAR DEMENTIA

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Objective. To identify clinical and neuro-imaging parallels in patients with vascular dementia.

Methods. The study involved 24 patients with vascular dementia, including 18 men and 6 women. Average age of patients was 55,1 years old. It was conducted MRI examination to patients with the use of modes T1-WI ,T2-WI and T2-FLAIR in sagittal, transversal and coronal projections and MR angiography of brain vessels on MRI scanner Philips & Neurosoft Medical Systems-Superstar capacity of 0.35 Tesla. Evaluation of cognitive functions was performed using MOCA and MMSE test.

Results. According to results of MOCA test 4 patients had mild cognitive impairment (MMSE average score for these patients was 27.5), 20 had moderate degree of cognitive impairment (MMSE average score for these patients was 22.9).

In patients with mild cognitive impairment in a series of MRI images were revealing multiple small plots 1-3 mm size with indistinct profiles, hyperintensive on T2-WI and T2 FLAIR signal characteristics located periventricular (in 50% of patients, with 24 points in MOCA and 29 points in MMSE tests) and periventricular and subcortical (in 50% of patients,with performance of MOCA and MMSE tests in average on 23 and 26 points respectively) .The sizes of ventricular system: the lateral ventricles, are not increased, the size of the 3rd ventricle is on average 6.5 mm, the 4rd ventricle and Silvio aqueduct are without changes. Subarachnoid space is diffuse enlarged (in 50% of

patients) with expansion in the frontoparietal region (50% of patients).

In the group of patients with moderate cognitive impairments in a series of MRI images were revealing multiple small plots of 1-3 mm size with indistinct profile, hyperintensive on T2-WI and T2 FLAIR signal characteristics located subcortical and periventricular in 100% of patients, and further in the thalamus in 10% of patients were found cystic areas glial nature, figures of MOCA and MMSE test in these patients were in the lowest. 20% of patients were revealed lacunar infarctions. 60% of patients were noted enlargement of the lateral ventricles, size of the 3rd ventricle is 6.0 mm on average, the 4th ventricle and Silvio aqueduct were not changed. The subarachnoid space expansion was in the fronto-parietal areas in 10% of patients, in the fronto-parietal-temporal areas with depletion of peripheral blood flow- in 30%, in the fronto-parietal-temporal areas and postcranial fossa -10%, in the parietal region-20%, in the fronto-temporal areas-10%, and without extension in 20% of patients.

Conclusion: 1.The presence of not only periventricular, but also subcortical leukoariosis with areas of encephalomalacia in the thalamus (strategic zone) leads to a more emphasized degree of cognitive impairments. 2. Increased size of the lateral brain ventricles in patients with chronic ischemia is an indicator that reflects the severity of atrophic processes in the brain with development of the internal gidrotsefals. 3. The sizes of the 3rd, 4th ventricles and Silvio aqueduct does not reflect the degree of cognitive impairment. 4. According to MOCA and the MMSE scale decline of cognitive function in patients with vascular dementia correlates with the presence of brain atrophy in the fronto-temporo-parietal lobes of the brain, with expansion of the subarachnoid space and depletion of peripheral blood flow in the cerebral vessels.

COMPARATIVE CHARACTERISTICS OF COGNITIVE ASSESSMENT SCALES

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Objective. To analyze the sensitivity of MOCA, MMSE and Battery frontal dysfunction tests in patients with DE 3 and DE 2 and develop the most optimal clinically adapted way for assessing of cognitive functions.

Research methods. Analysis covered 20 patients with cognitive impairments who were treated in the time from November 2014 to March 2015 in the 1th clinic of the Tashkent Medical Academy. While 10 patients from the 1st group had the established diagnosis of discirculatory encephalopathy of the 3rd degree (DE 3), the other 10 patients from the second group were diagnosed with discirculatory encephalopathy of the 2nd degree (DE 2). 10 patients in the control group had no subjective or objective signs of cognitive impairments. Patients were made CT/ MRI studies and assessment of neurological status to validate the diagnosis and then they were examined by MOCA, MMSE, Battery of Frontal Dysfunction tests and adopted Rating Scale.

Results. According to results of MOCA test patients from the 1st group had the following scores in MOCA test: 40% of patients had mild, 50% moderate and 10% severe cognitive impairments. Following to results of MMSE test 10% of patients had no cognitive impairments, the same part had moderate and 70% of patients had mild impairments. Comparative characteristics of MOCA and MMSE tests in patients from the 2nd group shows that vast majority of patients approximately 80% had mild and 20% of

patients had moderate cognitive impairments according to MOCA test,MMSE test revealed that 60 % of patients had no any cognitive impairments,40 % had one only of mild stage.The Battery of frontal disfunction test shows that mild impairments had 10% patients with DE 3 and 80 % with DE 2.Moderate disturbance had 60% of patients from the 1st group and 20 %from the 2nd.30 % of patients with DE 3 had expressed disturbance.

Anlyse of Moca test indicated that the most difficult and demonstrative tasks were chain,drawing of cube and clock, memorizing of 5 words and fluency of speech.These tasks were done with the lowest scores. As a result we built a convenient in practice rating scale with the following tasks:drawing of cube and clock with time,memorising of 5 words and naming of words which begin from the same letter,for example, with the letter B.Following to the results of this rating scale control group had 7,9 average score from maximum 10 points.Patients with DE 3 had 4,8 and patients with DE 2 had 2,6.

Conclusion. 1.MOCA ,MMSE and Battery frontal dysfunction tests confirm morpho- structural changes detected by CT/MRI studies. 2.MOCA test is more sensitive in determining the degree of cognitive impairment and that`s why is necessary for depth professional studying of patients aged over 50 years. MMSE and Battery frontal dysfunction tests are recommended for screening investigations.3.The most effective method for rapid detection of cognitive impairments is performing the following tasks: drawing of cube and clock, memorizing of 5 words and examining of speech fluency. Patients receiving 7-10 score have not any cognitive impairments.The score from 4 to 7 says about mild cognitive impairments.The score less of 5 indicates severe cognitive impairments.

PHARMACOLOGICAL MONITORING OF YOUNG ATHLETES ON THE STAGES OF ANNUAL TRAINING CYCLE

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Purpose of research: to analyze the drugs which are using by young athletes during pharmacological monitoring on the stages of annual cycle.

Materials and methods. Under research were 290 children and adolescents involved in various sports in children's sports schools of Tashkent, aged from 10 to 15 years. There were 200 boys (69%), girls - 90 (21%). Sports experience was on average $3,5 \pm 1,35$ years. Sportsmen were representatives of the following sports: athletics, weightlifting, rhythmic and artistic gymnastics, swimming, cycling, kurash, judo, boxing, taekwondo, tennis, game types (football, rugby, handball, field hockey, volleyball, water polo). The following indicators were studied: sports history of young athletes, the incidence of illness during the annual cycle, as well as pharmacological monitoring according to ambulatory cards and a specially designed questionnaire. The proposed questionnaire includes 18 questions about the sports activities of students, participation in competitions, their results, the nature of food, sleep, disorders for the past 3 years, about the use of the drug, causes and time of appointment (during exercise or before competitions), whom were assigned drugs.

Results. According to ambulatory cards, 40 athletes were at the dispensary with the pathology of upper respiratory tract (chronic tonsillitis - 32, deviated septum - 12, chronic mezotimpanitis - 3, post-traumatic otitis - 4), 26 - with endocrine disorders (diffuse goiter I degree,euthyroidism - 18, obesity - 3, nanism - 5, diffuse goiter with

an autoimmune component - 3), vascular dystonia - 26, post-traumatic encephalopathy - 4, logoneurosis- 1, visually impaired - 29 (hyperomethropia-2, spasm of accommodation - 7, mild myopia - 18, amblyopia-1, astigmatism -1), disorders of the reproductive system - 5 patients (delayed sexual development, hypoplasia of the uterus - 2, algomenorrhea - 3 girls). Pharmacological monitoring showed that the most commonly used vitamin supplements (B vitamins, ascorbic acid, multivitamins), nootropics (piracetam), anti-inflammatory drugs (paracetamol), antibiotics (ampicillin, amoxicillin), metabolic drugs (riboxinum, aktovegin). In 84% of cases drugs prescribed by the doctor, in 16% of cases drugs were given by parents or coach without assigning of specialist. The survey showed that in 25% of cases the use of drugs has been haphazard, irregular, does not respect the principle of a course of treatment. In the analysis of level of physical fitness, physical performance and sports performance in young athletes was noted the absence of positive dynamics in those cases when the doctor does not follow the recommendations using drugs and during self-medication.

Conclusions. Thus, comprehensive monitoring of the health of athletes, involving specialists and pharmacological monitoring possible to obtain full information about the health problems of athletes, carry out the correction of the training process, develop an individual program of recovery and rehabilitation, and to avoid cases of doping and adverse complications during therapy in young athletes.

EFFICACY AND SAFETY OF AZARGA COMPARED WITH TIMOLOL IN PATIENTS WITH OPEN-ANGLE GLAUCOMA

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Relevance. Open-angle glaucoma takes the first place among all the ocular diseases leading to blindness according to WHO. More than 100 mln people worldwide suffer from the disease. Primary open-angle glaucoma may be asymptomatic but causes progressive optic nerve damage with significant loss of visual field. Therefore the necessity of choosing the appropriate drug that decreases intraocular pressure pushed us to try new effective drug "Azarga" (Alcon) which is a combination of brinzolamide 1% and timolol 0,5%. Besides its hypotensive effects brinzolamide is known to improve conditions of optic nerve cells.

Purpose. To evaluate the efficacy and safety of Azarga therapy compared with timolol 0.5% monotherapy in patients with open-angle glaucoma.

Materials And Methods. This study included 40 patients aged $62 \pm 1,8$ years. All the patients were divided into 2 groups by 20 patients in each. They have undergone standard for ophthalmic examinations as well as gonioscopy, tonography, optic coherent tomography (OCT) (glaucoma scan regime). The study group was prescribed Azarga, while the second group received Timolol 0,5% topically twice a day. The primary endpoint was mean reduction in intraocular pressure (IOP) from baseline to week 8 at 2 hours postinstillation. Visual functions, IOP and side effects have been evaluated in 10 days, 1 month and 3 months period.

Results. Visual acuity in study group has increased during the 1st month of the research on $0,2 \pm 0,07$ while in control the indicator has not changed significantly - on $0,09 \pm 0,008$. All the patients showed the decrease of the number and proportions of

scotomas, widening of visual fields. In the study group the average expansion of visual field was equal to 175 ± 48 , and in control group only 61 ± 13 . Mean IOP reductions from baseline were greater with Azarga than with Timolol 0,5% in all the periods at 0 and 2 hours postinstillation (all $P\leq 0.01$), with mean reductions of -3.2 mmHg with Azarga and -1.4 mmHg with Timolol 0,5% in 3 months. OCT showed stable results in group of patients who were prescribed Azarga, the peripupillar layer of nerve fibers, the excavation depth and width stayed without significant changes, while in control group there were significant atrophic changes of optic nerve observed. Although side effects (hyperemia, burning, tearing) were observed in 10% of all patients, all of them were mild or moderate and didn't cause the necessity to change the drug.

Conclusion. The therapy with Azarga was associated with significantly greater reductions in IOP and better improving of visual functions compared with Timolol 0,5%, and it was well tolerated in patients with open-angle glaucoma.

EARLY DIAGNOSIS OF RETINITIS PIGMENTOSA

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Introduction. Retinitis pigmentosa is a group of hereditary degenerative diseases of retina which inherit in dominant, recessive and X-linked manner. Initial signs of this group of diseases are nyctalopia (night blindness), progressive visual field loss, decreased b-wave of ERG and in rare cases bone spicule-shaped pigment deposits in peripheral retina. Nowadays adequate treatment methods of these diseases are absent but early detection of abnormalities in visual functions among asymptomatic patients gives us opportunity to slow the blinding degenerative process. This increases the life quality of patients and prevents the early development of blindness.

Aim. To determine the role of multifocal ERG and its compatibility with other instrumental methods such as perimetry, OCT results in patients who have genetic background.

Materials and methods: 15 people from 5 families which have genetic (non-syndromic) retinitis pigmentosa patient member, underwent routine ophthalmologic examinations: history taking, visual acuity, ophthalmoscopy, perimetry and referred to multifocal ERG and OCT examination. We divided them into two groups: first group consisted of people who have any visual complaints such as refractive errors and the second group comprised the people without any visual complaints.

Results. Out of 15 people, 8 (53 %) are women and 7 (47 %) are men, with average age $20\pm 1,5$. During the investigation we have detected that 5 (10 eyes) out of 15 investigated people had visual field problems but there were not typical for retinitis pigmentosa abnormalities in ophthalmoscopy (no bone spicule pigment deposits). The peripheral visual fields were narrowed to $71\pm 5,40$ in average. All the patients have undergone OCT exam, however we couldn't find significant changes of OCT picture as the stage of the disease was early and no decrease of pigment epithelium layer was found. The ERG has given more representative result. According to multifocal ERG patients have following results: from 29 nV to 45 nV (normal is 61-108 nV) in both eyes of the patients.

Conclusion. On the basis of this investigation it is proven that the multifocal ERG is the key method in early detection of risk groups among family members who have genetic background on non-syndromic retinitis pigmentosa. And it is useful method in cases which there is no any visual complaints of patients and without any perturba-

tions in routine examinations and OCT or conventional ERG changes. It can be used in order to define patients at early stages and prevent early onset of blindness.

FEATURES OF QUALITY OF LIFE IN PATIENTS WITH RHEUMATOID ARTHRITIS ASSOCIATED WITH CARDIOVASCULAR PATHOLOGY

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Rheumatoid arthritis (RA) represents one of the leading rheumatic diseases, and severity of its clinical presentation and its consequences are unmatched among other types of arthritis, and rarely occurs independently. Up to date, there are many studies confirming that the course of RA is coupled with cardiovascular diseases (CVD). It is proved that the quality of life (QoL) rating reflects dynamics of the patient's condition and can be used to evaluate the effectiveness of therapy in patients with RA, along with the commonly accepted criteria for assessing their treatment response, which allows to overcome the prevailing one-sided biological approach to the patient and to choose the best integrated treatment.

Purpose of the research: To increase the credibility of evaluation of the treatment efficiency based on a complex dynamic study of the quality of life (QoL) in RA patients.

Materials and methods: In conformity with the purpose and objectives, we have processed 20 patients with RA without CVD (group 1) and 20 patients with RA associated with CVD (group 2), under our care in the Cardiorheumatology and Rheumatology departments of the 1st Clinic of Tashkent Medical Academy. Inclusion criteria of patients to the study were the reliable diagnosis of RA, verified in accordance with ACR / EULAR (2010) criteria, the age of patients from 18 to 75 years, and informed consent to participate in the study. To evaluate the quality of life, the NAIF (New Assessment and Information Form to Measure Quality of Life by P.Y. Hugenholtz and R.A.M. Erdman, 1995) technique has been used.

Results and discussion: When analyzing the quality of life in patients with RA in association with CVD, there was a statistically significant reduction of functions observed in several categories ($p < 0.01$). Thus, the percentage of physical mobility capacity was evaluated for 52.76%, and 79.36% in the control group. The emotional state was preserved just in 49.44% of patients in Group 2, and 65.42% of patients in Group 1; sexual function – 58.00% and 70.23%; social functions – 53.38% and 61.59%; cognitive function – 62.83% and 70.67%, respectively, according to the integrated SF-36 questionnaire. Degree of influence of a number of social and demographic factors on QoL of patients with RA has been evaluated. There was a significant correlation noted between the quality of life level and financial situation (improved functional activity and mental health, reduced severity of pain in patients with a good financial situation), sex: female patients as compared to men have a decreased QoL according to HAQ, EQ-5D indexes and SF-36 scale, associated with psychoemotional state and age (QoL deterioration with age).

Consequently, the integral index of the functional capacity of all the above mentioned categories, compiled 56.84% in RA patients with CVD comorbidity and 72.05% in the group of patients suffering from isolated RA.

THE ROLE OF ENDOGENOUS EPIDERMAL GROWTH FACTOR RECEPTOR LIGANDS IN MEDIATING CORNEAL EPIDERMAL HOMEOSTASIS

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Background and objectives. The human cornea plays a critical role in the refraction of light onto the retina as well as protecting the eye against external agents, such as microbes, viruses, and debris. Maintenance of this multilayered tissue is imperative for proper vision; perturbation of corneal integrity is the second leading cause of blindness worldwide. The aim of this research was to provide a comprehensive study of the biological role and therapeutic potential of six endogenous epidermal growth factor receptor (EGFR) ligands in corneal epithelial homeostasis. This work provides a comprehensive examination of six EGFR ligands, using both in vitro and in vivo assays. This study identified as the most efficacious mediator of in vitro corneal wound healing. However, in vivo analysis revealed that EGF is better at promoting corneal epithelial wound healing.

Methods. Cell Culture: Human telomerase-immortalized corneal epithelial cells (hTCEpi) were obtained from Geron Corp. (Menlo Park, CA, USA). Cells were maintained in growth media (Defined Keratinocyte Media with growth supplement; Life Technologies Corp., Grand Island, NY, USA) containing 100 U/mL penicillin and 100 U/mL streptomycin at 37°C in 5% CO₂. Human corneal epithelial cells (HCECs) were cultured, as previously described, from corneas that were unusable for transplantation (Oklahoma and Kentucky Lion's Eye Banks). Cells were plated on fibronectin (Athena E. S., Baltimore, MD, USA) – coated tissue culture dishes and maintained in growth media at 37°C in 5% CO₂. Use of human tissue adhered to the tenets of the Declaration of Helsinki. Kinetic analysis and dose response curves were performed by using in vitro and in vivo wound-healing assays. Biochemical assays were used to determine receptor expression and activity. Human tears were collected and quantitatively analyzed by multianalyte profiling for endogenous EGFR ligands.

Results. Epidermal growth factor receptor ligands improved wound closure and activated EGFR, but betacellulin (BTC) was the most efficacious promoter of wound healing in vitro. In contrast, only epidermal growth factor (EGF) promoted wound healing in vivo. Human tears from 25 healthy individuals showed EGFR ligands at these average concentrations: EGF at 2053 ± 312.4 pg/mL, BTC at 207 ± 39.4 pg/mL, heparin-binding EGF at 44 ± 5.8 pg/mL, amphiregulin at 509 ± 28.8 pg/mL, transforming growth factor-α at 84 ± 19 pg/mL, and epiregulin at 52 ± 15 pg/mL.

Conclusions. Under unwounded conditions, only EGF was present at concentrations near the ligand's K_d for the receptor, indicating it is the primary mediator of corneal epithelial homeostasis. Other ligands were present but at concentrations 11- to 7500-fold less their K_d, preventing significant ligand binding. Further, the high levels of EGF and its predicted binding preclude receptor occupancy by exogenous ligand and can explain the discrepancy between the in vitro and in vivo data. Therefore, therapeutic use of EGFR ligands may be unpredictable and impractical.

NEW WAYS IN TREATMENT OF GLAUCOMATOUS OPTIC NEUROPATHY

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Relevance. Glaucoma is a distinctive group of optic neuropathies characterized by progressive degeneration of neuronal tissue due to death of retinal ganglion cells, with accompanying gradual visual field loss. (V. Gupta 2011), which causes glaucomatous optic neuropathy (GON). It is the leading cause of irreversible blindness worldwide. (Quigley H.A. 2006).

Purpose of the study is a comparative assessment of the effectiveness of combined treatment of medotilin and benevron B in GON.

Materials and methods. We observed 60 patients (88 eyes) with GON in compensation of intraocular pressure, from age 42 to 77. There were formed three groups of patients: the 1st -control group, the patients received traditional therapy - Sol. Mildronati 10% -5.0 i/v; Tab Nootropili 800 mg. x 3 times a day, Sol. Pyridoxini hydrochloridi 5% -2.0 i/m, p/b-Sol. Emoxypini 1% -0.5, The 2nd group of patients received traditional therapy but Tab. Nootropili was replaced by Sol. Medotilini 1000 mg-4 ml. The 3rd group of patients unlike the 2 group received complex Sol. Benevroni B 4.0 ml i/m instead of the vitamin B6, the course of treatment was 10 days. Groups were homogeneous in terms of age, gender and stage of glaucoma. Patients were carried out common ocular examinations before the treatment, after 10 days, 1 and 3 months after treatment.

Results. According to our results improvement of visual acuity was observed in dynamic of 1st group's patients with GON by the 3rd-month, exceeding in 1.11 times the initial indicates, that was consisted 0.66 ± 0.10 . The indicates of middle border of peripheral field of vision (MBPFV) was increased to 458.2 ± 4.20 that at 200 more from initial level. The visual acuity of 2nd group patients was improved at 1.18 times from the initial level that was consisted 0.70 ± 0.08 . The MBPFV was increased at 320 and made up 470.2 ± 5.10 . During the treatment of the 3rd group the visual acuity was exceeded at 1.32 times from initial level and made up 0.78 ± 0.11 , the MBPFV was improved more than 450 and that was consisted 483.2 ± 6.10 .

Conclusions. The results of our research showed that medotilin has neuroprotective effect in treatment of patients with GON, and combined with Benevron B contributes to the stabilization and regeneration of the neurons in the optic nerve.

INFLUENCE OF THE ELECTROMAGNETIC RADIATIONS ON CENTRAL NERVOUS SYSTEM

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Relevancy. The XXI century provided people with innovative technology that not only simplified their everyday life but also increased the risk of health issues caused by its usage. This is mainly caused by electronic devices that radiate hertzian waves and are considered to be the source of the electro-smog, hiding a threat for health.

Aim of the research.

- Evaluate the influence of the electromagnetic fields on human organism

- Research the impact of exogenous factors on causing neurological diseases among students. Conduct the comparison of health status of research subjects.

Material and research. The research focused on two groups: students, who lived at home, were the control group, and students, who lived on campus. Students who lived at home had all their appliances spread out across the apartment; students who lived on campus had all their appliances in the same room they lived in. Ages 19-25 (usual age of students) is a very physically and emotionally draining period that is associated with intense education process and increased usage of technology. This leads to multiple health issues, including issues with nervous system. Method of the research includes studying of vegetative state and neuropsychological conditions.

Results and Discussions. Results were obtained that showed material difference between the two focus groups. Students who lived on campus were more prone to loss of memory, increased development of stress reactions, and other neurological issues.

Conclusion. Electromagnetic fields can cause issues with vegetative nervous system and cognitive issues that can lead to further severe neurological problems. Potential factors of danger include intensity of radiation and duration of the contact with the source. However, this does not mean that all home appliances are dangerous, especially if used correctly. Thus, this methodology allows to develop and to implement the usage of electromagnetic fields into clinical trials. This can be achieved by creating home appliance usage recommendations or developing non-medicated treatment options for neurological diseases or indicating scientific criteria to forecast success rate of treatment of neurological diseases.

FEATURES OF TREATMENT OF TYPE 2 DIABETES

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The purpose of the study. Describe the features of hypoglycemic therapy in patients with type 2 diabetes according to the level of C-peptide, insulin, glycosylated hemoglobin A1C.

The objectives of the study. Identify the features of hypoglycemic therapy, depending on the level of C-peptide, insulin and glycated hemoglobin A1C in patients with type 2 diabetes.

Materials and methods. The comprehensive study included 30 patients with type 2 diabetes (16 men and 14 women) aged 36 to 68 years c disease duration from 3 months to 21 years. The average body mass index was $32,71 \pm 2,46$ kg/m². Ratio of waist to hip size for men is $1,16 \pm 0,09$, for women - $1,14 \pm 0,05$. Obesity degree I was diagnosed in 14 patients (46,6%), obesity II degree - in 11 patients (36,7%), obesity degree III - 5 patients (16.7%). Myocardial infarction, acute ischemic stroke had a history in 4 patients (13.3%). The content of C-peptide, insulin was studied by ELISA. Glycosylated hemoglobin A1C was determined by affinity chromatography using microcolumns and standard set of "Diabetes test."

Results. In a study of this group of patients, all patients were found vascular complications of varying severity. Diabetic neuropathy was diagnosed in 9 patients (30%). On examination, fundus nonproliferative diabetic retinopathy was diagnosed in 3 patients (10%), preproliferative - in 2 (6.67%), 2 patients (6.67%) were stage proliferative retinopathy. In 3 patients (10%) diagnosed with diabetic foot syndrome. Diabetic cataract was found in 3 (10%). 6 patients (20%) was present in the history ischemic heart disease and 9 (30%) hypertension. In the study group there was an increase in

average systolic blood pressure up to $163,6 \pm 2,9$ mm Hg, diastolic - up to $108,1 \pm 2,7$ mm Hg. The median fasting plasma glucose was $9,3 \pm 1,39$ mmol/l, postprandial blood glucose - $12,54 \pm 2,91$ mmol/l. Glycosylated hemoglobin A1C was equal to $10,37 \pm 2,27\%$. The mean values of total cholesterol, triglycerides reliably increased accordingly to $5,21 \pm 1,03$ mmol/l and $2,83 \pm 0,97$ mmol/l. Of these, 11 patients (36.7%) were treated with oral antidiabetic drugs of sulfonylureas (Gliclazide CF gliquidone, glibenclamide) and biguanides (metformin). 12 patients (40%) were on a combined hypoglycemic therapy: using oral drugs with intermediate-acting insulin (Protafan, Monotard) or long-acting insulin (Lantus, Levemir). Basis-bolus insulin therapy was performed in 7 patients (23.3%). It is interesting to note that in the study of C-peptide in patients receiving oral hypoglycemic agents, in 16 (54.5%) showed reduced levels of C-peptide, to 0.2 ± 0.01 ng/ml of immunoreactive insulin and $0.7 \pm 0,03$ mkIE/ml increase in the glyated hemoglobin A1C to $12,89 \pm 2,76\%$, increase in fasting glucose to $12,84 \pm 1,54$ mmol/L, which was the indication for insulin therapy.

Conclusions. The approach to the treatment of each patient with type 2 diabetes should be individualized, taking into account indicators of glyated hemoglobin A1C, glucose, levels of residual insulin secretion. In order to prevent the emergence and development of late complications of type 2 diabetes mellitus patients with insufficient glycemic control the advisability of insulin.

NITRIC OXIDE AND C-REACTIVE PROTEIN LEVELS IN ISCHEMIC STROKE AND ITS SUBTYPES: CORRELATION WITH CLINICAL OUTCOME

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Background. Studies in different populations have shown that ischemic stroke can trigger an acute phase response resulting in a rise of plasma concentration of C-reactive protein (CRP). However, there are very limited studies on CRP and first ischemic stroke divided into subtypes. High levels of CRP may also be associated with poor outcome.

Objective. The present study was taken up to investigate the prognostic value of CRP within 24 h of onset of ischemic stroke.

Materials and methods. 78 patients with first stroke and 74 age- and sex-matched healthy controls were involved in the study. High-sensitivity C-reactive protein (hsCRP) levels were estimated, and follow-up interviews were conducted with patients at 3, 6, and 12 months post-event to determine stroke outcome. In addition to this plasma, NO(x) (nitrate and nitrite) was measured to detect the serum NO (an important biomarker of inflammation and oxidative stress) levels in ischemic stroke patients and controls. The relationship between CRP value and poor outcome (>2 on modified Rankin Scale Score and <5 on an extended Glasgow outcome scale) was studied.

Results. There was a significant association between elevated levels of CRP and NO with the disease. A stepwise multiple logistic regression analysis confirmed these findings after adjustment for potential confounders [adjusted odds ratio = 2.890, 95% CI (1.603-5.011) with $p < 0.01$ and adjusted odds ratio = 2.364, 95% CI (1.312-3.998) with $p < 0.01$ for hsCRP and NO, respectively]. After adjustment of potential confounders, patients with high CRP levels had a significant increased risk of poor outcome [adjusted odds ratio = 3.50, 95% CI (1.312-6.365) and $p < 0.001$]. Elevated levels of hsCRP associated significantly with all stroke sub-

types classified according to Acute Stroke Treatment classification except for lacunar stroke and stroke of other determined etiology.

Conclusion. NO and hsCRP levels predict the incidence of ischemic stroke, and hsCRP is an independent prognostic factor of poor outcome at 3 months.

PECULIARITIES OF SPORTS MASSAGE IN TRAINING OF KURASH WRESTLERS

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In spite of being a very ancient sport the Uzbek national wrestling kurash was admitted officially quite recently. Now it is adopted in tens of countries and international competitions are held regularly. The peculiarity of kurash is that the main load falls on shoulder girdle, lumbar region and foot muscles. The restorative strategy and training massage methods used so far are disaggregated and empirical. They entirely depend on the proficiency, experience level and skills of the masseur. So improvement, systematization and development of massage methods in consideration of specific character the kurash –wrestlers' load is a topical problem.

The purpose of research: to evaluate the efficiency of the newly developed massage methods in kurash–wrestlers workout.

Materials and methods: Under our observation there were 45 qualified sportsmen aged from 18 to 26 years with sports experience of 8 years (± 1.67). The sportsmen were divided in two groups – the main and the control one – comparable at all characteristics. During the training process the massage with the new proposed method subject to the muscles loaded traits as been implemented at the main group. The sports rehabilitation massage course consisted of 15 treatments (20 minutes for each). The control group did not get a massage. The sportsmen had a passive rest.

The features of the suggested methods were that the massaged areas were the most loaded ones and the correlation of used massage techniques was relocated for more petrissage and vibrotherapeutics.

During the research the measurement of the torso power was made with the torso dynamometer and the functional muscle diagnostics by the by the instrumentality of six- point system by V.Yanda was held in both groups. The main group indices were taken before the workout, after it and after the 20-minute sports massage. The measurement at the control group was carried out after the 30-minute passive rest. Also the character of the training and psychic emotional state was analyzed by the data from the sportsmen's self-control journals and special status poll (feeling, activity, and mood).

Results. The measures of variation of the torso strength and the functional muscle state before the workout (179 ± 7.82 kg and 180 ± 5.94 kg; 5.2 ± 0.47 point and 5.3 ± 0.36 point at the main group and the control one, respectively) and then after the training (149 ± 6.7 kg and 148 ± 7.82 kg; 3.3 ± 0.42 point and 3.2 ± 0.47 point) did not differ substantially in both groups.

Re-measurement after the massage in the first group and after the passive rest in the control one demonstrated authentically better result in the first group as against the second one (178 ± 8.94 kg and 165 ± 6.79 kg; 4.8 ± 0.53 point and 3.9 ± 0.48 point, respectively).

Subjective estimation the sportsmen's feeling by data from the self-control jour-

nals and the test poll proved to be higher in the main group. Our analyze of the training process pending the following three months showed the increase of power load in the main group without presenting any complaints or indications of fatigue. The character of training in the control group did not change.

Conclusions. The derived data showed that in the issue of the training massage the torso power and the functional muscle state reinstates quicker and more integrally than after the passive rest. The accelerated restoring process allows to develop and to intensify the workout mode avoiding any risk of overstrain or overtraining.

ENDONASAL ELECTROPHORESIS WITH TANAKAN IN THE TREATMENT OF NONPROLIFERATIVE DIABETIC RETINOPATHY

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Purpose. The purpose of this research is studying the effectiveness of the treatment of nonproliferative diabetic retinopathy by method of endonasal electrophoresis with Tanakan

Objectives. Clinical and laboratory assessment of the effectiveness of a new method for the treatment of patients with non-proliferative diabetic retinopathy (NDR) with the assessment of the data of the static perimetry and biochemical studies of tear fluid.

Material and methods. Clinical trials were conducted in the course of treatment of 66 patients (123 eyes) diagnosed NDR. The average patient age $62,1 \pm 1,9$ years. Women – 43, men - 23. Patients were divided into 2 groups. Formed groups, depending on the stage of DR, the severity of diabetes, sex and age were similar.

The main group included 34 patients (63 eyes) who received Tanakan oral dose of 120 mg per day, and by endonasal electrophoresis. Patients in the control group (32 persons, 60 eyes) was received Tanakan oral dose of 120 mg per day. In both groups, treatment was carried out for 10 days with standard therapy of NDR. Endonasal electrophoresis was performed using one - galvanization stream for 10 days. Before treatment and after a course of therapy patients underwent general eye examination, computerized static perimetry and determination of the level of NO₂ (NO₃) in the tear fluid.

Results and Discussions. Treatment was well tolerated by patients. Adverse reactions, both local and general were not noted. Upon completion of the 10-day course of treatment in the study group there was observed a significant positive effect in the form of increased visual acuity, which in the main group was reported in 87.3% and only 12.7% of visual acuity did not change, whereas in the control group improvement in visual acuity was noted in only 22% of cases. Ophthalmologic examination showed a positive dynamic on fundus in both groups: patients reduced the number of hemorrhages, foci of soft and hard exudates, macular edema was observed disappearance area in the main group on average 2.5 times, and in the control group by 1.5 times.

According to the static computer perimetry after treatment there was a significant increasing in the sensitivity of the retina by 22% in the main group and 10% in the control group, reducing the average deviation from the age norm by 33% and 12%; decreasing of absolute scotomas in 30% and 21% respectively; relative scotomas respectively to 100% and 83%($p < 0.05$). Analysis of the data revealed that in the control group on day 10 of treatment the level of NO increased slightly - to 24.35%. A

more pronounced effect was observed in the main group - an increase of 85.6% compared with before treatment ($p < 0.05$).

Conclusions. Effect achieved in the 10-day course of therapy is proposed persistent enough for 5-6 months. Combined treatment stabilized the development of DR and avoid the development of serious complications. The proposed combined method of treatment with endonasal electrophoresis with Tanakan in the treatment of NDR is much more efficient compared with standard treatment, it leads to regression of lesions in the fundus, and the restoration of visual function.

STRUCTURALLY FUNCTIONAL PARAMETERS OF THE MYOCARDIUM AND VASCULAR WALL AT PATIENTS WITH THE ARTERIAL HYPERTENSION, ASSOCIATED WITH THE DIABETES MELLITUS 2 TYPES

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The purpose - to reveal features of defeat of vessels (a thickness of a vascular wall) at patients with an arterial hypertension (AH) at its association with a diabetes mellitus 2 types (DM).

Material and methods. With AH I-II stages research of 120 patients is conducted in a combination to a diabetes 2 types at the age of 50-59 years, the comparison Group was made by 20 patients with AH, and control group - almost healthy 20. Local rigidity of a vascular wall was defined on change of diameter of the general carotid in a systole in relation to diastole with calculation of an extensibility of an artery.

Results. Patients with isolated AH at comparison with control group had following changes: the thickness of walls left ventricle increased at not changed size of its cavity, the weight of a myocardium left ventricle (including its indexed indicator), volume of the left atrium and its index increased. The type of geometrical model, thus, corresponds concentric (increase in a thickness of walls at not changed cavity) about increase in a relative thickness of walls left ventricle. The association with a diabetes changes type of reaction of heart. Diabetes presence increases frequency of hypertrophy of left ventricle (HLV) to 66 % about increase in a share eccentric HLV three times, from 15 % to 44 %. Also, this type of geometry at patients with a diabetes is accompanied by progressing of increase in the left atrium and decrease in fraction ejection that allows to estimate this transformation as categorically not adaptive. Presence of an arterial hypertension is a predicate of a thickening of a vascular wall and infringement of its function, increasing frequency of vascular infringements in 3-4 times in comparison with control group. DM, without changing frequency of increase transient ischemic stroke - promotes it more to progressing, and, without changing frequency of vascular dysfunction - changes its character, leading to infringement of properties of an artery to restore the lost volume. For indicators of local rigidity of a wall the WASP in group practically healthy faces norms ($M \pm 2$) have been defined. The arterial hypertension increased frequency of pathological vascular reactions in 4 times in comparison with control group, and a diabetes - in 8 times.

Conclusions. 1. Diabetes presence increases frequency HLV to 66 % about increase in a share eccentric HLV three times, from 15 % to 44 % that is accompanied by progressing of increase in the left atrium and decrease in ejection fraction.

2. Diabetes presence is a predicate of a thickening of a vascular wall and infringement

of its function, increasing frequency of vascular infringements in 2 times in comparison with patients with isolated AH and in 8 times in comparison with control group.

LONGTERM EFFECTS OF INTRAARTICULAR HYALURONAN ON SYNOVIAL FLUID IN OSTEOARTHRITIS OF THE KNEE

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Objective. Intraarticular (IA) hylan injections constitute second-line therapy for osteoarthritis (OA) of the knee, but human studies suggesting a possible mechanism of action are lacking. We examined the effect of IA Hylan GF-20 injections on synovial fluid (SF) hyaluronan (HA) concentration, viscosity, and elasticity over a 6-month period in patients with mild to moderate OA of the knees.

Materials and methods. Patients with symptomatic knee OA had SF aspirated from the study knee pre- and 3 and 6 months post-Hylan injection. Primary endpoints included SF HA concentration, viscosity, and elasticity. SF HA concentration was determined using uronic acid assay, and rheology measured using a micro-Fourier rheometer.

Results. Sequential SF samples were available from 32 of 60 subjects injected at baseline (15 men, 17 women; mean age 65 yrs) at 3 months post-injection. The mean HA concentration had increased by 13% ($p < 0.0008$), and the complex shear modulus had increased by 16% ($p < 0.03$). Sufficient SF was also available from 19 of these subjects at 6 months post-injection when mean HA concentration was 2.24 ± 0.62 mg/ml compared to their baseline mean of 2.02 ± 0.52 mg/ml, an increase of 10% ($p < 0.053$).

Conclusion. This open-label study showed a statistically significant change from baseline in both SF HA concentration and complex shear modulus at 3 months following IA Hylan GF-20 injection among subjects with mild to moderate knee OA. These results suggest that one possible mechanism of action of viscosupplementation is to promote endogenous HA production. Longer-term studies are required to identify whether these changes in SF measures are important for modification of disease progression in knee OA.

DIAGNOSTIC VALUE OF OLFACTORY LOSS IN PARKINSON'S DISEASE

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Introduction. Recent longitudinal studies suggest that olfactory impairments can develop at early stage in Parkinson's Disease (PD). Estimation of olfactory function is noninvasive examination method, but it doesn't often use in clinical practice and in epidemiologic researches. The purpose of this study was to investigate a value of olfactory estimation as auxiliary method in diagnostic of PD, and to identify specific odours, which can be used for shrinking examination time.

Materials and methods. Olfactory function was estimated at 66 patients with PD (37 men and 29 women, mid-dle age made up $54,3 \pm 5,7$) from Neurology Department of Tashkent Medical Academy and Republic Clinical Hospital №1 and 66 healthy volunteers. All patients and volunteers underwent examination including olfactory test with 6 different odours: almond oil, rose water, mint oil, lavender oil, valeric oil and

coffee at the period of investigation from February 2015 to November 2015. Criteria of expulsion from study was acute or chronic nasal diseases, various nasal operations in history, traumatic head injuries.

Results. Normal olfactory function (identification of all 6 odours) was observed among patients with PD significantly less as compared with control group (16,8% and 91,9% respectively). Almost all patients with PD had olfactory dysfunction. On the average, patients with PD determined just 2 flavours correctly, in contrast, healthy volunteers identified all 6 odours. Results demonstrated that 68% patients with PD had complaints on hyposmia before this examination, 27% patients considered that they had not problem with smell. However, 5% patients noted hyperosmia, which did not confirm by test. Furthermore, severity, duration of PD correlated with olfactory impairments - patients with more severe and longitudinal form of PD could not determine even one flavor. Nevertheless, long-term ailing more young patients with slowly progressive course had non-significant olfactory loss. The most important difference in identification of odours was found out between patients with PD and healthy people for coffee, mint and almond oil.

Conclusion. Research of olfactory function is useful auxiliary method of diagnostic in PD. The assessment of olfactory functions must be on the prominent place in the diagnosis of PD. Using only 6 flavour - almond oil, rose water, mint oil, lavender oil, valeric oil and coffee – allowed us to differentiate patients with PD from healthy volunteers. If we examine olfactory function at all patients we will identify PD at early stage. Therefore we can improve patients' quality of life with well-timed treatment at early stage.

EFFICACY AND SAFETY OF RETINALAMINE IN MIOPIA

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Relevance. The degenerative diseases of retina, such as complicated myopia, central chorioretinal degeneration, diabetic retinopathy, tapetoretinal degeneration are major causes of visual impairment and blindness (Egorov E.A., Ogonezova J.G., 2009). Furthermore, the treatment of degenerative diseases of retina is an urgent problem of ophthalmology despite many years of experience in the study of their treatment (Havitson V.H., 2004). That is why the search and test of the effectiveness of drugs which allow to carry out pathogenetically reasonable, effective, safe treatment and rehabilitation of patients with various diseases of the retina is an actual problem of modern ophthalmology. Retinalamine is known to have high cytoprotective activity, enhances transformation and stimulates proliferation of stem cells in neurons, which ensures their connection with cerebral nerve structures and restoring visual function.

The aim of the study was to examine the effectiveness of retinalamine compared with emoxipine at high myopia with chorioretinal complications.

Materials and methods. The study included 26 patients (52 eyes) with myopia of high degree with chorioretinal complications (10 - male, 16 - female) and was conducted during 3 months. The average age in group was equal to 30 ± 2.1 years. The group was divided into two groups by 13 patients in each: study and control groups. The control group received traditional therapy (parabulbar injections of Sol. Emoxipine 1% - 0.5 ml, Sol. Ac. Nicotini 2,0 №10, Sol. Ciancobalamini 500 γ 1,0 ml №10, Sol. Tiamini hydrochloridi 1% - 1,0 ml №10, Sol. Piracetami 20% 5.0 №10, Sol. Glucose 40% - 10.0 with Sol. Ac. ascorbinici 5%-5.0 №10). The main group received Retinalamine (parabulbar injections: 5 mg of dry substance dissolved in 1.0 ml of 2% solution

of novocaine, during 10 days) in addition to standard therapy. To evaluate the effectiveness of the treatment we have used visometry, perimetry, biomicroscopy, tonometry, direct and indirect ophthalmoscopy before treatment, 1 and 3 months after the course of the treatment.

Results. After a month of the treatment in the study group, visual acuity increased by an average of 0.15 ± 0.03 from baseline. Accordingly, in the control group, the figure amounted to an average of 0.09 ± 0.02 . All the patients have marked a subjective increase of visual functions. On average, the expansion of the peripheral fields of vision in the study group was 71.2 ± 2.8 degrees, while in the control group, the rate was on average 35.5 ± 5.4 degrees. No patients had complications of the treatment. Response to the treatment has achieved its maximum 1 month after the course. Repeated visometry and perimetry in 3 months from the start of the treatment, the average change in the dynamics of visual acuity from baseline in the intervention group was 0.13 ± 0.01 . In contrast, in the control group mean change in visual acuity was 0.06 ± 0.01 . In the main group dynamics of changes in the peripheral boundaries of the field of vision from the beginning of the course is approximately $64.5 \pm 1,9$ degrees. While in the control group 18.5 ± 2.2 degrees.

Mild side effects of parabolbar injection of Emoxipine such as burning, soreness and redness of the eyes were observed in 11 patients in the control group. But in the main group the similar side effects of Retinalamine were observed only in 3 patients and were very mild.

Conclusion. Thus, we can state that Retinalamine has showed its higher effectivity in comparison with Emoxipine 1% in relation to visual functions both in short and long-term period. The drug has few and mild side effects and can be recommended in the treatment of high myopia.

CALCULATION OF EXPENDITURE BY FORMULE ON IN-PATIENT TREATMENT OF PATIENTS THE 2 TYPE OF DIABETES MELLITUS

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Actuality. Diabetes mellitus (DM) is social significance and expensive disease and it is not only associated with preparations which are used for its treatment. It depends on that the patients can have early disablement, a chance of development of severe conditions and worsening of having diseases. More important, aspect of considering diseases is count of treatment cost of each patient in stationary stage of treatment.

The aim and tasks of investigation: to design the formula of treatment cost estimate of patient with the 2 type of diabetes mellitus who are staying on permanent treatment.

Materials and methods of investigation. The mathematic methods of counting have been used for detecting of treatment cost of patients with 2 type of diabetes mellitus in in-patient department.

Results. expenses for hospital treatment of patient with DM may be determent by follow formula: $C_{in-pat.} = C_{b/d} * N_d$, the $C_{in-pat.}$ – the cost of hospital treatment process; $C_{p/d}$ – the cost of one bed-day for in-patient with diabetes mellitus; N_d – middle amount day in-patient stay for year, day. Average expenditure of hospitalization per the registered patient with diabetes can be assessed taking into account the average cost of one bed-day. The paper of expenses of health care to the treatment of patient with DM consist of sub-papers, reference of them is given below.

Diagnostic process and control investigation: blood sugar, monthly; urine sugar, monthly; ECG, per a year; biochemical analyses, 1-2 a year; acetone in urine, for the necessary; the cost of personal (treatment physician, consulting of experts (if necessary), laboratory assistant, paramedical personal. Treatment process: drug ensuring- the cost of drug (the preparations which decrease of sugar rate). Physiotherapist method of the treatment.

Conclusion: designing of counting formula of treatment cost of patients 2 type DM in hospital treatment allows to count real indexes of treatment cost of patient and select, effective treatment tactics.

THE PERCUTANEOUS CORONARY INTERVENTION TECHNIQUES USING ELUTING STENTS STENTS FOR BIFURCATION CORONARY LESIONS

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Background. This study sought to evaluate the optimal percutaneous coronary intervention techniques using drug-eluting stents for bifurcation coronary lesions.

Material and Methods. The trial included 2 randomization studies separated by the presence of side branch (SB) stenosis for patients having non-left main bifurcation lesions. For 56 patients without SB stenosis, the routine final kissing balloon or leave-alone approaches were compared. Another randomization study compared the crush or single-stent approaches for 79 patients with SB stenosis.

Results. Between the routine final kissing balloon and leave-alone groups for nondiseased SB lesions, angiographic restenosis occurred in 17.9% versus 9.3% ($p=0.064$), comprising 15.1% versus 3.7% for the main branch ($p=0.004$) and 2.8% versus 5.6% for the SB ($p=0.50$) from 214 patients (69.9%) receiving 8-month angiographic follow-up. Incidence of major adverse cardiac events including death, myocardial infarction, or target vessel revascularization over 1 year was 14.0% versus 11.6% between the routine final kissing balloon and leave-alone groups ($p=0.57$). In another randomization study for diseased SB lesions, 28.2% in the single-stent group received SB stents. From 78 patients (71.6%) receiving angiographic follow-up, between the crush and single-stent groups, angiographic restenosis rate was 8.4% versus 11.0% ($p=0.44$), comprising 5.2% versus 4.8% for the main branch ($p=0.90$) and 3.9% versus 8.3% for the SB ($p=0.12$). One-year major adverse cardiac events rate between the crush and single-stent groups was 17.9% versus 18.5% ($p=0.84$).

Conclusions. Angiographic and clinical outcomes were excellent after percutaneous coronary intervention using drug-eluting stents with any stent technique for non-left main bifurcation lesions once the procedure was performed successfully.

REPRODUCTIVE HEALTH OF WOMEN PLAYING RUGBY AND FOOTBALL

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Modern training and competition loads place high demands on the body of athletes. Their volume, intensity and mental tension in many sports almost do not differ in individuals of both genders (Fazletdinova I.R. 2010). Excessive physical activity combined with psycho-emotional overexertion gives an impetus to development of various forms of diseases of the endocrine and reproductive systems of sportswomen.

The purpose of research: to evaluate the effect of regular physical exercise on the reproductive health of sportswomen involved in rugby and football.

Materials and techniques: In our study participated 80 athletes involved in rugby and football, at the age of 16 up to 23 years old. The general experience of sports on average was $6,7 \pm 0,73$ years. During the medical and pedagogical supervision assessed the character and intensity of training. Also the survey was conducted among the athletes by using a specially designed questionnaire to assess the impact of sports on menstrual function. The questionnaire included questions about the time of the beginning of the menstrual cycle, its features and athletes' attitude to their reproductive health. Moreover, anthropometry were performed with calculation of the index of masculinity (the ratio of the width of the shoulders to the width of the pelvis), ultrasonography (US), pelvic and gynecological examination. The control group consisted of 25 athletes of the same age who were not involved in sport.

Results. Significant differences were obtained in the main and control groups. In the main group overall incidence of menstrual dysfunction was 55%. Analysis of questionnaire data and gynecological examination revealed the presence of menstrual dysfunctions of different nature: algomenorrhea and irregular cycle were observed in 25% of cases, oligomenorrhea (short menstrual period less than 2 days) and hypomenorrhea (amount of lost blood less than 40 ml) - 15%, secondary amenorrhea (the absence of menstruation for 6 months or more) was observed in 6% of athletes. The normal menstrual cycle was observed in 46.6% of athletes. According to the poll, many athletes rather flippantly about their health: 60% of women continue to exercise during menstruation, 81.3% - even take part in competitions. Among those surveyed once a year visited gynaecologist- 10% women, 10% less than once, while 80% of respondents did not examined in the past year. Increased masculinity index was detected in 54% of female athletes, 21% of women according to US had hypoplasia of the uterus.

Conclusions. The sportswomen engaging in rugby and football have disorders of reproductive health associated with intensive physical and psychological loads. It necessitates the introduction of mandatory monitoring and regular examinations by a gynecologist and endocrinologist of children and female adolescents involved in sports to correction of reproductive disorders in time.

REHABILITATION OF PATIENTS WITH CHRONIC BILIARY PANCREATITIS

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Chronic pancreatitis (CP) - is a group of chronic diseases of pancreas of various etiologies, mainly inflammatory nature with phase-progressive degenerative and destructive changes of its endocrine tissue, atrophy of the glandular cells and replacement of them by connective tissue with varying degrees of violations of exo and endocrine functions of the pancreas. The main therapeutic measures in early period of exacerbation of the process is the creation of functional rest of the pancreas. Development of the recovery period and rehabilitation is achieved by a blockade of gastric secretion. The process of inflammation of the pancreas can be represented by increased gastric secretion, increase kholistokinina secretin and inflammation. Therefore use of secretion blockers of the proton pump is the main pharmacological measure in the

treatment and rehabilitation of CP.

The goals and objectives of the study are to evaluate the efficacy of esomeprazole 40 mg per day in rehabilitation of patients with chronic biliary pancreatitis.

Materials and Methods. We studied two groups of patients with chronic biliary pancreatitis. The patients (60 women, mean age - $40 \pm 5,3$ years) after treatment in a hospital, where in rehabilitation in polyclinics №17 in Tashkent, Almazar district. In addition to diet and taking polyenzyme drugs, they were received ordered famotidine (group 1) and esomeprazole (Group 2) 20 mg - two times per day.

The analysis of clinical aspects of the comparative effectiveness of two drugs: famotidine and esomeprazole in reducing pain and diarrhea syndrome showed that a more rapid and stable results were observed among patients taking the esomeprazole. The pain syndrome was stopped in this group after 3-5 days and completely gone in 6-10 day. Rehabilitation was conducted during one year and medicines were used during 1-3-4 months. Withdrawal of blockers was gradual following the strict diet.

Thus, Esomeprazole improves the stimulation of gastrin, improves trophism of pancreas and its secretory functions. Esomeprazole can be used for rehabilitation of patients with chronic biliary pancreatitis in mild and the early stages of an exacerbation with severe pain in the outpatient conditions.

CLINICAL FEATURES OF DUODENAL ULCER IN PATIENTS WITH MIDDLE AND OLD AGE

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The increase in the number of elderly patients with peptic ulcer (PU), an increase of complications and surgical interventions determines the need to study the characteristics of the clinical course, early diagnosis and improve the treatment of the ulcer in the designated group of patients.

The aim of this study was to determine the clinical course of duodenal ulcer (DU) among elderly patients.

Materials and methods. We observed 50 patients undergoing inpatient treatment in the first hospital of the Tashkent Medical Academy. Mean age of patients was $65,6 \pm 2,2$ years. - 15 (30%) women and 35 (70%) men were examined during study. The diagnosis of acute duodenal ulcer was confirmed by endoscopic examination.

The results showed that the long-term DU was detected in 54% of patients and later emerged DU- in 46% of patients. Localization of the ulcer in the Duodenum (65%) was prevailing over the stomach localization (35%). The small size of ulcers (less than 0.5 cm) were reported in 16% of patients, the average size (0.5 - 1 cm) - 64%, large (1.1 - 3 cm) - 20% of patients. Ulcer complications were observed in 30% of patients.

Combination of DU with other disorders was observed in 100% of elderly patients. Ulcer mostly was combined with pathology of cardio - vascular system (75%), in particular coronary heart disease (more often with stenocardia), and hypertensive disease.

In the clinical picture combination of pain and dyspeptic syndromes was dominating - 72%. In 75% of patients pain were localized in the epigastric area. Irradiation of pain was observed in 46% of patients, of whom 26% of patients - in the heart, 61% - in the back and waist, and 13% - in the right upper quadrant. Most patients (71%) characterized the pain as a small and medium intensity. The dyspeptic syndrome was mostly manifested with heartburn, nausea, meteorism, and these complaints was

hardly relived during treatment. 70% of patients had a cardinal pain. Symptoms of atherosclerotic and hypertensive encephalopathy (headaches, dizziness, buzzing in the head, etc.) was observed among more than half of patients.

Thus, in elderly patients with DU peculiarities of the clinical course of the disease (pronounced and persistent dyspeptic syndrome, atypical pain, complicated course, etc.) were observed. This must be considered in the differential diagnosis. Ulcer mostly was combined with pathology of cardio - vascular system and it requires targeted correction of disorders taking into account possible adverse reactions of the gastrointestinal tract in the prescription of the traditional anti-anginal therapy.

STUDY OF RHYTHM AND CONDUCTION DISTURBANCES IN PREGNANT WOMEN

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Extragenital diseases among women, where there may be a violation of the fetus and newborn, one of the leading cardiovascular disease takes.

Objective: to study of the frequency structure of rhythm and conduction disturbances in pregnant women.

Materials and methods. The study included 38 pregnant women observed in antenatal, at the 2 clinics of Tashkent medical academy. The mean age was $23,2 \pm 4,2$. Of the 38 women surveyed were 26 primiparous, multiparous - 14. In the group of women were pregnant again with previous births, abortions. The comparison group included 28 non-pregnant women without cardiac pathology in age from 18 to 34 years (mean age $24,6 \pm 3,2$). To study per woman screened was wound specially designed questionnaire, which contained complaints, the list of related Zabolev-tions, bad habits, profession, obstetric history, physical data, the results of laboratory and instrumental methods of examination. Instrumental examination included recording an electrocardiogram (ECG) at rest 12 standard leads, 24-hour Holter monitoring (HM).

Results and discussion. The frequency and structure of conduction disturbances in pregnant women according to the ECG was as follows: atrioventricular (AV) block was detected in 1 (2.6%) patients, which was significantly less than in the comparison group ($p=0.002$). In 2 (5%) of pregnant women recorded sinoatrial (SA) block. No significant differences in the incidence of conduction disorders with a comparison group were observed ($p> 0.05$). All cases of CA-blockade in both groups were represented by the SA-2 blockade degree type 1 AV block - degree AV block 1 were recorded right bundle branch block (BPNPG) and signs of the syndrome a shortened interval PQ. In a comparison group of women took place only BPNPG. Full BPNPG recorded significantly more often in women in the third trimester of pregnancy than in the comparison group: 1 (2.6%) and 4 (10.5%), respectively ($p=0.02$). Incomplete BPNPG observed in the group of pregnant women in 8 (21%) in the comparison group in 8 (28%), women ($p> 0.05$). In 4% of pregnant women in the 12 standard ECG leads were registered signs of the syndrome a shortened interval PQ. In the comparison group, this arrhythmia was not recorded. According to the 24-hour ECG HM pregnant women significantly more than in the comparison group recorded SVE: 31 (81%) and 4 (15%), respectively but ($p < 0.005$). In the group of pregnant women, mostly supraventricular arrhythmias are rare. Frequent SVE occurred in 9% of the group SVE were recorded in 6% of all cases of cardiac arrhythmias. In a comparison group of women took place

only a rare supraventricular arrhythmias (100%). In the group of pregnant PVCs were significantly more likely than the comparison group: 20 (54%) and 4 (15%), respectively ($p < 0.005$).

Conclusion: Thus, women of pregnancy, according to the resting ECG in 12 standard leads identified the following violations conductivity heart: BPNPG, signs of the syndrome a shortened interval PQ. Full BPNPG recorded significantly more frequently in pregnant women than in the comparison group. In pregnant women, according to a 24-hour ECG HM, identified the following cardiac arrhythmias: extrasystoles, the ISI, the atrial rhythm. Beats MBP were significantly more common in pregnant women than in women of the comparison group

EFFECTS OF ROSUVASTATIN AND SIMVASTATIN ON LIPID SPECTRUM IN PATIENTS WITH METABOLIC SYNDROME

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Objective — The purpose of this study was to examine the effects of statin therapy on lipoprotein particle concentrations in patients with the metabolic syndrome

Research Design And Methods — Patients with dyslipidemia and the metabolic syndrome ($n=15$) were randomly assigned in a double-blind study comparing 10 mg rosuvastatin (RSV), 10 mg simvastatin, or placebo daily for 6 weeks. From weeks 6 to 12, patients in the RSV and placebo groups received 20 mg RSV, whereas the STV group increased their dose to 20 mg daily. LDL cholesterol, and other lipoproteins were measured by immunoenzyme methods, 6 weeks, and 12 weeks. Lipoprotein levels were compared by analysis of covariance.

Results — LDL-C was reduced significantly more in patients receiving rosuvastatin 10 mg when compared with those receiving simvastatin 10 mg at 6 weeks (41.7 vs. 31.2%, $P < 0.001$). Significant LDL-C reductions were also observed in patients receiving rosuvastatin when compared with those receiving atorvastatin at 12 weeks (48.9 vs. 40.1%, $P < 0.001$).

Conclusions — At equivalent doses, rosuvastatin had a significantly greater effect than simvastatin in lowering LDL-C and improving the lipid in patients with the metabolic syndrome.

CLINICAL FEATURES OF THE PATIENTS WITH OPIUM ADDICTION IN THE FORM OF SOCIAL MALADJUSTMENT

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Method of the investigation: -clinical-catamnestic method;
- experimental-psychological (test-surveys: “recalling ten words” test, Leonhard - Schmischeck survey, MMSE survey);
-statistical method.

Materials of the investigation. Research object includes patients with opium addiction (61 male patients) who recovered in Municipal Narcology Dispensary during 2012-2014.

First group: socially maladjusted patients with opium addiction.

Second group: socially adapted patients with opium addiction.

Conclusion. Features of the socially maladjusted patients with opium addiction: brisk development of the disease, acutely experiencing abstinence syndrome and its obviousness ($p < 0.05$), shortness of the remitting period ($p < 0.001$), high rate of proneness to the mental and narcological diseases, early consumption of opium narcotics, mental and cognitive impairment due to narcotization, acuteness of premorbid functioning in the excitable, demonstrative, concerning form.

As we research social factors with opium-addicted patients, we can observe that majority of them are spiritually poor, children of single-parent family, also they are deviants which means they refuse to obey school rules and this leads to delinquency which can be described by drinking alcohol, smoking, and leaving homes. This group of patients includes people with secondary and specialized secondary education. Majority of them are jobless or have little income. Most of the patients do not continue working during the remission period. If we look at their marital status, we can notice that they are divorced or have never been married even after 35s.

As criminogenic potential includes features above, it can be observed that socially maladjusted patients have low and middle rehabilitation potential, while socially adapted patients have high and middle rehabilitation potential.

ASSESSING THE IMPACT OF THE POLYMORPHIC MARKER GENE PLASMINOGEN ACTIVATOR INHIBITOR TYPE 1 ON COAGULATION BALANCE IN PATIENTS WITH CORONARY HEART DISEASE

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Objective. To study the incidence of genotypes of polymorphic marker 4G (-675) 5G gene activator inhibitor type plasminogen I (PAI- 1) and their impact on key indicators of the balance of coagulation in patients with stable angina (SA).

Materials and Methods. The study included 29 men , aged $54,6 \pm 3,05$ years ,with angina pectoris FC II-III , were treated in the I- Cardiology department of the Tashkent Medical Academy. The control group consisted of 22 healthy people of Uzbek nationality , do not have heart disease , by sex and age group comparable to the examinees. All respondents were administered a set of clinical and laboratory research, in particular the analysis of the main indicators of coagulogram. The material for the detection of polymorphic genes in this study served as the venous blood from the cubital vein of 3 ml . DNA analysis for the gene PAI-I (4G/5G) and carried by the multiplex standard PCR thermal cycler and CG - 1-96 «Corbett Research» (Australia) and 2720 «Applied Biosystem» (USA), using kits of " Geno Technology " , according to the manufacturer's instructions . Patients included in the study, received an identical basic treatment (b- blockers, antiaggregants - aspirin)

Results. Based on the analysis of the main indicators of coagulogram, SA patients were divided into 2 groups. The 1 group consisted of 15 (51.7 %) patients with normal levels prothrombin index (PI), prothrombin time (PT) and fibrinogen , which averaged $93,68 \pm 2,28\%$, $9,6 \pm 0,74$ sec and 3.42 ± 1.03 g/l , respectively. The 2 group consisted of 14 (48.3%) patients with a shift of hemostasis toward hypercoagulability state , with average values of PI - $105,68 \pm 2,16\%$, the PT - $8,1 \pm 0,74$ seconds , and fibrinogen - $4,58 \pm 1.03$ g / l. According to the given results, among patients examined ischemic heart disease (IHD) and healthy donors polymorphism 4G/5G rs1799768

was detected in 75.8%(22/29) and 68.2 %(15/22) cases, respectively. In the study, between groups of patients with polymorph markers 4G(-675) 5G PAI-1 gene , noted the difference in distribution frequency alleles and genotypes of rs1799768. In the first group of 11 in 3(27.3%) patients - 4G/4G, in 5(45.4%) - 4G/5G and in 3(27,3 %) - 5G/5G , indicating a statistically significant difference frequency of occurrence of these genotypes ($p=0.5$). In patients with adherence to hypercoagulability of 12 in 2(16.6 %) patients with the 4G/4G,in 7 (58.3%) with the 4G/5G and in 3 (25.1%) with 5G/5G genotypes. Revealed is authentically high occurrence rate of heterozygotes 4G/5G in 2 group. The frequencies of genotypes of rs1799768 control group consisted of: 20,1% (4G/4G), 53,3% (4G/5G) and 26,6% (5G/5G), that indicates relatively high frequency prevalence of this gene in Uzbek population.

Conclusion. Thus, the frequent occurrence of polymorphic marker PAI-1 gene, especially heterozygous genotype 5G> 4G associated with adherence to the hyper coagulation in patient with SA, which in turn increases the risk of thrombosis. The results of this study provide the basis for improved methods of diagnosis and prognosis of early manifestation of coronary heart disease in the absence of atherosclerotic lesions of the coronary vessels in young men.

CARDIOVASCULAR RISK AT PATIENTS WITH GOUT

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During the last years the problem of gout is actively discussed throughout the world. It is known that the disease is an important component of the metabolic syndrome and risk factor for cardiovascular disease (Roddy E. et al., 2007; Barskova V.G., Eliseev M.C., Denisov I.S. et al., 2012). Interrelation of hyperuricemia with hypertension, diabetes, obesity and atherosclerosis, caused by cardiovascular diseases, was proved (Ilyina E.V., Barskova V.G., Nasonov E.L., 2009; Juraschek S.P., Miller E.R., Gelber A.C., 2013). It was found that the vast majority of patients with gout (2/3) die from cardiovascular disease associated with atherosclerosis (Abbott K.C. et al., 2005; Thanassoulis G. et al., 2010).

Objective. To study the cardiovascular risk of cardiovascular disease at patients with gout.

Subjects and methods. 20 patients with gout, diagnosed on the basis of the classification criteria of S.L. Wallace, recommended by the ARA (2001) and European League of Rheumatology (2006) were surveyed. The average age of patients - $55,6 \pm 0,74$ years, the duration of the disease - $5,45 \pm 0,69$ years. Determination of the overall risk of cardiovascular disease at patients with gout was conducted on the scale of SCORE (2007). Total coronary risk was assessed as follows: <1% - low risk, up to 5% - moderate risk, and 10% - a high risk, more than 10% - an extremely high risk. At patients with gout were taken into account the following parameters: age, sex, smoking, systolic blood pressure, blood levels of total cholesterol.

Results and discussion. Men among patients with gout was 15 (75%), women - 5 (25%). The average age of male patients with gout was - $57,8 \pm 0,64$, the average age of women - $54,4 \pm 0,81$ years. The level of systolic blood pressure at patients with gout was $150,5 \pm 0,75$ mm Hg and total cholesterol - $5,676 \pm 0.87$ mmol / L, serum uric acid - 489.6 ± 0.58 mmol / l. Among the patients with gout 30% smoked. Moderate risk of developing cardiovascular disease by SCORE scale was detected at 8 (40%) patients with gout, high risk - at 12 patients (60%).

Conclusion. Among patients with gout prevail men (75%), $p < 0,05$. High CWR (over

5%) on the scale Score detected in the great majority of patients with gout (60%). Among the risk factors at patients with gout most common are arterial hypertension (55%), dyslipidemia (60%), hypercholesterolemia (80%).

URBANIZATION IS TAKING PLACE IN EVERY CORNER OF THE WORLD: A STUDY OF IMPACT ON PEOPLE`S PSYCHOLOGY

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The aim was to explore the attitude of citizens on problem with mental health because of urbanization, including their methods of fighting with negative outcomes of urbanization.

Objectives of research: investigate the negative impact of urbanization on the mental health of people; find some benefits of urbanization for psyche; alarm readers from negative impact of urbanization; explain some ways to avoid negative impact.

Methods were intended to check each other in order to give in research reliable information. 1. Collecting secondary data using only reliable sources. 2. Making a survey. The age of people was ranged from 12 to 70 years. 91 questionnaires were found appropriate to make the survey. 3. Making an interview with psychologist Oraztayeva Karlygash Asilbekkyzy. Questions were based on the taking information of methods of fighting with negative impact. Because she has the experience of 20 year in the direction of the interaction of the external environment with a man.

Mental health or psychology is a person's emotional and psychological state (What is the mental health?). The scientist found that urbanization has both impacts on the mental health. Negative: 1) catchy advertisement has a really huge negative impact on psychological form of people (Okuneva); 2) people, who live in regions, full of noises, mostly have the misbalance of the sleeping (The Department of public health protection in Kemerovo); 3) in urban areas the rate of alcohol addiction people is higher than in rural areas (Srivastava).

To protect ourselves from this influence, researches from Russia and WHO organization recommend to us to do those actions: to do sports, to make appropriate atmosphere in home, and to go to psychologist.

However, the studies, which were made by Kareva, the leading sociologist, were shown that results: people feel more confident in urban areas and satisfaction of life is higher than in rural areas. (Tellnes).

Results of survey: 69 people are under 30 years, 11% interviewees moved from the village. 36 people found that urbanization increases the satisfaction level of life, 61 – gives the opportunity to develop. pressing greyness of the city and constant nervousness were marked as the most common negative outcomes of urbanization. However, majority of interviewee (56) do not fight with negative impact.

Psychologist suggested actions that people can make in order to protect themselves from the aggressive environment of urban areas: 1) To learn how to care about yourself making proper rest. For example sometimes be lazy, when you want to. 2) Accept the fact that you have not to do something for someone, so the only reason for giving the help for someone is your desire. 3) Accept the fact that nobody has

to do something for you.

The conclusion of research about has clearly shown that urbanization has impact on every part of the world, including Kazakhstan. However, we cannot say that urbanization have to have only negative or positive impact on humanity, because every problem has both sides. There are significant implications of being surrounded by city on a person's psyche: pressing greyness of the city, which includes limiting people's personal space, can lead to depression and aggravation; constant anxiety because of the fast rhythm of the city. Nobody can make an ideal atmosphere for their happy living, therefore everyone should be aware of some possible steps in order to save themselves from mental diseases: 1) care about your mental health; 2) do not have huge expectations from surrounding you people. However, people found that urbanization gives the opportunity to develop you, making the conditions for better living.

FACTORS DETERMINING THE PARAMETERS OF CARDIORESPIRATORY MONITORING IN PATIENTS WITH TYPE 2 DIABETES MELLITUS AND ARTERIAL HYPERTENSION OF 1-2 DEGREES

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The purpose of the study. To determine the level of correlation in interface between index of cardio-respiratory monitoring and anthropometric data, the level of office systolic (SBP) and diastolic (DBP) blood pressure, glycated hemoglobin (HbA1C) and blood glucose in patients with diabetes mellitus (DM) and arterial hypertension (AH) .

Methods of research. A total of 32 people suffering from type 2 diabetes combined with hypertension grade 1-2: 12 women and 20 men. The median age was 55.9 ± 8.8 years, body mass index (BMI) 36.7 ± 7.1 kg/m², the level of office SBP 147.5 (140; 160) and DBP 90(80,95) mm Hg .st. Duration of diabetes ranged from 3 to 20 years (mean 7.0(4.0;13.0) years), history of hypertension was 12.2 ± 5.8 years. Indicators HbA1C and fasting glycemia venous blood was determined on the unit OLYMPUS 4000 (Japan). The criterion for inclusion of patients in the study was the level of HbA1C > 7,0%. Assessment of respiratory disorders during sleep was carried out using the apparatus for cardiorespiratory monitoring (MRC) SOMNOcheck2 (Weinmann, Germany). Specifies the number of apneas/hypopneas per night, the index of apnea/hypopnea per hour of sleep (AHI), total and average duration of episodes of apnea/hypopnea, average and minimum oxygen saturation (CrSpO₂, minSpO₂). In a normal distribution data are presented as $M \pm SD$, the asymmetric - Me (Q 25%; Q75%). To investigate the relationship between quantitative traits used Spearman rank correlation coefficient (R).

Results: In the studied group of patients fasting glucose was 10.1(8.0;13.0) mmol/L, the level of HbA1C - $9.4 \pm 1.6\%$. The number of episodes of apnea/hypopnea index was 96(46; 178), Nd - 15.0 (6.0; 30.4) episodes per hour CrSpO₂ - 94,9 (92,8; 96,6)%, min SpO₂ - 80 0 (73.0; 84.0)%. A significant negative correlation between the level of HbA1C and SrSpO₂ (R = -0,33, p <0.05); minSpO₂ (R = -0,35, p <0.05). It is interesting to note that the severity of nocturnal hypoxia reflected at the level of fasting glycemia. MinSpO₂ index was negatively correlated with the level of blood glucose in the morning (R = -0,28, p <0.05). There was a statistically significant relationship between BMI and the number of apnea events per night (R = 0,44, p <0,01), the total duration of ep-

isodes of apnea/hypopnea ($R = 0,38, p < 0,01$). Values office SBP and DBP were positively correlated with the level of AHI ($R = 0,33, p < 0,05$ and $R = 0,35, p < 0,01$, respectively) and negatively - with MinSpO₂ ($R = - 0,28, p < 0,05$ and $R = -0,39, p < 0,01$, respectively). No significant relationship between performance and the experience of ASO diabetes, hypertension has not been revealed.

Conclusion. In patients with type 2 diabetes and hypertension of 1-2 degrees according to cardio respiratory monitoring the increase in the number and duration of episodes of apnea/hypopnea and reduced the minimum and average oxygen levels are associated with an increase in BMI, blood pressure, negatively reflected on carbohydrate metabolism.

HYALURONIC ACID (HI-FLEX) IN THE TREATMENT OF OSTEOARTHRITIS OF THE KNEE

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Objective. We examined the efficacy, safety and patient satisfaction of intra-articular hyaluronic acid (HA) in patients with osteoarthritis of the knee.

Materials and methods. One hundred patients with mild to moderate osteoarthritis of the knee entered a randomized blind-observer trial of 6 months HA vs placebo. Primary efficacy criteria were pain on walking and measured with a visual analogue scale.

Results. For pain on walking, a significant difference in favour of HA was found for completed patients at week 3, the end of the course of injections, and at month 6, the end of the study ($P = 0.0087$ and $P = 0.0049$, respectively). Further analysis using the Last Observation Carried Forward (LOCF) also showed a significant benefit favouring HA at month 6 ($P = 0.0010$). Patients' global assessment of efficacy favoured HA at month 6 ($P = 0.012$). Improvement in other secondary criteria was generally superior in the HA group compared to placebo both at week 3 and month 6. Adverse events, mainly local injection site reactions, occurred in both groups with equal frequency.

Conclusion. The study demonstrated that three weekly intra-articular injections of sodium hyaluronate (Hi-Flex) were superior to placebo and well tolerated in patients with osteoarthritis of the knee with a symptomatic benefit which persisted for 6 months.

RESULTS OF THE ALFLUTOP INJECTION OSTEOARTHRITIS (OA) OF THE KNEE IN REPUBLIC RHEUMATOLOGY CENTER OF UZBEKISTAN

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Objective. To study clinical effectiveness and tolerance of alfutop in patients with osteoarthrosis (OA) of the knee joints (KJ).

Materials and methods. A 4-month trial of effectiveness and tolerance of alfutop has been performed in the Republic Rheumatology Center of Uzbekistan included outpatients (males and females) with KJ OA satisfying the OA diagnostic criteria of the American Rheumatology College, having X-ray stage I-III according to Kellgren-Lawrence with manifest pain, a total functional Leiken index from 4 to 11, regular intake of non-steroid antiinflammatory drugs (NAID) for 30 days in the last 3 months. Consent was obtained from each patient. 52 patients received alfutop. Alfutop injection was given intramuscularly for 3 weeks in a dose of 10 mg/day. The patients continued

on NAID. The patients' examination was performed in the beginning of the study, at its months 2 and 4.

Results. Leken index in KJ OA significantly fell after 3 weeks of alfutop injection treatment. Up to month 4, it fell still further ($p < 0.05$). After 4 months of treatment pain syndrome relieved both at rest and movement, pain at rest disappeared fully in 57% of KJ OA patients, for movement pain it was 17%. During the treatment NAID intake was less required in those patients ($p < 0.05$) while 55% of patients could discontinue NAID after 4 months of the treatment. Tolerance of the drug was rather good, side effects were mild.

Conclusion. Alfutop (chondroitin sulphate) is an effective drug for treatment of KJ OA: it relieves pain, preserves and improves articular function, allows reducing or discontinuing NAID, is well tolerated.

THE FUNCTIONAL STATE OF THE CARDIOVASCULAR SYSTEM OF ATHLETES WITH DIFFERENT SPECIFICITY OF MUSCLE ACTIVITY

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Purpose and objectives of the study. The purpose of this study Studying of influence of dynamic and isometric exercise on hemodynamics athletes. To achieve the goal it was necessary to solve the following aims:

1. To study the state of health and physical performance indices of athletes training process and the type of motor mode.
2. To study the morphological and functional features of heart athletes depending on the focus of the training process and the regime of motor activity.
3. Compare echocardiographic and electrocardiographic research methods in order to identify their information in the diagnosis of myocardial hypertrophy.

Materials and methods. The study involved 56 athletes - athletes, representatives of different martial arts and basketball players - ages 16 to 25 years (mean age - $19,1 \pm 3,2$ years). Experience sport was $12,3 \pm 2,9$ years (from 6 to 13 years). Surveyed had high and average level of sportsmanship (not less than 2, 1 category and candidates for master of sports). As a result of in-depth medical examination of all athletes were assigned to the 1st and 2nd groups of health. ECG was performed in the dynamics in the morning from 8 to 10 hours at different times of the annual cycle, according to the standard procedure for 6-channel device company DIXION;

- To evaluate the myocardial hypertrophy of the left and right ventricles of the heart, we used the 12 most informative criteria of the proposed N.D.Graevskoy and V.G.Semikolennyh (1980). At the same time we felt severe hypertrophy, if proved positive at the same time more than four criteria analyzed; 3-4 -with moderate symptoms; uncertain - the presence of the unit (1-2) among the studied criteria.

- Test with a submaximal load PWC-170 in the modification V.L.Karpmana (on bicycle Finnish company "Tunturi"). Evaluation of the reaction of the cardiovascular system on trial conducted both quantitative and qualitative indicators (based on the ratio shifts in heart rate (HR) and blood pressure (LD) and speed recovery [Letunov SP, 1951; Karpman B. L. et al., 1974; Dembo AG, 1980, and others.]).

Results. Led to a better understanding of the adaptation of the heart to the combined effect of large physical and psychological stress on the human body;

- Identify the causes affecting the health of athletes and contributed to the develop-

ment of practical recommendations for maintaining and improving their health;

- Revealed a particular state of health, physical capacity, functional state of the cardiovascular system of athletes depending on the mode of motor activity, orientation training process and the dynamics of learning, which is important not only for the theory of sports medicine, but also for improving the organization and content of the training process in sports university.

Conclusion: • Specificity of training process leads to the formation of a certain type of "athlete's heart".

• In accordance with the increase of motor activity athletes i.e. increasing training load, and increases the functionality of the heart.

• expediency adaptive response of the heart to increased physical activity should be considered as a moderate dilatation and hypertrophy.

OLIGOMERIC ENDOGENOUS EPIDERMAL GROWTH FACTOR RECEPTOR LIGANDS IN MEDIATING CORNEAL EPIDERMAL HOMEOSTASIS

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Background And Objectives. Maintenance of this multilayered corneal tissue is imperative for proper vision; perturbation of corneal integrity is the second leading cause of blindness worldwide. The aim of this study was to provide a comprehensive study of the biological role and therapeutic potential of six endogenous epidermal growth factor receptor (EGFR) ligands in corneal epithelial homeostasis. This work provides a comprehensive examination of 22 EGFR ligands, using both in vitro and in vivo assays. This study identified BTC as the most efficacious mediator of in vitro corneal wound healing.

Methods. Cell Culture. Human telomerase-immortalized corneal epithelial cells (hTCEpi) were obtained from Geron Corp. (Menlo Park, CA, USA) and described previously. Cells were maintained in growth media (Defined Keratinocyte Media with growth supplement; Life Technologies Corp., Grand Island, NY, USA) containing 100 U/mL penicillin and 100 U/mL streptomycin at 37°C in 5% CO₂. Human corneal epithelial cells (HCECs) were cultured, as previously described, from corneas that were unusable for transplantation (Oklahoma Lion's Eye Banks). Cells were plated on fibronectin plus laminin (AthenaES, Baltimore, MD, USA)-coated tissue culture dishes and maintained in growth media at 37°C in 5% CO₂. Use of human tissue adhered to the tenets of the Declaration of Helsinki. Oligomeric ligands were separated from primary by biochemical assay consistent to prior immune healing of samples maintained in growth media at 42°C in 6,5% CO₂. Kinetic analysis and dose response curves were performed by using in vitro and in vivo wound-healing assays. Biochemical assays were used to determine receptor expression and activity. Human tears were collected and quantitatively analyzed by multianalyte profiling for endogenous EGFR ligands.

Results. Epidermal growth factor receptor ligands improved wound closure and activated EGFR, but betacellulin (BTC) was the most efficacious promoter of wound healing in vitro. In contrast, only epidermal growth factor (EGF) promoted wound healing in vivo. Human tears from 25 healthy individuals showed EGFR ligands at these average concentrations: primary EGF at 2053±312.4 pg/mL, BTC at 207±39.4 pg/mL, hepa-

rin-binding EGF at 44 ± 5.8 pg/mL, amphiregulin for both oligomeric and primary ligand at 509 ± 28.8 pg/mL, transforming growth factor- α at 84 ± 19 pg/mL, and epiregulin at 52 ± 15 pg/mL, oligomeric EGF at 2123 ± 4321 pg/mL, BTC at $153,6 \pm 74.8$ pg/mL, heparin-binding oligomeric EGF at $11,7 \pm 2.34$ pg/mL, oligomeric egfr binding transforming growth factor- α at $56,7 \pm 7,1$ pg/mL.

Conclusions. Only oligomeric EGF was resistantly present at concentrations near the ligand's Kd for the receptor, indicating it is the primary mediator of corneal epithelial homeostasis. Other primary monoclonal ligands were present but at concentrations 11- to 8200-fold less their Kd, preventing significant ligand binding. Further, the high levels of oligomeric EGF but not predicted binding preclude receptor occupancy by exogenous ligand. Therefore, therapeutic use of primary EGFR ligands may be unpredictable and impractica, whereas the olgimoeric is within the practical benefit.

THE FEATURES OF A CURRENT VERTEBRAL CRANIOCERVIKALGIA IN YOUNG PEOPLE

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Objective. To investigate the clinical and neurological features of cervical degenerative disc disease (cervical osteochondrosis) in young people.

Methods: analysis of clinical and neurological examination, in addition to MRI of the cervical spine.

Results. We conducted observation 30 patients with pain in the neck (17 women and 13 men) ,aged 17-42 years. At the same time, the average age of patients were $22,3 \pm 2,2$ years. All patients have osteochondrosis of the cervical spine. These diagnoses were verified on MRI screening. Neck pain was detected in 30 (100%), tension of the neck muscles in 23 (83.3%,) of patients during the examination and the percentages of patients with cervical migraine accounted for 19 % (63.3%) when neck pain resulted in a headache.

In these cases headache with compressive character, later turning into a pulsating. Special attention should attend to the patients who have dizziness, nausea, sometimes with vomiting, tinnitus 57%. They mainly occurred in patients with significant structural changes of the cervical spine with hernias of disks. At the same time, we observed a drop attack, as a sudden fall without loss of consciousness, with sharp turns of the head in one patient. Impaired of coordination is revealed in another patient when change the position of the head suddenly. During the examination of nevrostatus dispersed neurological symptoms, such as anizorefleksia, the precariousness, loss of coordination were prevailed. Analysing result of the magnetic resonance tomography showed that the presence of changes in 100% cases. Moreover, during the examination, 57% of patients were identified pathological twist of the vertebral artery, in two cases was bend at an acute angle, which leads to disruption of cerebral hemodynamics.

Conclusions. The clinical and neurological symptoms of cervical osteochondrosis are not depend on the age of patients, but depends on the depth of the structural changes of the cervical spine and develop against this background pathological deformation of cerebral vessels, mainly vertebral arteries.

COMPARATIVE ASSESSMENT OF EFFICIENCY OF PALLADA IN THE TREATMENT OF ALLERGIC CONJUNCTIVITIS

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Relevance. Allergic conjunctivitis occurs due to the increased, genetic sensitivity of organism to different allergens, conjunctivitis is the most frequent localization of allergic reaction from the organ of vision, consisting to 90% of all allergozes; rarely it is met the allergic blepharitis, eyelids' dermatitis, more rarely – allergic keratitis, iritis, uveitis, retinit, neuritis. Widespread implementation in ophthalmologic practice of the new medicaments that have the expressed antihistaminic effects allowed to improve quality of treatment of patients with allergic diseases of eyes and to prevent complications.

Purpose: the assessment of clinical efficiency of the native medicament Pallada "WM" in complex treatment of allergic conjunctivitis.

Materials and methods. Under our supervision there were 20 patients (40 eyes). Patients were divided into two uniform groups: The I group (control) - 10 patients (20 eyes) received complex therapy with application of Lecrolin (10 ml). Patients of the II group (basic) – 10 patients (20 eyes) were administered the combined treatment which included instillation of Pallada "WM" (0,1%-5 ml eye drops, "World Medicine") by 2 drops 3 times per day.

Results. Disappearance of symptoms of a disease in the basic group of patients happened on average 1,5 times quicker, than in control group. The reduction of hyperemia of eyes was noted in all patients. The reduction of the above symptom was observed for the 5-6th days of treatment among patients of the basic group, in control group - for the 7-8th days. The feeling of sand in the eye connected with conjunctival edema was disappeared in patients of the basic group on the 5-8th days, in control group - for the 8-10th days. The feeling of an itching and lacrimation at the majority of patients of the basic group have disappeared by 7-8th days, these symptoms relieved in control group by 10-12th days, respectively.

Conclusions. The obtained data evidences about high efficiency of Pallada-WM, at application of this medicament symptoms of inflammation in eyes considerably decrease.

KIDNEY DAMAGE IN PATIENTS WITH PSORIATIC ARTHRITIS

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Purpose of the study. To study clinical and laboratory changes in kidney patients with psoriatic arthritis (PA)

Materials and methods. The study included 60 patients. The age of patients ranged from 22 to 60 years. All patients underwent clinical and laboratory study: functional position of kidney, general analysis of blood, Zimnitsks, Rebergs, the levels of creotins and urinary.

Results. Kidney disease was diagnosed in 25 (41,7 %) patients. Nephropathy is directly related to the underlying disease, was detected in 18 (30.0 %) patients, including chronic glomerulonephritis set at 10 and renal amyloidosis at 6. 2 patients failed to verify the nature of kidney damage. Among patients with psoriatic nephropathy dominated by men (17). Renal disease is seen in patients with other systemic manifestations of the PA, including the pronounced trophic disorders (in 9) weeks long fever (in

5), lymphadenopathy (in 2), heart disease (in 6) and liver (in 3). Urinary syndrome characterized by transient proteinuria and hematuria small (for 19 people), a significant and persistent hematuria (red blood cells to 30-40-50 in sight with episodes of gross hematuria) at extremely low values of proteinuria (in 5), regularly or occasionally high proteinuria above 3g/day (from 5). Extrarenal symptoms was presented persistent edema (at 4), hypertension (at 5). Nephritic syndrome is set in 12 patients. Reducing the concentration ability of the kidneys was observed in 17 patients, and detailed picture of chronic renal failure in 5. Appearances bladder syndrome is usually observed at the beginning of the PA, in exacerbations of joint syndrome with generalization process or the development of an advanced stage of dermatosis. In some cases, slight proteinuria and hematuria accompanied by acute syndromes main PA for many years without any increase of kidney damage and the development of azotemia. Renal amyloidosis accompanied by nephritic syndrome with the characteristics. Daily protein loss reached 6-8g and the amount of protein in a disposable examination of urine - 10,5g/l. The total protein content in the serum was reduced to 49g/l. Changes in urine, except for proteinuria, characterized micro hematuria (for 5 people), small leukocytes (in 6), tsilinduriy to granular and waxy.

Conclusion. Patients PA in 41,7 % cases accompanied variety of urinary syndrome kidney. These points to the need for immediate diagnosis and correction of renal dysfunction, for chronic renal impairment may adversely affect the prognosis of the disease

EVALUATION OF THE CONDITION OF THE VASCULAR – THROMBOCYTIC HEMOSTASIS SYSTEM IN THE PATIENTS WITH CIRRHOSIS OF THE LIVER

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Liver plays central role the maintenance of hemostasis since most coagulation factor, an anticoagulant proteins, parts of the system and fibrinolysis stimulators of thrombopoiesis hepatocytes are synthesized. Besides, the reticuloendothelial system of the liver is clearance of the active forms of haemostatic factors. Changes of the function of the liver with acute chronic diseases initiate a variance haemostatic predispose to manifestation of haemorrhage or thrombosis.

The aim of the research. Evaluation of the condition of the vascular thrombocytic system in hemostasis with cirrhosis of the liver.

Materials and the methods of research: under our observation was found 25 patients with cirrhosis of the liver period in 2013-2015. 15 quitly healthy livers pathology without control group. middle age of patients with cirrhosis of the liver was $36,51 \pm 1,05$ years. the diagnosis of cirrhosis liver was set on a classification on the basis of diagnostic criteria. For the state of evaluating vascular thrombocytic hemostasis system has produced the definition quantity of platelets morphology of platelets in the blood analysis the adhesion aggregation of the thrombocytes time of retraction. The plan of the laboratory analysis were included also deployed blood and urine analysis sophisticated biochemical tests.

Results of the research: probing the vascular thrombocytic component of hemostasis showed that in patients on the lower states of the adhesively aggregative properties of platelets. Especially that clearly showed hemolysate aggregative test in second breeding the reaction in the form of a permanent suspension of the ability

of aggregative platelets are exposed to the subthreshold unit of the universal induc- tor aggregation of so the time of aggregation got promoted and made it $38,44 \pm 0,87$ plo- gged, whereas in the control that certain rates $29,27 \pm 0,97$. But like that to a lesser degree floated off the aggregative properties of platelets was watched in the first of the breeding hemolysate aggregative test. Marked by a significant decrease of the ag- gregation of platelets discovered 14 patients and for the rest of the time aggregation of platelets are within normal values. The study of the time of the retraction of plate- lets showed that initial signs were elevated that characteristically for state of hypoco- agulation. Has observed the increase of the time of retraction of the platelets before $0,46 \pm 0,02$ patients in control group $0,32 \pm 0,02$.

Conclusions: so the inspired by our study of the signs of vascular thrombocyti- cally component of the system hemostasis in patients with cirrhosis having a sub- stantial variance in the direction of hypo-coagulation shift showed the liver's aetiolo- gy of virus. It was appered by the limited thrombocytopenia aggregative and adhesive properties of platelets. Cirrhosis of the liver in class B and C according to child-pyu clinic-laboratoria characterised by the laboratory signs of acquired thrombocytopenia manifesting reduction in the feat aggregation and adhesion.

CYTOLOGICAL RED ANALYSIS OF THE BONE MORROW IN PATIENTS WITH CIRRHOSIS OF THE LIVER

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Cytological red analysis of the bone marrow transplant patients have with cirrho- sis of the liver. Many diseases are accompanied by a change in hemopoiesis in quanti- tative decrease of the cellular lines of hemopoiesis in different combinations. caused by different reasons .In this case the diverse symptomatology that creates problems in the diagnostic and which requires differentiated therapeutic technique looks like.

The aim of the research: to give the characteristic hemopoiesis increase of bone marrow have patients with cirrhosis of the liver.

Materials and methods the ways of the study. Imagine the research was lased on the date received in the observation and dynamic surveillance on 50 patient with cirrhosis of the liver Band C virus etiology in 2012-2014,;It was in the department of hematology TMA 1 clinic." The faces of female of 29(58%),21 male (42%) of patients with cirrhosis of the liver. Middle age of patients with cirrhosis liver virus was etiolo- gy 15.51 ± 3.05 years. The first group they made 25 patients with cirrhosis of the liv- er etiology of virus. They control group composed 15 patients who did not suffer the diseases of the liver and bile ducts with negative to the mark of hepatitis B and C. The total deployed blood and urine were included in the plan of lab workup, the comply of biochemical, total (content, ALT, AST, bilirubin, total protein) markers of hepatitis B and C, for investigating mielogram bone marrow get a puncture of spongy stones according the method of Arinkina with a needle Kassirskiy cytology analysis of bone marrow was spend in the department of hematology 1 TMA clinic.

The results of research. The deployed cytological analysis of red bone marrow to the account the number of cells in all of the sprouts hemopoieses. In the first group in red bone marrow expressed the oppression of the number of immature predecessors of red blood cells to 13.4% of the inder control was spotted in this case is reduced the

number of polychromatophil course and oxyphilous normoblasts. In the second group was spotted the decrease the number of immature predecessors of red blood cells to 15.6% of the index of control. In this case, it was followed by multiply 1.2-1.8 reduce the number of erythroblasts and pronormoblast basophilic normoblasts. It is said that the language of infabition ripening erythroid cells. Patients in the total number of neutrophilic granulocytes also decreased and down by 17.1% percent of normal signs. In this case it significantly reduced the number of stab nuclear and neutrophils sedimented nuclear that were appropriately down by 19.7% percent of normal number, with a relative increase in the number of myelocytes and metamielotsites, it should be noted that in this period, the quantitative signs of lymphocytes. Megakaryocyte, eosinophilic basophilic granulocytes authentic and would not be different from normal numbers. The analysis of the megakaryocytic amount of bone marrow appears in the prevailed mononuclear and inactive megakaryocyte that appears defeat of the thrombocytic number of more pronounced with cirrhosis of the virus etiology.

Conclusion: cirrhosis of the liver is the observation of erythroid, neythrofilic cells of bone marrow with the delay of the cells of differentiation. a pathology megakaryocytic number is appear by increase in the number of dormant and mononuclear megakaryocyte.

CORRELATION BETWEEN DEVIANT BEHAVIOR AND DYNAMICS OF PERSONALITY CHANGES IN PATIENTS WITH ALCOHOLISM

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The Aim. The aim was to study the correlation between deviant behavior and dynamics of personality changes in patients with alcoholism.

Materials and methods. 60 patients with alcohol addiction participated in the study. The average age of patients was $41,1 \pm 1,2$ years. The average duration of alcohol addiction was $6, 3 \pm 1$ years. The mental state of patients at admission and after clinical examination was qualified as personality and behavioural disorders due to brain disease, damage and dysfunction and personality and behavioural disorders due to mixed diseases (ICD-10). Clinical, psychopathological and statistical methods were used. In order to identify the aggressiveness and motivational tendencies of its suppression participants were investigated with Wagner's hand test. In order to identify the types of personality disorders participants were examined with a technique described by J. Oldchem and L. Morris.

Results of the study. Deviant behavior in premorbid was displayed in 34 patients (56,7%). The ratio of moderate affective disorders to severe ones in these patients was 32,0% to 68,0%. Personality traits that compensated patients mental state were gradually eliminated while new affective and behavioral abnormalities, deepening neurosis symptoms and moral degradation emerged. In opposite in patients with absence of deviant premorbid behavior were developed only personality changes that are specific solely to alcoholism. Finally, the ratio of moderate and severe affective disorders was approximately equal: 48,7% to 51,3%.

Conclusions. It is clear that the severity of alcohol deformation of the person is directly correlated with deviant behavior. This relationship is the most significant in patients with personality disorders. Aside from the emergence of new abnormalities (affective, behavioral abnormalities and moral degradation) in these patients were

revealed the elimination of personality traits that had previously contributed to the compensation of patients mental state and aggravation of those personality features which were responsible for social maladjustment.

EVALUATION OF EFFECTIVENESS OF LUTEIN INTAKE ON VISUAL FUNCTIONS OF MYOPIA PATIENTS

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Relevance. One of the current issues of ophthalmology and the entire scientific community is the treatment of myopia (Anton A. et al. 2009). Today, there are many drugs, so-called lutein complexes. Slezavit - active ingredients which are lutein and zeaxanthin located in the pigment epithelium layer, act as antioxidant protection, reduce the formation of lipofuscin granules and protect the underlying pigment epithelium and other tissue from the harmful spectrum of light (Landrum J. et. al. 2012, Wisniewska-Becker A. et. al. 2012).

Purpose. To study the influence of lutein and zeaxanthin intake on visual functions of myopia patients.

Materials and methods. The study involved 20 (40 eyes) patients with low to medium myopia degree aged 18 to 35 years. All patients were divided into two homogeneous groups according to the degree of myopia and the age of the patient. In the control group, 20 patients (40 eyes) received traditional treatment for 10 days. In the study group, 20 patients (40 eyes) took slezavit 1 capsule per day for one month additional to traditional treatment. Common ocular examinations were conducted research methods before treatment, 1 and 3 months after treatment, as well as electroretinography studies before and 1 month after treatment.

Results. The average visual acuity (AVA) in patients of two groups before treatment was $0,5 \pm 0,08$. In the control group of patients on 3 months of research visual acuity improved to $0,68 \pm 0,05$, that is 1.36 times higher than the initial numbers. In the main group figures for AVA increased up to $0,78 \pm 0,04$ and 1.56 times higher than the rates before treatment. α and β amplitude waves in general electroretinography control group before treatment was $32,05 \pm 3,21$ and $67,04 \pm 5,13$ (mV), respectively ($p < 0.05$) after treatment figures for α and β waves were $36,85 \pm 3,69$ and $77,09 \pm 5,23$ (mV) $p < 0.05$, amplitude of α and β waves in the main group before treatment were $31,43 \pm 3,15$ and $65,73 \pm 5,03$ (mV), respectively ($p < 0.05$) after treatment numbers of α and β waves became $41,11 \pm 3,34$ and $87,58 \pm 4,94$ (mV) ($p < 0.03$).

Conclusions. According to our results, inclusion of slezavit complex in the treatment of myopia has the effect of protecting from detrimental influence of light to retina, promotes prolongation of the main treatment and recovery of visual function of the eye.

EARLY CLINICAL MANIFESTATIONS OF NEUROLOGICAL SYNDROMES AT HIV- INFECTED PATIENTS

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Purpose. The aim of this study is to study neurological manifestations at HIV- infected patients.

Material and methods. We examined 82 HIV patients. Etiological factor is installed on the basis of the study liquor by PCR for the presence of DNA fragments of virus herpes 1, 2, 3 and 6 types, cytomegalovirus, the virus Epstein- Barr (VEB) and Toxoplasma. To confirm tuberculosis etiology of CNS have been used microscopic and microbiological laboratory methods.

Results. Under the supervision was 82 HIV patients with the defeat of the central nervous system, average age of which made up 35, $7 \pm 1,3$ years, among them was 45 (54,9%) men and 37 (45,1%) women. Etiological structure of infectious lesions of central nervous system in HIV- positive patients showed next results: virus Epstein- Barr accounted for 12,2%, HSV made up 1,2 - 19,5%, Mycobacterium tuberculosis (MT) was 14,6%, cytomegalovirus (CMV) reflected 17,1%, and 36,6% patient etiology remained unclear (UE). After detailed examination of patients was managed that the majority of patients (59,8%) noted a history of using injecting drugs, 12,2% of patients reported sexual way of HIV infection, and in 28% of cases of contamination of HIV infection has remained unknown. Clinical observations showed that the most frequent symptoms, such as reactive neurotic condition and asthenovegetative syndrome typically for the early stages of HIV infection. It is noted that there is a variety of disorders neurotic character at patients, as well as fatigue, which is found in 26 of cases (31,7%), distraction - in 17 (20,7%), forgetfulness - in 25 (30,5%), the deterioration of the mood - 45 (54,9%), narrowing of the range of the interests of - 22 (26,8%), sleep disorders - 36 (43,9%), a variety of phobias - 14 (17,1%), vegetative lability - 49 (59,8%). At the objective examination of patients was determined violation of the orientation at place, time and own personality of 26,8% to 43 9%. Moreover, there were observed higher integrative disorders as the form of reducing the memory in 20,7% of cases. Neuropathy is frequent complication of HIV infection, which may occur on any of its stage, even in the early stage of disease. According to the electrophysiological studies, neuropathy was observed in about 70% of HIV. Clinical manifestations of it is variously. It can take place like syndrome Guillain- Barre and manifest progressive muscle weakness, areflexion and minor violations of sensitivity in the early stages of HIV infection.

Conclusion. Analysis of our observations allows us to say that almost of HIV patients in the early stage have neurological complaints as the form of headaches, dizziness, weakness in the legs, confusion, numbness and pain in the limbs.

STRESS AND DOCTORS. OR HOW TO SURVIVE BY HELPING OTHERS?

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Work of the physician- socially significant and noble, for human health and life - the greatest value. The responsibility of the doctor for the health of his patients, a high rate of activity, a lot of "securities", which he has to fill every day - all this often leads to the development of occupational stress and emotional burnout (EB). The result - the doctors themselves are often "bouquet" of psychosomatic diseases. As a result, health deteriorates, falls mood, and some of the negative being shifted into a family where impairs interpersonal relationships with loved ones. Long-term stress leads to anxiety disorder or depression. The doctor is subject to particular stress, which can withstand not everyone.

Objective: to study features of psycho-emotional status and the identification of the formation of emotional burnout syndrome of physicians Tashkent Medical Academy.

Materials and Methods. We conducted a study and found that out of 100 respondents, more than 60 doctors in Tashkent Medical Academy are subject to stress. The study included a survey of doctors of different specialties and different age categories. Of them 60% - women, the average age of the physician was $46,34 \pm 8,40$ years and the experience of professional activity - $19,77 \pm 10,69$ years. Questions for the survey were drawn up on the basis of the facts of occurrence of stress condition and its symptoms.

Results. Comparative analysis of the level of anxiety group of doctors showed that before changing the prevalent low level of reactive anxiety - $67,8 \pm 8,8\%$ (moderate anxiety - $28,6 \pm 8,5\%$, the highest level of anxiety - $3,6 \pm 3,5\%$). After duty low level of situational anxiety was $50 \pm 9,4\%$, average - $46,4 \pm 9,4\%$, the highest - $3,6 \pm 3,5\%$. Analysis of the distribution of the degree of formation parameters phase syndrome EB indicates that 11.4% or approximately 7% of health care workers of the general sample formed the stage of "stress" and "exhaustion", respectively. The phase of "resistance" was formed in 34% of physicians. At the same time, 39% of physicians stage of "stress" and about a third of doctors phase of "exhaustion" are in the process of formation. Thus, when a high level of burnout economy emotion extends beyond the professional sphere with a feeling of dissatisfaction, and is, a loss of interest in the man - the subject of professional action, which is perceived as an inanimate object, an object for manipulation. When comparing the data analysis work discovered their connection indicators dissociative behavior and burnout. This behavior can be traced two strategies in adapting to stress factors: time limit interaction with the subject of professional activity to conserve emotional resources, as well as emotional and personal discharge from an emergency situation.

CLINICAL STUDY PSYCHO-EMOTIONAL STATE OF HYPOTHYROIDISM IN PATIENTS WITH BECK DEPRESSION INVENTORY (BDI) SCORES

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Objective. To study the clinical and psycho-emotional state of patients with hypothyroidism.

Materials and Methods. The patients were collected at the Department of Endocrinology 3rd clinics of Tashkent Medical Academy. The study included 17 women with hypothyroidism. Age surveyed had an average of $37,85 \pm 8,92$ years. Patients included in the study do not take replacement therapy with thyroid hormones. All patients were divided into 2 groups: group 1 included 9 patients with primary manifest hypothyroidism and the 2nd group of 8 patients with subclinical hypothyroidism. All patients had a test that assesses the level of depression using Beck's scale and conducted research analysis: thyroid hormone binding free T3, free T4 and TSH. Subjective BDI includes 21 points and is divided into 2 sub-scale - cognitive and somatic (8 and 13 points respectively). The questionnaire filled in by the patient alone for 10 minutes. Indicator Beck scale for each category is calculated as follows: each point scale scored from 0 to 3 in accordance with the increase in the severity of symptoms. The total score is from 0 to 62 and is reduced in accordance with the improvement of the condition.

Results. The first group of patients with manifest hypothyroidism were obtained

test results: TSH -11.38 (0,3-4,0mEd/L), free T4- 8,4 (10-20 pmol/L), free T3-2,82 (2.5-5.5 pmol/L), and a second group with subclinical hypothyroidism TSH -4.72 mU/L, free T4-12,55 pmol/L free T3-3,4 pmol/L. The results are based on the Beck Scale for patients with manifest hypothyroidism averaged 12,85 points, while in the group with subclinical hypothyroidism 7,2 points. Psychometric testing has revealed the presence of mild depression in 3 patients (14 points) with manifest hypothyroidism, which amounted to 33.3%, and the 1st patient (10 points) with subclinical hypothyroidism, which amounted to 12%. Thus, this study proves that an increase in serum TSH increased symptoms of depression.

Conclusion. In assessing the severity of depression in patients in treatment groups revealed that, the sum of scores on depression in patients with manifest hypothyroidism was significantly higher compared to the results of patients with subclinical hypothyroidism.

FEATURES OF TREATMENT OF PATIENTS WITH POST-STROKE DEPRESSION

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The purpose and objectives. Cerebral stroke is one of the major causes of death and disability in the world. Despite the fact that the main effects of stroke are movement disorders, acceded mood disorders have effect of a large extent on the progress of the underlying disease and can even be a determining factor in the recovery period. Thus, this issue requires a more in-depth study of the causes and consequences of the development of affective disorders after a cerebral stroke, as well as the possible development of protocols for the maintenance of early and late recovery period. The aim is to study the therapeutic effect of venlafaxine for a post-stroke depression and to determine the extent of its impact on the outcome of depression.

Materials and Methods. The analysis was performed in psychoneurological dispenser №2 of Tashkent city from December 2014 to March 2015. The study involved 38 patients after cerebral stroke and being on outpatient treatment with diagnosis of post-stroke depression. There were 24 (64%) women and 14 (36%) of men in the age limit from 42 to 78 years (mean age is 60 ± 5.2 years). The dynamics of the disease was evaluated during a patients visit in the mental hospital (once a week). The mental state was evaluated by a psychiatrist using the standard description. To assess the severity of depression there were used Beck Depression Inventory, Zung and Hamilton scales.

Results. All patients were divided into 2 groups - received venlafaxine as a therapy (20 people, 54%) and receiving amitriptyline (18 persons, 46%). At the end of the received treatment and conducted surveillance following results were obtained: in the first group of patients recovery occurred significantly faster than in the second group of patients (on average 2 weeks). The severity of depression scales was significantly different for patients receiving venlafaxine or amitriptyline. 2nd group of patients less often complained of somatic symptoms of depression associated in the form of insomnia, anxiety, memory loss and cognitive impairment. In patients of 1st group was marked a higher potential for rehabilitation than in patients of 2nd group.

Conclusion. Further studies of various aspects of post-stroke mental disorders can open new opportunities for more differentiated aid for patients suffered from a cerebral stroke, and it should allow to improve their quality of life and restore lost functions significantly.

NEUROLOGICAL SYMPTOMS OF CHRONIC GLOMERULONEPHRITIS (PATHOGENESIS, CLINICAL)

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Background. When kidney disease are various neuro-psychiatric disorders - the defeat of the peripheral nerves and the brain (encephalopathy and neuropathy), paralysis, uremic coma. The most common causes of neurological complications of renal origin - urolithiasis, chronic glomerulonephritis and pyelonephritis. The defeat of the nervous system in renal disease is caused mostly by intoxication. Decompensation of kidney function leads to insufficient purification of blood of toxins and, accordingly, accumulation of nitrogen in the blood, urea and its derivatives. Besides accumulation of toxic substances observed disruption absorption and excretion of electrolytes - potassium, calcium, magnesium and chlorine. Due to the redistribution of the concentration in the organism, change of blood pressure observed and liquor, which leads to increased vascular permeability. This in turn causes the development of edema of the brain and spinal cord, as well as the appearance of small bleeding into brain tissue. As a result of these pathological changes develop clinical symptoms, because of the emergence of toxic swelling and compression of his lumbar autonomic ganglia, may cause pain. The pain is localized in the kidney, with one side (renal colic) or symmetrically on both (nephritis); pain is permanent or paroxysmal in nature, not always dies down in a prone position and can spread to the inner thighs and groin crease. In addition, the appearance of pain in the abdomen, or even the heart, mimicking liver disease, stomach, pancreas, and angina. Generally, gastric and cardiac symptoms in these cases are combined with back pain, allowing suspected kidney disease. We must remember that renal failure can cause aggravation of lumbar degenerative disc disease with the development of sciatica and lumbago; respectively, developed a clinical picture of diseases. General intoxication causes the development of neurotic syndrome - irritability, temper, instability of mood and sleep disorders. In the future, these displays are replaced symptoms "exhaustion" - fatigue, distraction, excessive touchiness with tearfulness. All violations usually develop on the background of lower back pain, edema, micturition disorders. Total intoxication can also lead to the development of polyneuritis, which is characterized by the appearance of pain in various parts of the body, a burning sensation or numbness of the skin at various sites.

Aim. Given the above purpose of our study is to explore the neurological symptoms of chronic glomerulonephritis.

SYNDROME OF VEGETATIVE-SENSORY POLYNEUROPATHY IN RHEUMATOID ARTHRITIS

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Objective. To study the syndromes of disorders of the peripheral nervous system (PNS) in rheumatoid arthritis (RA).

Materials and methods. Was observed 15 patients with vegetative-sensory polyneuropathy (VSP) in RA, patients` age from 16 to 42 years old.

Results. Mean age 36.4. 10(66.6%) of them were women and 5 (33.4) were men. Women sick 2 times more often than men. RA polyarthritis was established in 12

(80%) patients, RA with visceral disorders in 3 (20%) patients. I degree of activity was detected in 4 (26,6%) patients, II degree - in 11 (73,4%) patients III degree in 1 (6.6%) patient, functional class (FC) I - in 3 (20%) patients, FC II - in 10 (66.8%) patients, FC III - in 2 (13.2%) patients. Presence of rheumatoid factor (RF): seropositive - in 8 (53.3%) patients, seronegative - in 7 (46.7) patients. Slow-progressive form was detected - in 13 (86.8%) patients, rapidly progressive form - in 2 (13.2%) patients.

In all patients with RA was defined syndrome of VSP, which was characterized by a paraparesis or tetraparesis in the distal parts of hands and feet, decrease or absence of tendon reflexes, hypotonia, atrophy of the intercostals muscles, tenor and hypothenar, muscles of the hands, feet, forearms, shins. Polyneuritis type of the hypoesthesia or anesthesia combined with symptoms of polyalgia. In some patients there has been a decline of musculoarticular feeling in the fingers and toes. Autonomic disorders manifested in the majority of patients by hyperhidrosis of the palms and feet, in some patients by dryness, thinning of the skin in the distal parts, by nail changes, pallor or acrocyanosis.

In patients with acute stage of RA with exudative manifestations and with a little disease duration was observed irritative effects of vegetative nervous system (VNS), while in patients with proliferative and fibrotic changes in the joints, and a long prescription of RA was observed decrease or loss of function of the VNS. On rheovasography (RVG) - hypotension with peripheral vascular dystonia with venous stasis in the upper and lower extremities.

Conclusion. Thus, RA is more common in women, characterized by an early defeat of the PNS and VNS with violation of peripheral hemodynamics (according to the RVG), which leads to peripheral neuropathy.

ASSESSMENT OF CLINICAL EFFICIENCY OF MEDOTILIN AT TREATMENT OF OCULAR ISCHEMIC SYNDROME

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Introduction. The ocular ischemic syndrome (OIS) is a set of symptoms of carotid and orbital arteries lesion of common genesis with combination of an ischemia of eye-ball layers. The pathology of eye vascular system is one of the leading reasons of the visual impaired, blindnesses and physical inabilities at people of various age groups.

The purpose. To assess clinical efficiency of medotilin in complex treatment of OIS.

Material and methods. The study involved 65 patients (93 eyes) with narrowing of carotid arteries accompanied with OIS. According to findings of duplex scanning of carotid arteries, narrowing of internal carotids (ICA) to 50 % was diagnosed at 45 (69,2 %) patients, whereas 15 (23,1 %) patients was observed up to 50 % of "kingking" type pathological narrowing. All patients were consulted by angioneurologist and operative treatment was not indicated. Average age of patients made up $62 \pm 1,2$. There was 40 men and 25 women. All patients were undergone common ophthalmological examinations, duplex scanning of carotid arteries and ophthalmologic dopplerography. Patients were divided into two homogeneous groups according to lesion of the blood flow in braxicephal arteries and to eye symptoms: control - 30 patients (50 eyes) who took traditional treatment (vasodilating medicine, anticoagulants, antiaggregants, osmotic diuretics, vasoactive preparations, nootrops) whilst study group included 35 patients (43 eyes) who along with traditional therapy received medotilin (on 4,0 ml once a day intravenous in 100 ml of 0,9 % physiological

solution) during 10 days.

Results and discussion. During the examination there was found: iris rubeosis at 24 (36,9 %) patients, at 9 (13,8 %) neovascular glaucoma, at 60 (92,3 %) patients were observed narrowing of arteries of the retina, at 62 (95,3 %) dilatation of veins of the retina, hemorrhages in the retina were observed at 31 (47,7 %) patients, neovascularization of the optic nerve - at 15 (23,1 %), a symptom of "a cherry stone" - at 5 (7,7 %), cotton wool spots - at 7 (10,7 %) and anterior ischemic optical neuropathy at 21 (32,3 %) patients. During the treatment considerable improvement of visual functions was observed in study group. On the fourth day visual acuity (VA) was improved to 0,08-0,2 and twice exceeded indicators of control group. Increase of VA more than 0,4 (that is high enough indicator) was occurred at 36,2 % of patients in study and 16,4 % of patients in control groups. Visual field was extended in the study group up to 250 and made up in average $345,4 \pm 1,20$, in control group these indicators were significantly lower.

Conclusions. Use of medotilin in complex treatment of ocular ischemic syndrom considerably improves clinic-functional indicators of eyes and reduces period of rehabilitation.

ASSESSMENT OF PSYCHOLOGICAL STATUS AND QUALITY OF LIFE OF PATIENTS AFTER STROKE EARLY STAGE REHABILITATION

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Stroke is one of the most common neurological diseases, becoming increasingly health-social and economic significant (Gusev EI, Skvortsova VI, 2003) This is due to the continuous growth of stroke in all age groups, common disability and high mortality of patients (Vereshchagin H.V., Varakin YY, 2001). More than 60 thousand strokes annually registered in Uzbekistan. This hospital mortality was 17.3%, disability - 83,8% (12news.uz). The effectiveness of rehabilitation depends on the patient's attitude, their activity, attitude to illness, the degree of involvement in the healing process. THE study of the psychological state of the patient's quality of life and have to be considered along with the other as an important aspect of neurorehabilitation.

Objective. To examine the state of the psychological status and quality of life of patients in the early recovery period of cerebral ischemic stroke under the influence of complex rehabilitation.

Materials and methods. The Republican Clinical Hospital №1 A complex clinical and instrumental examination and treatment of 34 patients in the early recovery period of cerebral hemispheric ischemic stroke (Mississippi), of which 27 men and 7 women, aged from 48 to 64y.o. The estimation of fair and neurological status in the course of the disease with the definition of the modern Hamilton scale, as well as the quality of life of patients by questionnaire SF-36v2 Health Survey. Patients were divided into 2 groups. Patients of the first group were carried differentiated comprehensive treatment and rehabilitation, including drug therapy, exercise therapy (treatment position, ideomotor exercises, breathing exercises), physiotherapy (magnitolazer, amplipulse) psychotherapy. Patients in the control group was carried out only medical therapy.

Results. If the screening test for 2-3 days after suffering a stroke in all patients on the Hamilton scale was found that 2.9% of patients have severe depression severity, 14.7% - moderate, at 52.9% - mild depression. Quality of life in patients of

both groups were reduced on all scales SF-36v2: the majority were in the range of 35 to 50 points, which is 50% below normal. After a comprehensive 10-day rehabilitation noted that the quality of life of patients with the first group began to rise from the 3rd day and become in the range of 51-79 points, and out of the depression came to 26.5% of patients.

Conclusions. Thus, the most effective was the program that includes the use of drug therapy on the background of a complex exercise and physiotherapy, in which the observed dynamics of the best quality of life and psychological status of patients in the early recovery period of cerebral hemispheric ischemic stroke.

THE ROLE OF THE EXPRESSION OF A CHIMERIC BCR-ABL ONCOGENE IN MOLECULAR DIAGNOSIS AND MONITORING OF TREATMENT OF PATIENTS WITH CHRONIC MYELOID LEUKEMIA

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Actuality. Chronic myeloid leukemia (CML) - the most common tumor disease of the blood system, characterized by the reciprocal translocation $t(9; 22)(q34; q11)$, leading to the formation of the chimeric BCR-ABL oncogene and the Philadelphia (Ph) chromosome in the 22q-chromosome. At present, the main methods of examination of patients are cytogenetic determination of Ph-positive cells and molecular level measurements of the chimeric BCR-ABL oncogene such as p210. To date, the molecular monitoring of the expression of this transcript is mandatory monitoring the results of treatment of patients with CML receiving monotherapy with tyrosine kinase inhibitors. The basic method of molecular monitoring of CML therapy is to quantify the level of expression of a chimeric BCR-ABL oncogene is via PCR in real time. However, the predictive value of the results of the molecular analysis of CML is limited and it is still not complete due to the presence of multiple variations of a chimeric oncogene BCR-ABL.

The aim of the study: conducting genetic research of expression of the chimeric BCR-ABL oncogene and assessment of the possibility of this method in the determination of molecular remission in CML patients receiving targeted therapy by drug Gleevec. This work was carried out on the basis of the Department of Molecular Medicine and Cell Technology Research Institute of Hematology and Blood Transfusion Ministry of Health of the Republic of Uzbekistan.

Materials and methods. The study included 49 patients with clinically diagnosed CML. The median age of patients was 43.6 years (23-69 years). The diagnosis of CML is verified in accordance with the International Nomenclature ISCN. All enrolled patients received GIPAP by program 3 years or more therapy by inhibitor tyrosine kinase BCR-ABL -«Glivec» as recommended by ELNB. As a material used peripheral blood for the analysis in a volume of 10,0 ml. RNA isolation k-DNA preparation were performed by standard methods using test systems. Expression levels BCR-ABL were evaluated by standard quantitative PCR in real time with conversion results according to international scale IS. Detection of transcripts was performed on Rotor Gene 6000. The reaction is determined by the expression of the chimeric BCR-ABL oncogene type p210 for both versions of the transcript (b2a2 and b3a2). The calculation of the intensity of the expression of the chimeric BCR-ABL oncogene type p210 and ABL control gene was performed according to the manufacturer's protocol.

Results. On the basis of the results, we found that the reduction of the expression

of BCR-ABL IS \leq 1% in most cases correspond to any large or complete cytogenetic response. The expression of BCR-ABL gene to less than IS \leq 0,1% (subgroup 3) also evidenced the achievement of clinical, high molecular, or complete cytogenetic remission. These data allow us to estimate the dynamics of the ongoing targeted therapy to patients with CML, authentically to tell the possibility of recurrence could be predict of unrecurrence survival.

EVALUATION OF COMPLEX THERAPY CLINICAL FUNCTIONAL EFFICACY IN PATIENTS WITH PRIMARY OPEN-ANGLE GLAUCOMA

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Actuality. The term “glaucoma” unites big group of eye diseases with different genesis and progradient and chronic course. Glaucoma usually is accompanied with increased intraocular pressure (IOP). The exception is glaucoma with low (pseudonormal) intraocular pressure with optic neuropathy which is characterized by changes of retinal fibers of optical nerve and progressive visual disorders.

The purpose of the work is to study neuroprotective effect of citicolin in complex treatment of patient with primary open angle glaucoma (POAG) with normal IOP based on the clinical functional indexes.

Materials and methods: 30 patients with POAG (11-male and 19-female) were observed and divided to 2 groups. 1 group (basis group patients obtained neuroprotective treatment with citicolin in dose 1000 mg.) – 15 patients, average age 63,28 \pm 9,86. All patients had compensated IOP (Po=19,0 (17,0 \div 21,0) mm Hg). 2 group (control) – 15 patients with POAG, average age 64,65 \pm 9,85. All patients had compensated IOP (Po=19,0 (16,5 \div 21,0) mm Hg). All patients have undergone ophthalmologic examination including optical coherent tomography.

Results. In patients of basic group general thickness of peripapillar layer of retinal nerve fibers (LRNF) increased gradually from 82,88 (61,62 \div 94,17) to 98,33 (65,47 \div 98,99) mkm ($p<0,001$, 7,78%). Increasing of general thickness of LRNF has been keeping during all period of observation. Improvement was detected in all quadrants of peripapillar zone. In superior and nasal quadrants thickness of LRNF has increased to 9,0% and 16,13% ($p<0,05$) accordingly. In inferior quadrant - to 9,62% ($p<0,05$). In temporal quadrant significant increasing was detected in 1 month after treatment ($p<0,05$, 8,77%). Result has been keeping during 3 months in superior and inferior quadrants and during 6 months in nasal and temporal quadrants. In 6 months there was noticed decrease of general thickness of LRNF from 87,63 (74,61 \div 96,38) to 85,46 (70,59 \div 94,99) mkm ($p<0,05$ 2,48%) and decrease of thickness of fibers in superior quadrant was reviled in control group. The thickness of LRNF in nasal, inferior and temporal quadrants was not changed by the last visit($p<0,05$).

The examination of structural indexes of optic nerve disc (OND) reviled that in basic group the ratio of disc excavation area to the area of optic nerve disc (E/D) before treatment with citicolin was equal to 0,445 (0,283 \div 0,581). After treatment there was decrease of this index up to 0,434 (0,277 \div 0,581) ($p<0,05$). It was stable during 3 months after treatment. In control group the change of ratio E/D was not significant during the all period of observation.

Conclusions: 1) neuroprotective treatment with citicolin encourages improve-

ment of structural parameters in patients with glaucoma. Significant increasing of general thickness of peripapillar LRNF in basic group was revealed after the treatment.

2) result was stable during 3 months in superior and inferior quadrants and during 6 months in nasal and temporal quadrants.

PARKINSON PLUS SYNDROMES AS A MANIFESTATION OF SECOND STAGE OF CEREBRAL AUTOSOMAL DOMINANT ARTERIOPATHY WITH SUBCORTICAL INFARCTS AND LEUKOENCEPHALOPATHY (CADASIL)

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Background. Cerebral autosomal dominant arteriopathy with subcortical infarcts and leukoencephalopathy is an inherited small-vessel disease caused by mutations in the NOTCH3 gene. The clinical spectrum includes migraine, recurrent transient ischemic attacks or stroke, cognitive decline, psychiatric manifestations, epileptic seizures and cognitive impairment. Parkinsonian features were not viewed as typical of the CADASIL phenotype and, so far, a clear parkinsonian syndrome has been rarely described. Here we report 20 CADASIL patients carrying the R1006C mutation affected by parkinsonism. To describe clinical manifestation of CADASIL syndrome.

Materials and methods. The research was conducted in University Medical Centre of Groningen (UMCG), the Netherlands, in charge of supervision of Professor Peter Kremer and Gulnora Rakhimbayeva's supervision.

The study included 20 CADASIL patients (11 male/19 female, mean age $35,6 \pm 2,7$), with slowly progressive parkinsonism, not responsive to levodopa. Diagnose of vascular parkinsonism was based on the presence of bradykinesia, rest tremor, rigidity, or postural instability, and cerebrovascular disease, defined radiologically or by the presence of focal signs or symptoms consistent with stroke. One patient also showed vertical gaze palsy symptoms combined with facial inexpressivity, rubbery rigidity, bradykinesia without tremor, pseudobulbar weakness (progressive supranuclear palsy). We performed brain MRI, 123I-FP-CIT SPECT and clinical examination. Genomic DNA from CADASIL patients was amplified by polymerase chain reaction (PCR) using sets of oligonucleotide primers specific for Notch3 exons 4 and 5. The resulting amplicons were then sequenced in both directions by dye-labelled terminators on an ABI 3100 DNA sequencer (Applied Biosystems, CA, USA). Sequence was analysed using the ABI sequence editor package.

Results. All patients had migraine with aura, positive familial history and positive NOTCH3 gene mutation (initially exons 4, and 5). In all patients, brain MRI showed widespread multifocal and bilateral FLAIR/ T2 hyperintensities in the periventricular and deep white matter, with lesions mainly affecting the anterior temporal pole, and basal ganglia, focal hypointensities on T1 (lacunar infarcts) and lesions suggestive of microhemorrhages in SWI and gradient-echo T2. 123I-FP-CIT SPECT showed clear nigrostriatal denervation in all patients, which also showed a right putaminal infarct, reduction of putaminal uptake, bilateral in all patients except 1 case. 12 patients had exon 4 (R141C, R169C, R133C) and exon 5 mutation (C245S) (odds ratio, 1,31 [95% confidence interval, 1,18-1,46]; $P < 0,001$),

Conclusion: 1. CADASIL could damage the substantia nigra, putamen, caudate nu-

cleus and the basal ganglia–thalamocortical circuit predominantly in second stage of disease. 2. In rare cases CADASIL syndrome could lead to progressive supranuclear palsy. 3. CADASIL may represent a model for investigating the pathogenesis and the evolution of parkinsonism related cerebral small-vessel disease.

A COMPERATIVE STUDY OF CONSANGUITY IN FAMILIES OF PATIENTS WITH FEBRILE SEIZURES

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Objective. A comparative study of consanguinity in families of patients with febrile seizures.

Materials and methods. For the solution of objectives were examined 40 children (aged from 6 months to 5 years), the average age of 2.5 years TMA in pediatric neurology. There was conducted a clinical neurological, genealogical study of all patients with febrile seizures.

Results. Were studied the 5 generations of patients whom have been conducted genealogical research and from the data obtained all patients were divided into 2 groups: 1 group-I degree of kinship, 2 group-II degree of kinship, of which the first group makes up 25 (62.5%), second- group is 15 (37.5%). A great importance in the occurrence of febrile seizures played perinatal pathology of the brain. Pathology of pregnancy and childbirth in anamnesis is seen in 12 (30%) patients, prolonged childbirth in 10 (25%) patients, asphyxia in 5 (12.5%) patients and umbilical strangulate in 3 (7.5%). In the process of collecting anamnesis, it was revealed that this pathology in boys make up 27 (67.5%) about 1.5 times more frequently than girls 13 (32.5%). From the total number of patients it was found that febrile seizures manifest against the background of acute respiratory viral diseases 26 (65%), less frequently in intestinal infections of 14 (35%). The vast majority of febrile seizures made - simple (typical) febrile seizures 30 (75%), and complex (atypical) 10 (25%)

Conclusion. According to the results of genealogical research, the first degree of kinship prevails the second degree of relationship that points to a genetic determinacy of the disease, and creates conditions for the occurrence of febrile seizures in children, in families where there are appropriate conditions. The risk of febrile seizures sufficiently increased if in parents' anamnesis marked by febrile seizures.

FEATURES OF POST-STROKE DEPRESSION IN ACUTE ISCHEMIC STROKE

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Purpose. Considering the fact, that depression is a leader in the post-stroke period, to examine the frequency and characteristics of depressive disorders in the acute phase of ischemic stroke.

Material and methods. We observed 42 patients with ischemic stroke in the acute period. The age of patients ranged from 43 to 70 years (average 59.5 ± 1.27 years). Among them, 27 were male (64.3%), 15 female (35.7%). All patients were performed clinical and neurological and neuroimaging investigations (MRI, MSCT).

Neuropsychological tests (Hamilton scale, Zigmond A.S, Snaith scale, NIHSS) were used to assess the degree of depression.

Results. 17 of 42 patients had post-stroke depression, and it amounted 40.5%. Among them 12 (70.6%) patients showed mild depression, 5 (29.4%) patients showed the mild degree of depression. Herewith, severe depression has not been diagnosed in investigated group and with the defeat of the left hemisphere is characterized by the occurrence of early post-stroke depression. In 40.5% of patients with mild to moderate depression occurred immediately after a stroke or during the first 2 months, the symptoms persisted and in more distant terms - 12 months or more. Conversely, if during the first 2 months after stroke patients had not depressive disorders, later they were not observed. It was noted that elderly patients from 61-70 years of post-stroke depression is mild than in patients aged 43-60 years ($p < 0.01$).

Conclusions. Post-stroke depression exacerbates the course of ischemic stroke. These patients need adequate antidepressant therapy and psychotherapy.

ENDOTHELIAL DYSFUNCTION IN PATIENTS WITH RHEUMATOID ARTHRITIS

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Actuality. One of the leading causes of death in patients with rheumatoid arthritis is currently Cardiovascular Pathology (CVP), due to premature development of atherosclerosis.

The purpose of the study. To study endothelial dysfunction in patients with rheumatoid arthritis (RA).

Materials and methods. 102 patients with RA aged 18 to 35 years (means $30,1 \pm 3,6$). The diagnosis of RA according to the criteria of the American Rheumatism Association. The disease duration ranged from 6 months to 10 years. 18% patients with RA had first, 51% - second, and 31% - third degree of activity. 17 (16,6%) of patients had hypertension (H) that complied with the first stage in 9, second stage in 5 and third stage in 3 patients. Endothelial function was assessed with ultrasonic method by D. Celermaier et al. in our modification. 20 healthy volunteers aged 26 to 35 years (means age 32,3 years) were included in control group.

Results. More than half patients with RA had increase of vascular wall rigidity and ultrasonic signs of brachial artery changes. Test with reactive hyperemia revealed two types of arterial reaction. Vasodilatation during active hyperemia in patients with RA depended on vascular wall rigidity and duration of the disease. BP elevation was accompanied by significant increase of vascular lumen during both phases of cardiac cycle and thickness of intima-media complex (IMP). BP increased with increase of age and IMC thickness.

Conclusion. Thus, patients with RA are a group at high risk for the development of CVP, as well as atherosclerosis and its complications, which dictates the need for close monitoring of the cardiovascular system, the timely detection and correction of modifiable risk factors and the development of treatment strategies for this category of patients.

EFFECT OF EXERCISE ON MORPHOLOGICAL AND FUNCTIONAL INDICATORS AT STUDENTS WITH THE DISEASE VEGETATIVE VASCULAR DYSTONIA

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The preservation and strengthening of health of children and youth is a priority of the state. In recent years has been a steady downward trend in the level of physical development and health of young people.

Long-term observation of the students of TMA engaged in special medical group, confirm the trend to increase the number of cases growing out of the year. Cardiovascular disease affects more than 30% of students, scoliosis 20.3%, with diseases of up to 5% of data were obtained in 2010-2015.

In this connection it is necessary to diagnose certain health indicators in students of basic medical group, and particular attention should be given to female students of special medical group.

The aim of this work was to study morphological and functional indicators at students with vegetative vascular dystonia (VVD) in the course of physical training.

Materials and methods. The study involved 55 students VVD disease, who were involved with the program of the general physical training. In this group of students to the classes defined morphological and functional characteristics: height, weight, circumference of thorax, vital capacity of lung (VCL). The physical development of students was determined by formulas Kettle index, the living index, the index of Pine, Erismann, also was assessed by standards method.

Results. The minimum growth in students with VSD disease was 159.2 cm, maximum 178.1 sm, average 168,4 sm. 35% of students growth rates are below the average values, 18% higher than the average students. The minimum weight in this group of students was 49.2 kg, maximum - 80.3 kg, middle - 57.3 kg. Performance weight below the average values was observed in 25% of students, and above average in 17% of female students. Minimum Kettle index was 228.2 conventional units, the maximum-457.1conv.un., middle -335.9 conv.un. (normal 340-420 conv.un.). The below the average values index showed 22% of students (underweight), higher than the average 15% of students (obesity). Physical development was determined by the standards: below the average of 40% of the students, higher-then-normal - only 8% of students, poor physical development had 13%, strong - 5%. Vital capacity of lung (VCL) was determined by spirometer. The minimum value was 2183.1 ml, maximum - 3553.2 ml, average - 3405.1 ml. The following average value of vital capacity was 10% of students, higher than the average 8% of female students.

The vegetative status was determined by calculating the vegetative index (VI). In 56% of the surveyed students VI was $13,45 \pm 1,67$ (within limits), 38% - 18 ± 2.63 (sympathicotonia), a parasympathicotoniya- 6% ($16,45 \pm 0,96$).

Analysis of attendance physical culture showed 100% participation of female students. Repetition of anthropometry in the end of academic year showed normalization of functional parameters (weight, circumference of thorax, VCL) and vegetative index in 45% of patients after regular visits to physical exercise.

Conclusion. The female students with VSD disease have often underweight, poor physical development and dystonia of the autonomic nervous system. Regular physical training contributes to the normalization of functional anthropometric indicators and alignment of vegetative regulation.

DETERMINING THE SEVERITY OF DIABETIC NEPHROPATHY IN DIABETES TYPE 2 BY DETECTING MICROALBUMINURIA IN THE TREATMENT WITH SULODEXIDE

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In recent years, there was discussed the possibility of regression and remission of diabetic nephropathy. Persistently elevated albumin excretion, usually serves as a marker of kidney damage. It is known that the development of proteinuria, renal function has been steadily declining. The drug Sulodexide addition to reducing urinary albumin excretion has other significant cardiovascular effects - influences on endothelial dysfunction are not only the capillaries, but the entire vascular bed.

Objective. To determine significant of the use a test strip of the definitions of microalbuminuria in diabetic nephropathy in the treatment with drug sulodexide.

Materials and methods. We studied 60 people, including 31 women and 29 men, average age - 54 years old. Term of diabetic nephropathy was 4-5 years after diagnosis of type 2 diabetes. Patients who participated in the study divided into 2 groups: Appointment of sulodexide patients with type 2 diabetes significantly reduces albuminuria; while anti-proteinuric effect of this drug saved and after its cancellation. Microalbuminuria level corresponds to the level of positive clinical and laboratory manifestations of diabetic nephropathy in type 2 diabetes.

Results. Studies with patients with diabetic nephropathy in type 2 diabetes, suggest that the MAU is a reversible stage of renal damage in this disease.

Appointment of sulodexide for the patients with type 2 diabetes resulted in a significant reduction of albuminuria (73%) with prolonged retention of protective effect after drug withdrawal.

Appointment of sulodexide for the patients with type 2 diabetes resulted in a significant reduction of albuminuria; this anti proteinuric effect of this drug saved and after its cancellation. Improving the efficacy of sulodexide at higher levels of the original MAU; moreover, it found significant direct correlation between the degrees of reduction of MAU with the severity of nephropathy.

Conclusion. It demonstrated that the use of the MAU is an indicator of the efficiency of etiopathogenetic treatment for clinical, biochemical methods of investigation. The data allows us to estimate not only the reduction of proteinuria, and stabilization or even a decrease in the severity of morphological signs of diabetic kidney damage.

POST-STROKE DEPRESSION

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Objective. This work aimed to determine the pattern of PSD in patients with ischemic cerebrovascular strokes and correlate these findings with the site and size of lesions in early (one month after stroke) and late (6 months after stroke) stages.

Materials and methods. This study was conducted on 30 patients with ischemic PSD. They were classified into 2 groups (group 1 consisted 15 patients with early PSD and 15 patients with late PSD). All patients were subjected to thorough neurological examination, C.T. brain a clinical assessment for depression according to

the research diagnostic criteria of ICD-10, Hamilton rating scale for depression and Barthel index scale for disability.

Results. Early PSD was more common and severe in left cerebral hemispheric lesions particularly in the basal ganglia and frontal lobe. There was no significant correlation between the size of the lesion and severity of early PSD. Late PSD was common in cortical lesions either on the right or left sides particularly in parietal or frontal lobe lesions. There was a significant correlation between the size of the lesion and severity of late PSD. No statistical difference was found between the severity of early and late PSD and the severity of physical disability.

Conclusion. Early PSD was more common in patients with left subcortical lesions while late PSD was more common in patients with cortical lesions. Severity of late PSD was related to the size of the lesion.

THE RELATIONSHIP OF THYROID PATHOLOGY AND FIBROCYSTIC BREAST IN WOMEN OF CHILDBEARING AGE

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Objective. To investigate the frequency relationship fibrocystic breast in women of childbearing age with thyroid cancer.

Materials and Methods. There were 20 women with thyroid cancer from 28 to 46 years. The average age of the surveyed women was $35,75 \pm 1,47$. The control group consisted of 10 healthy individuals, with an average age of $34,1 \pm 2,02$. Among them, fibrocystic breast disease of varying severity was diagnosed in 16 (80%). All women underwent clinical breast examination, breast ultrasound, clinical examination of the thyroid gland. There have also been studied: thyroid stimulating hormone (TSH), free thyroxine (T₄free), antibodies to TPO, prolactin.

Results. In 16 of the 20 women, depending on the pathology of the thyroid gland revealed fibrocystic breast disease. In women with fibrocystic mastopathy study was conducted, which revealed in 11 (68.75%) women hypoplasia of the thyroid gland, of which 2 (18.9%) were accompanied with autoimmune thyroiditis. In 2 (12.5%) were identified diffuse goiter of 1 degree, including one patient with an autoimmune accompanied tereoidit. In 3 out of 16 women (18.75%) were identified nodular euthyroid goiter. During the study of hormonal control group it was found that TSH level averaged 1.62 ± 0.16 mME/l free T₄ index was $1,33 \pm 0,07$ ng/dL, and the prolactin level was $9,25 \pm 2,02$ ng/ml, the antibody to TPO $1,53 \pm 0,03$ ME/ml. The study found that of the 16 women with fibrocystic mastopathy in 12 (75%) is observed euthyroid women with an average of antibodies to TPO was $1,53 \pm 0,03$ ME/ml, TSH $1,79 \pm 0,18$ mME/l, free T₄ $1,53 \pm 0,06$ ng/dL, prolactin $9,7 \pm 2,61$ ng / ml. In 4 (25%) AIT subclinical hypothyroidism level of antibodies to TPO was $73,33 \pm 48,76$ ME / ml, TTG $5,40 \pm 0,97$ mME/l, free T₄ $1,35 \pm 0,16$ ng/dL, prolactin $21,9 \pm 7,10$ ng/ml. Patients being treated mastitis, and thyroid disease.

Conclusions from this study revealed that 16 (80%) of the 20 women observed fibrocystic breast disease. Ultrasound diagnosis is one of the main methods for the assessment of breast and thyroid. In the course of the survey revealed that all women with thyroid gland of childbearing age should be examined in parallel breasts. Women with hypoplasia of the thyroid gland by ultrasound (65% women) are at risk for the development of fibrocystic breast and require careful observation and study of the mammary glands.

COMPARATIVE EVALUATION OF EFFECTIVENESS OF ANTIBACTERIAL DRUGS LEVOXIMED AND TOBRAMYCIN, IN PREVENTION OF EXTRACAPSULAR CATARACT EXTRACTION POSTOPERATIVE COMPLICATIONS

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Relevance. In spite of the wide range of antibacterial drugs applied in ophthalmology, the question of adequate antibiotic therapy in ophthalmosurgery remains critical. The unavailability of rational and timely treatment leads to post-operative complications (iritis, iridocyclitis, uveitis), with possible impairment in eyesight or loss of the organ. In this regard, drugs Levoximed (levofloxacin 0.5%) and Tobramycin drew our attention.

Purpose. Clinical-laboratory evaluation of effectiveness of antibacterial drugs Levoximed and Tobramycin, in prevention of ECCE (extracapsular cataract extraction) postoperative complications

Materials and Methods. 20 patients (20 eyes) have been under our medical observation with various degrees of cataract maturity and etiology. The age range of patients under our medical observation was between 50 and 80 years. The patients were divided into two homogeneous groups: Group-I (control group) - 10 patients received antibiotic therapy with 0.5% of the drug tobramycin 0.3% solution (tobreks, Alcon-Couvreur), Group-II (main group) -10 patients were prescribed antibiotic therapy with the drug solution of 0.5% levofloxacin (Levoximed World Medicine). All patients underwent ECCE with IOL implantation surgery. Prior to surgery, patients instilled antimicrobial eye drops on two schemes: 1. Five times per hour – on the surgery day, 2. Four times a day - two days prior to surgery and five times per hour – on the surgery day.

Microbiological studies of conjunctival cavity contents of all patients were performed before surgery (analysis 1), after a course of antibiotic prophylaxis (analysis 2) as well as immediately after surgery (analysis 3).

Results. During the microbiological examination of conjunctival cavity content of 20 patients diagnosed with cataract, it was determined that before surgery 8 patients (40%) had different types of resident microflora. Patients who instilled antibacterial eye drops Levoximed according to the first scheme, experienced statistically significant reduction in the conjunctival microflora, in only one hour medicine instillation, from 55% to 20%. In the group of patients who instilled tobramycin before surgery, microflora decreased insignificantly, from 42% to 30%. Two-day course of antibiotic prophylaxis showed a significant reduction of the conjunctival microflora, which occurred in all groups.

Conclusion: 1. Prescription of local antimicrobials, significantly inhibits bacterial flora of the conjunctiva. 2. On the one hand, during the application of one-hour prevention scheme, Levoximed had the greatest antimicrobial effect, and on the other hand, during two-day scheme, both drugs had equal efficiency.

THE IMPORTANCE OF ISCHEMIC HEART DISEASE DIAGNOSIS FUNCTIONAL DIAGNOSTICS METHODS

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Target and objectives: to assess the importance of ischemic heart disease diagnosis functional diagnostics methods. Research objectives: There is the risk of ischemic heart disease in individuals with ischemic heart disease early detection; Approval of patients with ischemic heart disease diagnosis; Diagnosed with ischemic heart disease, but the rejection of the subjective complaints of the patients;

Materials and Methods: research in the field of 41 to 68 years of age for heart pain, trouble statements, such as beating of the heart was observed in 369 patients with complaints. Of these 201 men, 168 women. All patients was conducted functional diagnostics methods.

Results: 60 patients (group 1) were positive test, 171 patients (2 groups) were unfinished test, 21 patients (Group 3) were suspect test, 117 patients (group 4) were the negative results of the test.

Between inspectors investigating the case, functional diagnostics tests above 16.3% gave a positive result. Of these, 9.5% of men, women made up 6.8%. Among these patients at 40-50 years were 5.7% of men and 4% of women, at 50-60 years were 80% of men, 76% of women, at 60-70 years were 14.3% of men and women were 20%.

Among patients with positive results were determined vein attacks in 18 patients, ST segment depression in 15 patients, discomfort in the chest failed in 11 patients, pant symptoms in 7 patients and in 9 patients arterial blood pressure was observed.

Among patients with excess body weight above 45.7% of men and 44% of women, among men with arterial hypertension above 51.4%, women 44%, men made up 77.14% of the smoker. Among the women, duly recognized.

Conclusion: • Functional diagnostics methods investigation to reject the method to confirm the diagnosis and early detection is of high importance;

• Excess body weight and harmful habits among the population has more than functional diagnostics tests positive outcome indicators.

• Improve the quality of life of patients with ischemic heart disease, early diagnosis and improve the continuity of life.

HEPARIN VERSUS PLACEBO FOR NON-ST ELEVATION ACUTE CORONARY SYNDROMS

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Bacground. Non-ST elevation acute coronary syndromes (NSTEACS) represent a spectrum of disease including unstable angina and non-ST segment myocardial infarction (NSTEMI). Despite treatment with aspirin, beta-blockers and nitroglycerin, unstable angina/NSTEMI is still associated with significant morbidity and mortality. Although evidence suggests that low molecular weight heparin (LMWH) is more efficacious compared to unfractionated heparin (UFH), there is limited data to support the role of heparins as a drug class in the treatment of NSTEACS.

Materials and methods. Randomized controlled trials of parenteral UFH or LMWH versus placebo in people with non-ST elevation acute coronary syndromes (unstable angina or NSTEMI).

Results. Heparins compared with placebo, reduced the occurrence of myocardial infarction in patients with unstable angina and NSTEMI (RR = 0.40, 95% CI 0.25 to 0.63, number needed to benefit (NNTB) = 33). There was a trend towards more major bleeds in the heparin studies compared to control studies (RR = 2.05, 95% CI 0.91 to 4.60). From a limited data set, there appeared to be no difference between patients treated with heparins compared to control in the occurrence of thrombocytopenia (RR = 0.20, 95% CI 0.01 to 4.24).

Conclusion. Compared with placebo, patients treated with heparins had a similar risk of mortality, revascularization, recurrent angina, and thrombocytopenia. However, those treated with heparins had a decreased risk of myocardial infarction and a higher incidence of minor bleeding.

METHOD OF SURGICAL TREATMENT OF PERSISTENTLY RECURRENT PTERYGIUM

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Relevance. Persistently recurrent pterygium occurs with coarse fibrous transformation of conjunctiva, shortening of conjunctival fornix, sometimes forming simblefaron, partial or almost complete absence of outward movement of the eyeball. The use of traditional methods of surgical treatment in these cases is not sufficiently effective (Zolotarev A.V., Milyudin E. S., 2007; Bilalov E. N. 2010; Figueira E. C. et al., 2007).

The aim of this work was the development of recurrence-free method of surgical treatment of persistently recurrent pterygium.

Materials and methods. Study group consisted of 15 (15 eyes) patients treated at the eye diseases department of the II clinic of Tashkent medical academy with diagnosis of persistently recurrent pterygium in the period from 2012-2015. Thus, the number of relapses after previously produced various operations for pterygium in 8 eyes was 2, on 5 eyes - 3 times, on 2 eyes - 4 times. Gender distribution was as follows: 8 (53.3%) men and 7 (46.7%) women, age of patients varied from 35-65 years, and the average was $42,3 \pm 3,4$ years. All patients underwent standard ophthalmic examination. All patients underwent surgery developed by us which included removing persistently recurrent pterygium (Efficiency suggestion №694 from 11.11.2015 y.).

The surgical procedure. After epibulbar anesthesia with solution of tetracaine 0.5% there was 1.0 - 1.5 ml. of 2% solution of novocaine injected into the body of pterygium. Head and pterygium tissue were separated from cornea and sclera with a round knife for keratoplasty or with the blade in the direction from its head to the neck. Separated pterygium was excised completely within the healthy conjunctiva and along the crescent-fold. Then, a thorough cleaning of the cornea, the limbus, the sclera and the adjacent part of the internal rectus of the scar-tissue modified pterygium. Bleeding blood vessels of the limbus, sclera and conjunctiva were thermocoagulated. At the site of attachment of the internal rectus there a two-seam 7.00 with a needle, cross it and move backward by 3-4 mm, and then sutured to the sclera. A thin crescent-shaped pedicled commensurate graft from the surface layers of the upper segment of the bulbar conjunctiva was cut out equal by size with a defect on the sclera tis-

sue. Autograft was moved and placed on a defect in the inner segment and sutured to the healthy part of the conjunctiva with 5-6 knotted sutures. The silk thread 8.00 was used. If the graft was outside of the limb and lied on the cornea, it was neatly excised along the limbus. 0.25% solution of chloramphenicol was instilled into the conjunctival sac and monocular aseptic bandage was put.

Results. Recurrence of the disease, according to the remote monitoring of patients, was marked on 1 eye which made 6.7%. The operation proposed by us to prevent tension and shortening of conjunctival vaults, color and transparency of the autograft allows keeping a natural look of sclera, which ensures a good cosmetic effect.

Conclusion. The results of clinical application of the surgical method that we have developed allow recommending it as a method of choice for surgical treatment of persistently recurrent forms of pterygium.

MODERN APPROACHES TO THE TREATMENT OF DIABETES TYPE 2

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Objective. To evaluate the effectiveness of incretins in the treatment of patients with type 2 diabetes.

Materials and methods. In this research we took a group of 40 people with T2DM, were receiving treatment at 3rd clinic of TMA in the department of endocrinology. The mean age of the patients was $56 \pm 3,15$ years, the duration of diabetes was $3,59 \pm 1,54$ years. To determine the status of the carbohydrate metabolism. Each patient was examined for analysis of Fasting blood sugar (FBS) and Post prandial blood sugar (PPBS), Glycosylated hemoglobin, body mass index, as well the evaluations of the quality of life on a scale –SF-36. Prior to the initiation of incretins, the patients were on sulfonylurea's and biguanides.

Results. All patients at the time of admission were complaining of dryness in mouth, generalized weakness, pain in legs which reflects towards the decompensated diabetes. The levels of blood glucose before and after meals were $8,16 \pm 0,82$ mmol/l and $11,28 \pm 1,01$ mmol/l respectively, Glycosylated hemoglobin - $9,27 \pm 1,2\%$, body mass index - $31,5 \pm 0,96$. All patients started with incretins (Sita+ MET 50/1000) Twice daily with combination therapy with Glimipride. Before the discharge the patients re-examined for there anylasis. During the duration of treatment with incretins (Sita+ MET 50/1000) twice daily with combination therapy with Glimipride. There was decrease in FBS and PPBS levels upto 15,5% and 20,5% repectively, Glycosylated hemoglobin-16,95%, body mass index -4,76%, quality of life assessment scale-SF-36 improved to $24,6 \pm 3\%$ and there was also decrease in the symptoms like dryness in mouth upto 40% ,weakness upto 36% and pain in legs up to 22%.

Conclusion. Treatment with incretins (SET+ MET 50/1000) leads to better improvement in blood glucose levels as Fasting blood sugar improved by 15,5%, Post prandial blood sugar by 20,5%, Glycosylated hemoglobin-16,95%, body mass index-4,76%, The quality of life assessment scale SF-36 upto $24,6 \pm 3\%$. Intake of incretins (Sita+ MET 50/1000) in the patients in T2DM is more effective .

THE HEMODYNAMIC RESPONSE TO EXERCISE IN YOUNG ATHLETES

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Regular physical exercise causes adaptive remodeling of the cardiovascular system, defines the term "athletic heart". In childhood and adolescence adaptive processes on the one hand go faster than in the adult, on the other hand, the intensity and length of training in young athletes is less, respectively, smaller and provide or influence.

Aim. To determine the hemodynamic profile of reaction to physical activity in young athletes compared with untrained peers.

Materials and methods. The study included 20 people, engaged in specialized sports schools in the city of Tashkent in age from 7 to 18 years. As a comparison group of 20 untrained examined children of the same age. All persons included in the study carried out physical activity (2-minute run at a rate of 180 steps per minute). The dynamics of heart rate, blood pressure, cardiac output and minute volume of blood circulation. Cardiac output was calculated as the difference in end-diastolic and systolic volumes of the left ventricle, measured by echocardiography Teyholts. Cardiac output was calculated as the product of cardiac output, heart rate. Statistical analysis was performed using arithmetic mean and standard error. Differences between groups were evaluated using Student's T test for paired parametric comparisons.

The results of the study. The study found that young athletes baseline heart rate is 60 beats. / Min., To the end of the load increased to 100 beats (80-100%), Systolic blood pressure 110 mm Hg before the test, after it increased to 160 mm Hg (25-30%), to 80 mm Hg diastolic, after dropping to 60 mm Hg (20-25%), cardiac output is normally 65-70 ml/min, minute volume of blood circulation indicators to load 3.9-4.2 l /min after the load was increased to 6.5-7.0 l/min, have young untrained children baseline heart rate is 80 beats./min., to the end of the load was increased to 140-160 beats (100%), systolic blood pressure 120 mm Hg before the test, then it increased to 165-170 mm. Hg (30-40%), to 80 mm Hg diastolic, after reduced by 65-70 mmHg (10-15%), cardiac output is 65-70 ml/min. Indicators minute volume of blood circulation to the load was 5,2-5,6 l/min after 9,1-11,200 l/min

Conclusion. This study found that in childhood and adolescence regular physical exercise contribute to the formation and functioning of the economy mode of reaction to exercise, characterized by growth in minute volume of blood by increasing cardiac output in the guise of the reaction of untrained individuals, for which largely characterized by increased heart rate.

EFFICIENCY OF COMPLEX TREATMENT OF VIRAL KERATITIS

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Relevance. Nowadays ,character of the infectious pathology of the eye has significantly changed. The major importance is related to viruses among which the special place belongs to the group of herpes viruses and adenovirus. Presently the information about new antiviral drugs is constantly renewing and ophthalmologists often have difficulty in assessing their pharmacotherapeutic importance in the treatment of viral diseases of eye (Maichuk YF, 2010, Krichevskiy GI et al., 2010).

Consequently we used antiviral drug „Ocoferon” with domestic product benzket-

zon in complex treatment of patients with viral keratitis.

Purpose of the work was to study the effectiveness of complex treatment of viral keratitis with benzketazon.

Materials and methods. We observed 36 patients with viral lesions of the eye. In 14 patients the process was bilateral in 22 - unilateral. The first group consisted of 19 patients (28 eyes), who were prescribed benzketazon (0.5% eye ointment in the conjunctival sac 3 times a day) for 10 days. The second group - 17 patients (26 eyes) - received traditional treatment with „Ocoferon” without benzketazon.

Results. On the 5th day of the observation the first group showed improvement of condition of affected eye: burning feeling, itching and tearing in the eye, which disturbed the patients before treatment, decreased or disappeared completely. In patients of the second group, these effects disappeared on the 8th-9th day of disease. The disappearance of signs of proliferation of papillae and follicles observed on 4-5th day and that was 96.7% of cases. In the second group these symptoms disappeared on the 6-7 th day that was 87.4%.

Conclusion. Complex treatment of viral keratitis with benzketazon influences positively on improvement of the disease and shortens the recovery period of patients with keratitis.

QUALITY OF LIFE IN PATIENTS WITH GLAUCOMA

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Relevance. Many studies of quality of life (QL) of patients with glaucoma has shown changes of psychological and behavioral status of patients.

Purpose. To study patients' perception of the disease, the parameters of QL that are more exposed to changes in glaucoma, as well as the relationship between objective indicators of visual functions and self-esteem of their status in patients with glaucoma.

Materials and methods. The research was conducted in 10 patients with primary open-angle and 10 patients with primary angle-closure glaucoma, among them the distribution of the stages of the disease was as follows: 8 (40%) patients with early stage disease, 6 (30%) - advanced, 4 (20%) - with far advanced and 2 (10%) – with terminal stage. The group consisted of 55% females and 45% males. The selection of patients with glaucoma was made based on the following inclusion criteria: age between 35 and 80 years, disease duration of at least 1 year, no severe uncompensated comorbidity, as well as exclusion criteria: the presence of other ophthalmopathology, postoperative period less than 3 months. The control group which consisted of 10 healthy volunteers, regularly passing the out-patient eye exam, met the same criteria. There was a survey carried out according to the SF-36 and NEI VFQ-25 questionnaires. The procedure for completing the questionnaire was conducted among patients with glaucoma and control group and took 15 minutes.

Results. The results of the research showed reduced level of QL in patients with glaucoma compared to the control group both in the assessment of health in general and in connection with the disease. All interviewed patients experienced anxiety about their vision. In addition, 45% of patients noted worsening of mood, sleep disturbances due to the belief in incurable illness of the disease, at least occasionally.

Conclusion. QL depends on the degree of visual impairment. There is a marked decrease in the quality of life of patients with glaucoma - due to changes in mental status. Evaluation of quality of life allows to evaluate more precisely the condition of the patient during long-term dispensary observation, as well as to conduct an effective comprehensive treatment.

ANALYSIS OF THE FREQUENCY OF PERIPHERAL RETINAL DYSTROPHIES IN PATIENTS WITH REFRACTIVE ERRORS.

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Introduction. Nowadays, the peripheral retinal dystrophies (PRD) which develop in patients with myopia and astigmatism are regarded as the main cause of retinal detachment. Their early diagnostics and timely limitation by laser coagulation has become lately a necessary procedure indicated for all patients with refractive errors.

The purpose of the study was to compare the rate of occurrence of different PRD in patients with myopia and compound myopic astigmatism.

Materials and methods. The study was carried in private ophthalmological clinic "VISUS" in Andijan. The study included 80 patients, 34 males (42,5%) and 46 females (57,5%), with the middle age $26 \pm 2,5$ years. They were divided in 4 groups: 1st group included 12 patients with high degree of myopia (refraction: sph (-6,5)-(-18,0)); 2nd group included 40 patients with compound myopic astigmatism (refraction: sph (-1,0)-(-4,5) cyl (-1,0)-(-2,5)); 3rd group included 18 patients with combination of compound myopic astigmatism and high degree of myopia; 4th group included 10 patients with moderate and mild myopia (refraction: sph (-0,75)-(-4,5)). All patients were subjected to visometry and indirect ophthalmoscopy with Goldman's three-mirror lens. During the study there were determined three most dangerous according to information from literature PRD: lattice degeneration (LD), "snail trail" dystrophy (ST) and "cobblestones" dystrophy (CSD).

Results. It was found, that in patients of the 1st group with high degree of myopia PRD were met in 84%, at the same time LD was found in all cases, the combination of LD and CSD in 50% of cases. As for the 2nd group, the rate of PRD accounted for 75%, in 55% of patients there took place only different size of LD, 10% had combination of LD and CSD, and in 10% of them ST was revealed. In patients of the 3rd group in 100% of cases there was found LD, in 67% there was combination of LD and CSD, and in 23% there was revealed all three types of dystrophies. In term of 4th group, in 20% of patients the was found ST and in 10% CSD.

Conclusion. Based on this study it can be said, that in present time peripheral retinal dystrophies meet in the majority types of refractive errors regardless their degree. This inference one more time justifies the need of compulsory examination of eye fundus involving ora serrata on all patients for timely diagnostics and prevention of retinal detachment.

OPTIMIZATION OF THERAPEUTIC TACTIC IN TREATMENT OF PHARMACOLOGICAL RESISTANT FORMS OF EPILEPSY IN THE CASE OF EPILEPTIC ENCEPHALOPATHY

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Background. The problems of development of infants' brain are known to be complex and urgent because the success of solving these problems increases quality of life in childhood and adolescence. One of these problems is epileptic encephalopathy (EE) in infants. There is a wide variety of this syndrome, what makes the diagnos-

tics very difficult (West, Lennox-Gastaut syndrome (LGS) etc.). The main role in establishing of diagnosis plays EEG with video monitoring that shows hypsarrhythmia of the waves. However, the clinical course in combination with hi-tech examination are strongly recommended.

Objective. The aim of the investigation was optimization of methods of treatment of pharmacological resistant forms of epilepsy that can be illustrated by the case of the two-year boy with symptomatic Lennox-Gastaut syndrome.

Materials and methods. The diagnosis based on the routine examination and clinical manifestations (seizures appeared with different periodicity). The child was ill since birth and treated with different combinations of antiepileptic drugs (AED). The treatment was unsuccessful, what forced us to find another approach. Tablets of hydrocortisone were prescribed in the start dose of 1.0 mg per 1 kg of body weight (according to professor Olivier Dulac's scheme), followed by decreasing of dose up to 2 mg. The treatment carried out during five months. EEG with video monitoring was carried out during 8 hours in active and passive wake, night sleeping and after awaking.

Results. First EEG examination provided, when child was 1 year old, showed "sharp slow wave", "spike-, polyspike-and-waves" complexes in the right parieto-temporal area. In the left one were registered "sharp slow wave" and "spike-and-wave" complexes with reverse of phase under the electrodes P3 and T5. Physiological patterns of sleeping were weakly manifested and periodically were substituted by epileptiform activity. In the middle of therapeutic course the child became seizure-free and considerable more active and some life skills developed. During the one-year, follow-up period was not revealed any seizures, though the child did not take AED or hormones. EEG registered just single complexes "sharp slow wave" with amplitude up to 100mcV in left temporal area of the brain with reverse of phase under the electrodes T3, T5. There were not any pathological movements during the sleeping. As result of a treatment, there was also observed obvious development of child's brain, which was manifested in physical and mental activity.

Conclusion. Thus, we can conclude that early beginning of individually selected therapy in infants with EE and LGS gives the possibility for the normal development of their brain that may be seen in the normalization of physical and mental development.

CLINICAL ANALYSIS OF THE NON-MOTOR SYMPTOMS OF PARKINSON'S PATIENTS WITH HYPERTENSION

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Objective: Aim of our study was to investigate whether prevalence of the NMSs in PD-arterial hypertension patients (PD-HT) rather than in PD-nHT (PD -no hypertension) patients. We performed a historical cohort study.

Background: It has been reported that hypertension can aggravate the motor symptoms of PD, such as muscle rigidity and gait abnormalities and non-motor symptoms.

Methods: We enrolled Parkinson's patients who visited the neurology at primary healthcare section from January 2014 to September 2015, and selected 28 PD patients with hypertension history, then each of whom was paired with one patient without hypertension history by sex and years of disease duration. We collected the basic in-

formation of the 57 patients, including name, sex, age, duration of disease, H-Y staging and medical dosage. We assessed the non motor symptoms of the 57 patients using the NMSS. The score of each item was the product of the severity and frequency. We also scored each individual NMS as being 'present' or 'absent' in order to analyze the prevalence of each NMS. The level of statistical significance was set at $p < 0.05$.

Results: There is no difference of average H-Y staging in PD-HT group and PD-nHT group. The number of the NMSs of each subject in the two groups is of significance. The frequency of the NMSs in the PD-HT group is significantly higher than the control group in the following aspects: sleepiness, perceptual problems and hallucinations, gastrointestinal tract symptoms. The scores of the NMSS are significantly higher than the control group in the following aspects: sleepiness, depression and sexual function.

Conclusions: Arterial Hypertension is independently associated with more non-motor symptoms in patients with Parkinson's disease. PD-HT subjects show more non-motor symptoms and significantly worse in individual non-motor symptoms compared with PD-nHT subjects, such as drowsiness, depression and sexual function changes.

THE SIGNIFICANCE OF RISK FACTORS OF CORONARY HEART DISEASE FOR ERECTILE DYSFUNCTION

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Objective: to study the importance of the risk factors of coronary heart disease (CHD) in the development of erectile dysfunction (ED).

Material and methods: the study included 52 male patients with a diagnosis of coronary heart disease exertional angina functional class I-III according to the classification of the Canadian Association of the heart with concomitant hypertensive disease in the age of 40-60 years (mean age $51,23 \pm 1,14$). All patients were divided into 2 groups: the first group consisted of 26 patients, who were abused by smoking; the second group of 26 patients were non-smokers. In addition, in both groups was evaluated lipid profile: total cholesterol (TC), triglycerides (TG), cholesterol low density lipoprotein (C-LDL), cholesterol high density lipoprotein (C-HDL) with the calculation of atherogenic coefficient (AC). To identify and assess the severity of ED in the study was used a questionnaire to calculate the International Index of Erectile Function (IIEF), proposed by the International Committee of experts in urology, psychology and physicians of primary health care. The study included patients, receiving atorvastatin, bisoprolol, enalapril, acetylsalicylic acid.

Results: in the first group indicators of the lipid profile were as follows: TC - $5,4 \pm 0,087$ mmol/l, TG - $3,81 \pm 1,19$ mmol/l, C-LDL - $3,45 \pm 0,1$ mmol/l, C-HDL - $1,0 \pm 0,032$ mmol/l, AC - $4,59 \pm 0,1$. According to the results of lipid profile in smoker patients with CHD were seen characteristics of dyslipidemia in increasing TC, TG, C-LDL with increasing AC. According to questionnaire IIEF patients of the first group got $11,47 \pm 0,31$ points, which corresponds to moderate symptoms of ED. Among patients of the second group the values of the lipid profile were: TC - $4,08 \pm 0,23$ mmol/l, TG - $1,34 \pm 0,24$ mmol/l, C-LDL - $2,32 \pm 0,22$ mmol/l, C-HDL - $1,11 \pm 0,07$ mmol/l, AC - $2,73 \pm 0,36$. In patients of the second group values of lipid profile were within normal range. And according to questionnaire of IIEF results corresponded to $16,17 \pm 1,01$ points, which are characteristic of mild ED. When comparing the values of the first and second groups shows that in smoker patients with ischemic heart disease determined dyslipidemia and more

pronounced degree of ED, whereas in the patients of the first group is defined by mild ED with normal values of lipid profile.

Conclusion. In patients with CHD according to the questionnaire to calculate the IIEF is determined by the signs of ED, in which smoking and dyslipidemia worsen manifestation of erectile dysfunction.

NEUROSIS ROLE IN THE DEVELOPMENT OF TYPE-PHOBIC FEAR

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Phobia comes from the Greek words. "Fear, panic" means. Real fear and phobia, a concept very close to each other, but the following differences. Fear is natural, there is a real risk that may arise in this physiological reaction of the organism, increasing the amount of hormones in the blood, acceleration of the heart rate, appeared along with autonomic dysfunction. Fear of new-born babies. Height of a small child does not know what fear of drowning or fire. There is a sense of fear and as a result of these experiences throughout life for a human being useful. Because this feeling motivates a person to hazardous processes or eliminate them to escape. This fear is conscious, is based on common sense and logic. Phobia- this man's spiritual experiences, which have always irrational, persistent, and severe than is the level of fear. Because of this fear, there is no real danger, but there is a person's inner emotional world, it is through thinking and perception boshqarilmasligi tafovutlanadi. According to statistical data, the population of the earth every eight one revealed the presence of various phobias.

The aim of the research: to identify the type of phobias, neurosis patients and their medical and psychological assistance.

Research materials and methods: neurosis with 38 control patients. Research carried out for women, and their average age was 25-32. General therapeutic studies in patients with biochemical, ECG, ExoKG psychological tests in conjunction with the "existing unspecified animal" Projective methods used.

The results obtained are: Neurosis - about 73% of the patients examined without fear associated with the development, with 27% of patients, concerns were linked. The writ of psychotherapeutic conversations with their patients and phobias worry about the spiritual experience of childhood development has been approved.

Conclusion. Neurosis, along with general therapeutic studies in patients with "existing unspecified animal" Projective the extent that fear and without the use of psychotherapeutic methods depending on what the result of this dialogue should also assess the development of phobias. To teach methods of raising healthy children in a healthy environment among the public, and to promote the broad masses of the population is one of the main objectives of the present-day medical psychology.

PREOPERATIVE EVALUATION OF HYPOTENSIVE EFFECT OF BRIMOPTIC IN PATIENTS WITH GLAUCOMA

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Purpose: to evaluate the effect of decreasing intraocular pressure (IOP) of Brimoptic (Brimonidine 0.2%+Timolol 0.5%) in the preoperative period in glaucoma patients.

Materials and methods: the investigation was performed at the Department of eye

diseases of Tashkent Medical Academy. Patients age distribution varied from 45 to 62 years, gender distribution – 15 females, 13 males. The patients were divided into two groups according to the course of preoperative treatment. Treatment group included 14 patients and control group – 14 patients. Patients in the treatment group were administered one drop of Sol. Brimoptici twice a day, patients in the control group took one drop of Sol. Fotili twice a day to decrease intraocular pressure. All patients were performed with equal clinical examination and ophthalmological tests and received adequate treatment course. The intraocular pressure was measured with Maklakov's tonometer (10 g load) every 1st, 3rd, 6th and 12th hours.

Results and discussions: Intraocular pressure during preoperative period in the treatment group was 28.7 ± 0.8 . IOP was 23.15 ± 3.12 and 21.67 ± 2.23 after 1 and 2 hours respectively. Moreover, IOP decreased down to 21.42 ± 2.54 after 6 hours and slightly increased to 22.74 ± 1.13 after 12 hours and remained stable until the operation. IOP in the control group was 29.3 ± 0.7 . It decreased to 25.07 ± 2.78 and 23.8 ± 2.57 after 1 and 2 hours respectively and remained at 23.8 ± 2.52 after 6 hours and 23.2 ± 1.57 after 12 hours.

Conclusion: according to the investigation, Brimoptic showed prompt, effective and stabile decrease in intraocular pressure in glaucoma patients during preoperative period.

THICKNESS OF EPICARDIAL ADIPOSE AS RISK FACTOR OF THE DEVELOPMENT OF ISCHEMIC DISEASES OF THE HEART

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It was studied and proved in the last decades that an important role in the development of cardiovascular complications in patients with obesity belongs to neurohumoral activity of visceral adipose tissue, hypertrophy and hyperplasia of which occurs not only in the abdominal area, as it has been traditionally considered, but also in other local fat depots, including epicardial adiposes. Epicardial adipose is hormonally active, producing tens of biologically active substances that it has anti-inflammatory, proinflammatory, prothrombogenic impact on coronary arteries through paracrine mechanisms. The definition of epicardial fat by Echocardiography is simple procedure that allows you to visualize visceral adipose tissue, to give quantitative assessment and to use this criterion as an important marker of cardio metabolic risk.

The purpose of research. The study of thickness of epicardial adipose tissue as criterion of progression of the clinical course in patients with IDH (ischemic diseases of the heart) patients. Angina pectoris depending on anthropometric parameters, lipid spectrum data and the results of veloergometric sample.

Material and methods. 45 male patients have been examined who were treated in cardiology department of the 1ST -clinic of Tashkent Medical Academy, aged from 40 to 60. The average age is $53,7 \pm 3,5$. Duration of anamnesis of ischemic diseases of the heart ranged from 2 to 4 years. Arterial hypertension was marked in 82,5 % patients, obesity was detected in 42,5% (average body mass index (BMI) $27,8 \pm 2,1$), in 28,5 \pm 3,4% - 1 st - degree of obesity (average body mass index $32,3 \pm 2,6$). All patients have been underwent the following research methods: anthropometric measurements, clinical methods, laboratory and instrumental methods (ECG, stress functional tests, echocardiogram).

The results of research. In study results it was established that in all patients were noted lipid metabolism as increased general cholesterol in blood content till $5,41 \pm 0,04$

mmol/l, low-density lipoproteins (LDL) $4,02\pm 0,03$ mmol/l, hypertriglyceridemia $2,02\pm 0,04$ mmol/l, high-density lipoproteins (HDL) decreased to $0,87\pm 0,02$ mmol/l. According to echocardiogram there have been noted the increase of myocardium mass of the left ventricle (MMLV) to $273,26\pm 8,12$ gr. The increase of the left ventricle mass occurred due to hypertrophy of the interventricular septum (IVS), which was confirmed by the increase of interventricular septum thickness of left ventricle to $1,22\pm 0,02$. Diastolic dysfunction was determined in 23% patients. Epicardial adipose tissue thickness ranged from 4,5 to 12,5 mm and on average $8,6\pm 0,5$ mm by data of ECG.

When analyzing the results of VEM-samples index Duke was taken as criterion of prognosis of the disease and it was revealed that in 11% patients - high risk group with index Duke < -10 and Epicardial adipose tissue thickness $11,5\pm 0,8$ mm, in 75% patients - medium risk (index Duke from -10 to 4) and Epicardial adipose tissue thickness - $8,1\pm 0,3$ mm, the low-risk group - 14 %, respectively with index > 5 and Epicardial adipose tissue thickness of $6,7\pm 0,7$ mm were observed.

Conclusion: thickness of epicardial adipose tissue in patients of high risk course of IDH was higher than in patients with low risk of the course of disease. Thus, Epicardial adipose tissue thickness may serve as marker of the course of ischemic diseases of the heart (IDH).

A CLINICAL COMPARISON OF ISCHEMIC STROKE RISK IN PATIENTS WHO HAD TRANSIENT ISCHEMIC ATTACK CAUSED BY CAROTID AND INTRACRANIAL ARTERIES LESIONS

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Objective. The aims of this study were to determine the differences in clinical characteristics and the risk of ischemic stroke between patients with transient ischemic attack (TIA) attributable to extracranial carotid and intracranial artery occlusive lesions.

Materials And Methods. Among 56 patients admitted to our stroke care unit within 48 h of TIA onset between September 2015 and December 2015, 31 patients (19 men, mean age 69.4 years) with large artery occlusive lesions relevant to symptoms were included in this study. The primary endpoints were ischemic stroke at 2 and 50 days after TIA onset.

Results. Twelfth patients had carotid artery occlusive lesions (extracranial group), and 19 patients had intracranial artery occlusive lesions (intracranial group). Patients in the intracranial group were significantly younger, had lower levels of fibrinogen, and were less likely to have occlusion when compared with those in the extracranial group. Seven patients in the extracranial group and none in the intracranial group underwent revascularization procedures within 50 days of TIA onset. The 2-day risk = 14.2%, ($p = 0.044$) and the 50-day risk = 17.1%, ($p = 0.020$) of ischemic stroke after TIA onset were significantly higher in the intracranial group than in the extracranial group.

Conclusions. Among our patients with TIA caused by large artery disease, patients with intracranial artery occlusive lesions were more frequent and were at higher risk of early ischemic stroke than those with extracranial carotid artery occlusive lesions. These data highlight the importance of prompt assessment of intracranial artery lesions in patients with TIA.

BAD HABITS AND THE STUDENTS OF THE MEDICAL ACADEMY IS IT COMPATIBLE?

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Currently, there is an increase in the number of students suffering from a variety of chronic diseases acquired. According to several authors, important reason for young people's health troubles is underestimation of the importance of a healthy lifestyle (HLS) in the formation of physical and mental health, education of the person. Forming healthy lifestyle is the main lever of primary prevention and health promotion through lifestyle changes, his rehabilitation with hygiene knowledge in the fight against bad habits.

The aim of our study was to determine the opinions of students from 1 to 7 of the course medical faculty TMA relatively healthy lifestyle. The survey involved 96 people (53 female and 43 male) aged 20 to 25 years. The questionnaire in the 3 languages suggests an answer to 8 questions, including diet, physical activity, and the presence of harmful habits. To the question "Do you smoke?" 39 (40.6%) responded that smoking (including 41% of girls and 59% boys). The reasons for smoking were: psychological dependence 42.1% of boys and 45% girls. 21.3% of boys and 20.2% of girls said that it gives strength to the study. To lose weight smoking 3% of boys and 5% of girls. In order to calm smoking 13.2% of boys and 14.1% girls. Difficult to answer: 10.0% of boys and 8.0% of girls. It is not enough willpower to quit: 8.4% of boys and 6.2% of girls. On the question regarding sports 49 people (51%) said they did not participate in sports, (of which 49% of boys and 51% girls).

The reasons due to which students are not engaged in physical training: lack of free time: 47.1% of boys and 40.2% girls. Lack of funds for visiting sports groups: 21.3% of boys and 23.1% girls. The lack of sports facilities: 6.2% of boys and 15.0% girls. Poor health: 7.2% of boys and 8.0% of girls. Lack of desire: 15.0% youthful neck and 10.1% of girls. Bad habits: 1.2% of boys and 1.0% of girls. To the question "Do you keep a diet?" 48 people (50%) said they did not observe (one girl was - 39.6%, boys - 60.4%). It has been identified different causes of non-compliance with diet: the largest part of the questionnaire noted - lack of time, 49.1% of boys and 55.7% girls. Lack of habit: 27.1% of boys and 20.2% girls. Difficult to answer: 19.8% of boys and 20.0% girls. With regards to the issue of drinking 60 people (62.5%) said they sometimes drink (of which 36.6% women and 63.4 men). The reasons for drinking alcohol: drink alcohol on holidays: 71.6% and 80.3 youthful necks% of girls. To calm: 20.2% of boys and 10.3% girls. By force of habit: 1.0% of boys and 0.3% of girls. Because many people behaving it: 2.5% of boys and 0.6% of girls. To relax: 2.5% of boys and 7.5% of girls. It was difficult to answer 1.7% of boys and 1.0% of girls.

Thus, as a result of questioning of students TMA found that more than half of the students do not follow the diet, 1/3 - marked nicotine dependence, with the highest percentage of non-healthy lifestyle marked by the young men. Therefore, the main task of modern society in the context of this problem is the need to inculcate this responsibility and, above all, the medical students.

NITRIC OXIDE-RELATED BRAIN DAMAGE IN ACUTE ISCHEMIC STROKE

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Objective. The neurotoxic and neuroprotective role of nitric oxide (NO) in experimental cerebral ischemia has generated considerable debate. The aim of this study was to analyze the relationship between NO metabolite (NO-m) concentrations in cerebrospinal fluid (CSF) and clinical and neuroimaging parameters of brain injury in patients with acute ischemic stroke.

Materials and methods. We studied 102 patients and 24 control subjects who were included in a larger previous study conducted to analyze risk factors of progressing stroke. NO generation was calculated by quantifying nitrates and nitrites with a colorimetric assay in CSF samples obtained within the first 24 hours from symptoms onset. Early neurological deterioration was defined as a fall of one or more points in Canadian Stroke Scale score between admission and 48 hours after inclusion. Infarct volume was measured on days 4 to 7 with cranial CT.

Results. Median NO-m concentrations [quartiles] were 2.1 [1.0, 4.5] $\mu\text{mol/mL}$ in patients and 1.0 [1.0, 1.0] $\mu\text{mol/mL}$ in control subjects ($P < 0.0001$). In 45 patients with subsequent early neurological deterioration, NO-m levels in CSF were significantly higher than in those with stable stroke (4.0 [1.7, 7.8] versus in 1.6 [1.0, 2.5] $\mu\text{mol/mL}$, $P < 0.0001$). There was a moderate correlation between NO-m and infarct volume (coefficient 0.39, $P < 0.001$). NO-m concentrations > 5.0 $\mu\text{mol/mL}$ were significantly associated with early neurological worsening (OR 5.7, 95% CI 1.2 to 27.4; $P = 0.030$) independent of other important factors related to progressing stroke, such as CSF glutamate levels.

Conclusion. Our clinical findings suggest an important role of NO generation in acute ischemic stroke. Increased NO-m in CSF are associated with a greater brain injury and early neurological deterioration.

HIGH LEVELS OF CHOLESTEROL IN THE BLOOD-THE CAUSE OF DISEASES OF THE BLOOD VESSELS IN CHILDREN

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It is known that among the diseases of the cardiovascular system Atherosclerosis is one of the main points. Atherosclerosis is caused by the deposition on the walls of blood vessels, followed by condensation of cholesterol in the growth of dense connective tissue. Around these deposits, a so-called atherosclerotic plaques that narrow the lumen of blood vessels and reduce blood flow to organs.

It was found that atherosclerosis develops in the majority of cases, slowly, imperceptibly for the body and for a number of years can does not manifest itself. After its development in the vessels, there is a painful condition occurs in metabolism disorders, especially in fat and protein. As mentioned above, atherosclerosis develops in the presence of high blood cholesterol content. Numerous experiments have shown that for certain diseases such as diabetes, hypothyroidism has slowed the flow of blood through the vessels, due to high cholesterol. So much negative meaning high cholesterol in the blood proved numerous experimental research. Normal blood cholesterol in children is significantly different from normal adults. Permissible it is considered

normal for children of about 170 mg/mgp (4,4mmol), the permissible level of 70-199 mg/dl (4,4-5,15mmol/l). The amount of cholesterol - 200 mg/dl (5.2 mmol/L) or more is considered very high. We carried out a study on the blood levels of cholesterol by age groups of children in Fergana region from 0-5, to 6-10, 11-14 years old. Results of analysis showed, the existence of a weak direct correlation between cholesterol and age of the person. Thus, with increasing of age groups direct proportion to the amount of cholesterol ($r = -0.1$) increases.

To avoid the latter from harmful high cholesterol preventive measures necessary to all children, especially prone to atherosclerosis. For this it is first necessary to know the rate of cholesterol in children. The first analysis of the case and the period from 2 to 10 years of age. If the result is above 200 mg/l do analysis again. Under normal indicator test will be carried out after 3 years. If you find a high level of cholesterol in the child, it should take the necessary measures.

To prevent the disease it is necessary to lead a healthy active lifestyle, regularly, to in for sports, go through the medical control, listen to the advice of doctors, follow the diet.

DETECTION OF SOMATIC JAK2 (V617F) MUTATION IN PATIENTS WITH CHRONIC MYELOPROLIFERATIVE DISEASES

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Background. The mutation JAK2 V617F in chronic myeloproliferative disorders (CMPD) has been described as a frequent genetic event in majority of patients with polycythemia vera (PV), essential thrombocythemia (ET) and idiopathic myelofibrosis (IMF). Its frequency varies in different populations. We therefore, looked for JAK2 V617F mutation in Uzbek patients with chronic myeloproliferative disorders.

Objective. To study the mutation JAK2V617F gene in different clinical variants Ph(-) negative CMPD and to determine its significance in verification of these diseases.

Materials and methods. Materials for our study was the DNA samples from 70 patients with Ph(-) CMPD (erythremia, essential thrombocythemia and subleukemic myelosis) and 14 patients with Ph(+) chronic myeloid leukemia in the Scientific-Research Institute of Hematology and blood transfusion in Tashkent. The control group consisted of 71 healthy donors. Extraction of DNA was conducted from peripheral blood of patients. Determination of cleanness and concentration of DNA was else conducted on the NanoDrop 2000, (Thermoscientific, USA). Detection of gene mutation JAK2V617F was performed by standard polymerase chain reaction on the PCR-amplifier Corbett CG-1-96 (Germany).

Results. In the group of patients with BCR-ABL, positive chronic myeloid leukemia mutation V617F in the JAK2 gene was not detected in any of the patients (14 surveyed). In 3 (21.4%) patients of this group were identified various chromosomal changes. Out of 70 examined patients, the V617F mutation in the JAK2 gene was detected in 62.9% of patients (44/70). In patients with erythremia, this mutation was found in 80.0% (34/40), in essential thrombocythemia patients – 46.1% (6/13), in the subleukemic myelosis patients – 23.5% (4/17) of cases. Three patients with erythremia had this mutation in the homozygous form. It is known that the presence of the homozygous form of this mutation occurs by mitotic recombination and duplica-

tion of the mutant allele. Among main group, 15 patients was carried out cytogenetic analysis of peripheral blood cells. All patients identified normal karyotype.

Conclusion. In Jak2-positive and Jak2-negative patients on the basis of hematological and clinical indicators of significant differences between the studied groups was not found. The presence of JAK2 V617F mutation was associated with a higher hemoglobin level ($P < 0.05$), a higher white blood cell count ($P < 0.01$). Thus, our data confirm that mutation V617F in the JAK2 gene are highly specific diagnostic markers for patients with Ph-negative CMPD.

DIAGNOSTIC AND PROGNOSTIC CAPABILITIES OF SOME INDICATORS OF BLOOD SERUM IN TUBERCULOSIS

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Aim: to study the diagnostic and prognostic capacity indicators vascular endothelial growth factor VEGF and TNF-alpha (tumor necrosis factor).

Materials and methods. We have investigated the presence of prognostic and diagnostic markers important in the serum of 30 patients with pulmonary tuberculosis. Comparison group - 15 healthy people. The patients were divided into 2 groups: Group 1 - new cases (13 - $43,3 \pm 9,0\%$); Group 2 - reapply with recurrent disease (17 - $56,7 \pm 9,0\%$); Group 3 - 15 practically healthy people. All patients were examined a quantitative determination of vascular endothelial growth factor VEGF and TNF-alpha (tumor necrosis factor).

Results. Of the 30 patients studied: 7 ($23,3 \pm 7,7\%$) were women, 23 ($76,7 \pm 7,7\%$) - men; the average age of women - $40,5 \pm 3,18$ years, men - $47,1 \pm 2,38$ years. Focal tuberculosis was verified in 7 ($23,3 \pm 7,7\%$) patients, infiltrative tuberculosis - in 14 ($46,7 \pm 8,9\%$), fibro-cavernous tuberculosis - in 6 ($20,0 \pm 7,7\%$), cavernous tuberculosis - in 2 ($6,7 \pm 2,2\%$); and 1 ($3,3 \pm 1,2\%$) - TB bronhoadenit.

The most well-studied stimulators of angiogenesis is vascular endothelial growth factor (VEGF). Compared with healthy persons (VEGF concentration 100-200pg / ml) in all investigated patients had a significant increase in the marker in the serum. Thus, in patients with recurrent disease VEGF level was significantly higher than that of new cases of pulmonary tuberculosis ($847,0 \pm 182,3$ pg / ml and $505,76 \pm 103,06$ pg / ml, respectively, $p < 0,05$). A significant increase in content of VEGF in serum indicates the activation of reparative processes in the lung tissues of the studied disease. This recurrence of pulmonary tuberculosis induce an even greater increase in VEGF-factor products that may serve as a diagnostic and prognostic indicator for early detection of pathological process.

Tumor necrosis factor-alpha is (TNF- α) - a key mediator of the immune response and cytokine. Compared with healthy persons (the concentration of TNF- α 0,5-1pg / ml) in all investigated patients had a significant increase in the content of the marker in the serum. Thus, in patients with recurrent disease level of TNF- α was significantly lower than that of new cases of pulmonary tuberculosis ($1,72 \pm 0,24$ pg/ml and $11,92 \pm 2,49$ pg/ml, respectively, $p < 0.05$). It should be noted that there is a direct relationship between the levels of VEGF and TNF- α . Expressing VEGF is induced by pro-angiogenic factors such as cytokines.

Conclusion. Thus, reduction in the concentration of TNF- α in the serum of patients with recurrent disease (group 2) directly correlates with increased VEGF levels in the same patients. Determination of markers of TNF- α in the serum of patients with pulmonary tuberculosis should be carried out in parallel with the detection of expressing VEGF, which can serve as a diagnostic and prognostic indicator for early detection of pathological process.

ANTIAGGREGANT THERAPY IN PATIENTS WITH DIABETES MELLITUS TYPE 2

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Objective: To evaluate the efficacy of antiplatelet therapy with triflusal (Disgren) in the prevention of cardiovascular complications in patients with type 2 diabetes.

Materials and methods: The study involved 30 patients with type 2 diabetes in the endocrinology department of clinic №3 TMA. The average age of the examinees was $53,9 \pm 1,98$ years, with the duration of diabetes mellitus $7,43 \pm 1,48$ let. The control group consisted of 10 healthy individuals, with an average age of $52,6 \pm 1,5$ years. Hemostatic parameters studied in plasma. Of these, activated recalcification time was determined by plasma (ART), activated partial thromboplastin time (APTT), fibrinogen, prothrombin index (PTI) hemolysate aggregation test. We have studied the efficacy of triflusal on the state of endothelial cells in patients with type 2 diabetes mellitus. Depending on the received antiplatelet therapy, patients were divided into two groups. The first group consisted of patients ($n = 15$), receiving as antiaggregant triflusal 600 mg, and a second group of patients ($n = 15$) was taking aspirin at a dose of 75 mg per day.

Results of the study: Against the background of the complex therapy with triflusal showed a tendency to improve the functional state of endothelial cells in patients with type 2 diabetes. In patients with type 2 diabetes after combined therapy with triflusal showed a significant reduction of desquamated endothelial cells to 34.48% ($P < 0.05$) von Willebrand factor - by 15.9% ($P < 0.05$), the content of fibronectin - 27.7% ($P < 0.05$) and fibrinogen in the blood plasma - by 24.8% ($P < 0.001$) and activator inhibitor plasminogen - by 18.49% ($P < 0.001$), the contents of endothelial cells decreased by 34.48% ($P < 0.05$).

Conclusions: Acceptance of triflusal 600 mg per day improves the condition of hemostasis in patients with type 2 diabetes and leads to a significant change in the functional state of endothelial cells in patients with diabetes tipa2. Triflusal is safe and effective as the antiplatelet agent in the treatment of patients with type 2 diabetes.

ASSESSMENT OF EFFECTIVENESS OF ENDONASAL ELECTROPHORESIS IN TREATMENT OF PATIENTS WITH GLAUCOMATOUS OPTIC NEUROPATHY

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Relevance. Glaucomatous optic neuropathy(GNO) is considered to be one of the crucial issue of modern ophthalmology as one that has a direct link with programmed cell death as well as secondary degeneration of intact neurons in spite of attained de-

crease. These days the usage of tanakan is highly appreciated to protect neurons from complications of glaucoma and apoptosis as well. However this medicine in tableted form comprises prolonged effect that blocks it is widely usage. It is known that endonasal electrophoresis accelerates therapeutic effect of tanakan. Consequently, method based on combined action of galvanic current and pharmaceutical substance is more actual in treatment of posterior segment of eye.

Purpose. Assessment of clinical and functional effectiveness in complex treatment of GON with injecton of endonasal electrophoresis and tanakan

Materials and methods. The study involved 20 (40 eyes) patients with glaucomatous optic neuropathy in condition with compensate IOP aged 18 to 55 years. All patients were divided into two homogeneous groups according to the degree of IOP and the age of the patient. In the control group, 10 patients (20 eyes) received traditional treatment for 10 days. In the study group, 10 patients (20 eyes) took endonasal electrophoresis with tanakan per day for ten days additional to traditional treatment. Common ocular examinations were conducted research methods before treatment, 1 and 3 months after treatment and electroretinography studies as well as computer analyser of visual fields with Octopus (Interzeag AG, Swizerland) before and 1 month after treatment.

Results. The average visual field (AVF) in patients of two groups before treatment was 210 ± 15 . In the control group of patients on 3 months of research visual field improved to ± 260 , that is 1.23 times higher than the initial numbers. In the main group figures for AVF increased up to 300 ± 20 and 1.43 times higher than the rates before treatment. Index and latent oscillatory potential(OP) in electroretinography of main group before treatment was $5,6 \pm 0,07$ and $4,7 \pm 0,01$ (ms), respectively ($p < 0.05$) after treatment figures for index OP were $8,0 \pm 0,03$ and latent OP $4,4 \pm 0,02$ (ms) $p < 0.05$, characteristics of light sensitivity in the main group before treatment were $21,6 \pm 3,5$ average for all sectors and $3,5 \pm 3,4$ average deviation from standard, respectively ($p < 0.05$) after treatment given findings became $24,5 \pm 3,9$ and $3,8 \pm 1,9$.

Conclusions. According to our results, inclusion of endonasal electrophoresis with tanakan in complex treatment of glaucomatous optic neuropathy has the effect of protecting from detrimental influence of IOP to retina, promotes prolongation of the main treatment and recovery of visual function of the eye.

IMPORTANCE OF OCT TO ASSESS EFFECTIVENESS OF ENDONASAL ELECTROPHORESIS IN TREATMENT OF PATIENTS WITH GLAUCOMATOUS OPTIC NEUROPATHY

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Relevance. Glaucoma is progressive optic neuropathy(GNO), neurodegenerative disease, characterized by programmed cell death and axons as well as secondary degeneration of intact neurons in spite of attained decrease of IOP. These days the usage of tanakan is highly appreciated to protect neurons from complications of glaucoma and apoptosis as well. However this medicine in tableted form comprises prolonged effect that blocks it is wide usage. It is known that endonasal electrophoresis accelerates therapeutic effect of tanakan. Consequently, method based on combined action of galvanic current and pharmaceutical substance is more actual in treatment of posterior segment of eye.

Purpose. Assessment of clinical and functional effectiveness in complex treatment of GON with injection of endonasal electrophoresis and tanakan based on OCT findings.

Materials and methods. The study involved 60 patients (100 eyes) with glaucomatous optic neuropathy in condition with compensate IOP aged 18 to 55 years. All patients were divided into two homogeneous groups according to the degree of IOP and the age of the patient. In the control group, 30 patients (32 eyes) received traditional treatment for 10 days. In the study group, 30 patients (48 eyes) took endonasal electrophoresis with tanakan per day for ten days additional to traditional treatment. Common ocular examinations were conducted research methods before treatment, 1 and 3 months after treatment as well as OCT studies.

Results. The average visual acuity (AVA) in patients of two groups before treatment was $0,02 \pm 0,01$. In the control group of patients on 3 months of research visual acuity improved to $0,04 \pm 0,02$, that is 2 times higher than the initial numbers. In the main group figures for AVA increased up to $0,08 \pm 0,02$ that was 4 times higher than the rates before treatment. The average visual field (AVF) in patients of two groups before treatment was $210^\circ \pm 15^\circ$. In the control group of patients on 3 months of research visual field improved to 260 ± 12 , that is 1.23 times higher than the initial numbers. In the main group figures for AVF increased up to $300 \pm 20^\circ$ and 1.43 times higher than the rates before treatment. Dynamic ratio of Cup /Disc and square of neuroretinal layer (mm²) according to findings of OCT in study group before treatment were $0,54 \pm 0,07$ и $0,73 \pm 0,08$ ($p < 0,05$), after treatment these indications were within in scope $0,49 \pm 0,05$ и $0,85 \pm 0,05$ ($p < 0,05$) respectively. The index of peripapillar thickness of middle layer fibers of the retina was before treatment $83,98 \pm 4,5$ after treatment this index was equal to $96,5 \pm 3,9$

Conclusions. According to our results, inclusion of endonasal electrophoresis with tanakan in complex treatment of glaucomatous optic neuropathy has the effect of protecting from detrimental influence of IOP to retina, promotes prolongation of the main treatment and recovery of visual function of the eye.

PHOTODYNAMIC THERAPY IN OPHTHALMOLOGY

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Photodynamic therapy (PDT), sometimes called photochemotherapy, is a form of phototherapy using nontoxic light-sensitive compounds that are exposed selectively to light, whereupon they become toxic to targeted malignant and other diseased cells (phototoxicity). PDT has proven ability to kill microbial cells, including bacteria, fungi and viruses. PDT is popularly used in treating acne. It is used clinically to treat a wide range of medical conditions, including wet age-related macular degeneration and malignant cancers, and is recognised as a treatment strategy which is both minimally invasive and minimally toxic. (Wang S.S., et al 2002) The first detailed scientific evidence that agents, photosensitive synthetic dyes, in combination with a light source and oxygen could have potential therapeutic effect was made at the turn of the 20th century in the laboratory of von Tappeiner in Munich, Germany (Locher GL. 1936).

The purpose of the study was to review the existing materials on the possibilities of PDT in ophthalmology.

Materials and methods. There were reviewed 52 sources from pubmed, Uzbek and foreign medical journals and other open-access journals for gaining the necessary information.

Results. Most modern PDT applications involve three key components: a photosensitizer, a light source and tissue oxygen. The combination of these three components leads to the chemical destruction of any tissues which have both selectively taken up the photosensitizer and have been locally exposed to light. The wavelength of the light source needs to be appropriate for exciting the photosensitizer to produce reactive oxygen species. These reactive oxygen species generated through PDT are free radicals (Type I PDT) generated through electron abstraction or transfer from a substrate molecule and highly reactive state of oxygen known as singlet oxygen (Type II PDT). The tendency of a photosensitizer to reach the triplet state is measured by the triplet state quantum yield, which measures the probability of formation of the triplet state per photon absorbed (depending on the interaction of the singlet species with other substrates producing fluorescent quenching (Huang Z., et al 2005).

The triplet state lifetime influences the amount of cytotoxic species produced by collision-induced energy transfer to molecular oxygen and other cellular components. A high intersystem crossing probability will produce an effective population of excited triplet state photosensitizer molecules whose energy can then be transferred by the two mechanisms described below. In addition, the photosensitizer is not destroyed but returns to its ground state without chemical alteration and is able to repeat the process of energy transfer to oxygen many times, conjunctival tumors, choroidal metastasis.

PDT is used to treat such diseases like wet age related macular degeneration, choroidal neovascularization, circumscribed choroidal hemangioma, retinal capillary hemangioma, ocular histoplasmosis in ophthalmology. Currently our own uzbek scientists Mavlyan-Khodjaev R. Sh. and Sadykov R. A. have been working out to use PDT in treating hemangiomas, infectious skin diseases, purulent inflammation and so on, creating PDT apparatus "ALT VOSTOK" which works in the wavelength of 680 nm.

Conclusion. PDT is a very perspective method of treatment which will definitely open new ways of treatment of many severe diseases with less side effects, less price and better results. Nowadays we carry out series of experiments to determine the safety and efficacy of this method in curing ocular diseases and the results will be presented in our next publications.

ANALYSIS OF CORTEXIN EFFECTIVENESS IN THE COMPLEX TREATMENT OF RETINAL VEIN OCCLUSION

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Relevance. Retinal vein occlusion (RVO) is the second most common sight-threatening retinal vascular disorder after diabetic retinopathy (Rogers S.L., et al 2010). RVO can be divided into two primary categories, branch RVO and central RVO occurring more commonly than CRVO (Boehm A.G., et al. 2003). Globally, an estimated 16,4 million adults are affected by RVO (2,5 million by CRVO and 13,9 million by (BRVO) (Rogers S.L., 2010). The age and sex standardized prevalence is 5,20 (per 1000) for any RVO, 4,42 for BRVO and 0,80 for CRVO in the population aged ≥ 30 years (Rogers S.L., et al. 2010). Patients with RVO have a higher prevalence of stroke [Hayreh S.S., et al 2001) and a greater risk of cardiovascular disease than similarly aged individuals without RVO.

The purpose of our study was the comparative analysis of Cortexin and Cinnarizin effectiveness in complex treatment of patients with RVO.

Materials and methods. There were 30 patients with RVO examined whose age

varied between 40 and 77 years old, $58 \pm 6,8$ on the average, there were 16 men and 14 women among them. All the patients had the history of hypertensive crisis with clinical symptoms of cerebral impairments: vertigo, headache, flickering. The disease duration (RVO) didn't exceed 2-3 weeks. All the patients were divided into two groups. The main group consisted of 16 patients (20 eyes) who received standard treatment (antiplatelets, fibrinolytics, anticoagulants, antioxidants, spasmolytics, neuroprotectors) and Cortexin 10mg, twice a day (2 months).

Results and discussion. Visual acuity in patients with CRVO varied from 0,02 to 0,2 in patients with BRVO – from 0,2 to 0,7. Visual fields in 36% of patients with CRVO were concentrically narrowed, the majority of patients had central and/or paracentral scotomas, sectoral defects of visual fields. Ophthalmoscopy showed widespread ischemic oedema, flame-like hemorrhages in the zone of affected branch of retinal vein (“smashed tomato” symptom), retinal veins were considerably dilated and tortuous. In 10 days visual acuity, visual fields and ophthalmoscopy findings improved in all patients. In control group the maximal increase in visual acuity was observed only in the immediate to the treatment period and made $0,08 \pm 0,02$ and $0,25 \pm 0,02$ (in patients with CRVO and BRVO respectively). In main group already in a month after the complex treatment a considerable reducing of macular oedema, resorption of hemorrhages were identified and were accompanied by increase of visual acuity. Visual acuity to the end of observation period appeared to be higher than initial one for $0,40 \pm 0,02$ and $0,42 \pm 0,02$ (in patients with CRVO and BRVO respectively). Later visual acuity appeared to be significantly higher than initial only in the group which received complex treatment with Cortexin and this shows the stability of the result achieved. In control group OCT showed positive dynamics in the form of central retinal area thickness reducing by the 3rd month after the treatment. In main group OCT revealed a marked resorption of macular cysts, haemorrhages and associated statistically significant decrease of central retinal area thickness which was stable during the whole period of observation.

Conclusions. Complex treatment of patients with RVO including Cortexin provides sustained increase of visual acuity, decrease of retinal edema; decrease of the risk of such as neovascularisation due to the reducing the area of ischemia, widening of visual fields, decline of the quantity and size of scotomas and improves eye vascular blood flow both in short term and long term period.

THE EFFECTS OF INDUCER AND INHIBITOR OF NO-SYSTEM PROAPOPTION INDICATORS

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To date in the scientific literature you can find almost an equal amount of evidence, cytotoxic effects and protective effects of nitric oxide (NO). NO is a universal inducer of apoptosis.

The purpose of the investigation was to study the effect of inducers and inhibitors nitrenergic system proapoptosis indices in acute toxic hepatitis (ATH).

Material and methods. The experiments were performed on 32 white outbred rats male weighing 180-250g. The animals were divided into the 4gr. of 8 rats each. 1gr animals which reproduce acute toxic hepatitis. ATH reproduced by the introduction of CCl₄ classical method (N. X.Abdullaev, Y. H. Karimov 1986). 2ml ATH animals

which were injected with L-arginine ("Merk") in the dose of 150mg/kg 3 g animals with GTG, which was administered non-selective NOS inhibitor - N ω -nitro-L-Arginine Methyl Ether (L-NAME) at a dose of 10mg/kg in the form of aqueous solutions intraperitoneally, once in the morning for 6 days in a row at 0.5 ml per 100 g weight of the animal. As control was used a group of intact rats (4gr). The study was carried out on 7th day. The content of cytochromes P-450, the classical method T. Omura, R. Sato; microsomal protein (mg/ml) O. H. Lowry et al. Simultaneously selected in the microsomes was determined the content of NO by its major stable metabolites NO₂- and NO₃- - by the method of P. P. Golikov et al.; activity eNOS on Sumbaev V. V., Yasin-skaya I. M.; the activity of iNOS and the concentration of peroxynitrite (ONOO-) - M. Yu. Raveboy, E. N. Chuyan. The enzyme immunoassay was determined in the serum P53, TNF- α . Cytochrome C was determined by method N. A. Gvatua.

Results and discussion. It is established that at ATH caused by CCl₄ observed inhibition of cytochrome P450. ATH also causes imbalance in nitrenergic system, increases the activity of iNOS, the level of NO and ONO₂-, and inhibits endothelial NOS. ATH is caused by CCl₄ increases the levels of P53 proapoptotic indicators, Cyt C and TNF- α - 35.3%; 32,1%; 28,8% (P<0.001), respectively.

It is established that the inductor NO-L-arginine increases the level of cytochrome P450, decreases the level of NO, ONO₂- and iNOS activity, on the background of the initiation eNOS in animals with ATH. However, L-arginine decreases the level of P53 proapoptotic indicators, Cyt C and TNF- α - 21.7%; 19,1%; 16.2%(P<0.001) respectively compared in animals with ATH.

Non-selective NOS inhibitor L-NAME even more oppressing the MOS and eNOS, on the background of induction in the expression level of NO, iNOS activity, and concentrations of ONO₂- and L-NAME leads to an even greater extent to the increase of P53 proapoptotic indicators, Cyt C and TNF- α - 17.4%; 23,4%; 30,5%(P<0.001), respectively.

Conclusions. Based on the obtained data, it can be concluded that NO indirect inducer of L-arginine decreases the level of P53 proapoptotic indicators, Cyt C and TNF- α in serum in animals with ATH. Non-selective NOS inhibitor - L-NAME in an even greater extent increases the level proapoptotic indicators in animals with ATH.

CLINICORADIOLOGICAL FEATURE DESTRUCTIVE PULMONARY TUBERCULOSIS AMONG NEW CASES

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Aim: to study the clinical and radiological characteristics of destructive forms of pulmonary TB among new cases.

Materials and Methods. We examined 40 patients with newly diagnosed destructive pulmonary tuberculosis, were hospitalized therapeutic department of the Republican Specialized Scientific and Practical Medical Center of Tuberculosis and Pulmonology in the period from 2014 to 2015.

Results. Among the men surveyed were - 22 (55%), women - 18 (45%). In the age structure of cases the largest share in the average age between 40 and 59 years old - 21 (52.5%), followed by the young age of 20 to 39 years - 11 (27.5%) and over 60 years of 8 (20%) patients.

When analyzing the structure of destructive tuberculosis revealed that more than half of 23 patients (57.5%) were observed fibrocavernous tuberculosis, at 10 (25%) cavern-

ous tuberculosis, and in 7 (17.5%) patients with cirrhotic pulmonary tuberculosis.

The general condition for admission in almost all patients had moderately severe - 39 (97.5%), one patient 1 (2.5%) - heavy.

Common manifestation of the disease were observed in all patients. Intoxication syndrome often accompanied by weak - 40 (100%), weight loss - 39 (97.5%), decrease of appetite - 38 (95%), sweating - 29 (72.5%), fever - 25 (62.5 %).

Bronchopulmonary syndrome manifested cough with phlegm - 39 (97.5%), shortness of breath - 37 (92.5%), chest pain - 21 (52.5%).

Among main complications of the disease have been predominantly pulmonary heart disease - 16 (40%), respiratory failure - 8 (20%), cachexia - 4 (10%), hemoptysis - 3 (7.5%) and in one sluchaelevostoronny pleurisy.

Radiologically in 28 (70%) cases, the process was unilateral in 12 (30%) - two-sided. In 17 (42.5%) patients, the defeat was of the nature of equity, the highest share accounted for more exciting processes lobe - 23 (57.5%).

The presence of bacteria found in 35 (87.5%) patients, of whom 61.2% bacterioscopic method and 88% bacteriological.

All patients received treatment for TB and 1 categories received isoniazid, rifampicin, pyrazinamide, ethambutol. More than half of patients during chemotherapy there was a significant positive trend - 27 (67.5%), a slight positive trend set in 12 (30%) patients, and one patient 1 (2.5%) with dekampensirovannoy form of diabetes condition It was unchanged.

Conclusion. After analyzing the data, we can conclude that the destructive pulmonary tuberculosis is more common in men in middle age, with pronounced symptoms of intoxication, with the defeat of a lobe of the lung and a massive smear.

GENETIC METHODS FOR DRUG-RESISTANT EPILEPSY

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Actuality. Mechanisms underlying pharrmacoresistance have been explored insufficiently. Enzymes of a system for biotransformation of xenobiotic and transporters for drugs are the key participants in the systems of metabolism of antiepileptic drugs (AEDs). Among proteins-transporters, glycoprotein P encoded by MDR1 gene plays an essential role in the processes of uptake, distribution and excretion of AEDs. In studies on associations with the drug resistance, among many polymorphic markers, C3435T polymorphism is preferable.

Objective. The work initiated to study gene MDR1 C3435T polymorphism and to assess its association with pharrmacoresistance formation in patients with epilepsy receiving antiepileptic drugs (AEDs).

Materials and methods. We examined 89 Uzbek patients with localization-related epilepsy and 55 unrelated healthy subjects.

Results. Distribution of 3435T/C polymorphism in MDR1 gene was analyzed in the patients with the localization-related epilepsy and nominally healthy donors. The distribution of frequencies of gene alleles was found to correspond to the Hardy-Weinberg equilibrium ($p > 0.05$). Values of relative deviation of the expected heterozygosity from those observed in the patients and the controls were $D = -0.11$ and $D = +0.08$, respectively. Incidence of genotypic variants of the polymorphism in the patients was as follows, CC was found in 18.6%, CT and TT were observed in 55.9% and 25.4% of cases. In the controls CC was found in 60.0%, CT and TT were observed in 33.3% and

6.6% of cases, respectively. The findings are the evidence for significant effect of functionally weak variants in C3435T polymorphism of MDR1 gene on efficacy of antiepileptic therapy. Thus, among the patients with slight or no response on the therapy, incidence of functionally unfavorable genotype, T/T, was 4 times higher than the one in the controls ($X^2 = 4.5$; $P = 0.03$; $OR = 4.8$; $95\%CI = 1.013, 22.48$). In addition, due to high specificity ($SP = 0.81$) and moderate sensitivity ($SE = 0.6$), the estimated AUC parameter (0.70) is the evidence for relatively high efficacy of the marker as an independent candidate-gene responsible for pharmacoresistance in epilepsy.

Conclusion: presence of T-allele of C3435T polymorphism of MDR1 gene increases risk of pharmacoresistance in the patients with epilepsy and is a significant and predicting criterion of efficacy and feasibility of the antiepileptic therapy conducted.

ROLE OF DUPLEX SCAN IN ATHEROSCLEROTIC LESIONS OF CAROTID ARTERIES IN PATIENTS WITH RHEUMATOID ARTHRITIS

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Objective. to study the effectiveness of the appointment of duplex ultrasonography in atherosclerotic lesions of the carotid arteries in patients with rheumatoid arthritis (RA).

Material and Methods: At the department rheumatology of the first Clinic TMA from 2011 to 2014 studied history and hospital records 108 RA patients aged 50.1 ± 9.3 years. Duplex scanning (DS) of aortic arch branches performed studied patients admitted for inpatient treatment.

Results / Discussion: Analysis of the results in 42 (38.9%) cases were detected atherosclerotic lesions of brachiocephalic arteries (BCA), a combination of pathological deformation (PD) with stenosis was noted in 11 (10.2%) cases. Of these, one isolated lesion of the carotid artery (CA) was observed in 22.6% of cases, bilateral in 33.9%, multiple affected CA and PA - to 39.6%. In 30.1% of patients affected CA combined with intracranial vascular lesions of the brain.

In 9 patients with RA revealed carotid artery stenosis greater than 70%, from 31% to less than 70% unstable plaques from 4 identified one occlusion of the internal carotid artery (ICA), in 2 double-sided-occlusion of the ICA and 1 common carotid artery occlusion (CCA). It should be noted, that in patients with occlusion of the internal carotid artery stenosis combined with the external carotid artery (ECA). In 6 cases, combined with atherosclerosis pathological tortuosity of the ICA. Atherosclerotic plaques (ATP) have a smooth surface in 13.2% of cases, uneven - 41.5%, ulceration, 20.7%, ulcerated - 16.9% thrombosis, thrombosis without ulceration with 5.6% of.

NEW METHOD OF ENHANCING THE CARDIAC AUSCULTATION THROUGH LISTENING MULTIBAND AUDIO TRACK

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Aim and tasks. The aim of this study was to increase the ability of young cardiologists, as well as medical students to auscultate the heart. Namely, to hear each of the sounds that accompany cardiac activity differentially in healthy people, as well as in various pathologies. Following objectives are adopted to achieve the goal: 1)

to determine the correlation between the ability to differentially listen to bands of tracks and the ability to define all audio components of the cardiac cycle; 2) explore the possibility of improving the ability of a participant to differentiated auscultation of the heart by repeated listening to a specially designed multi-band audio tracks.

Materials and methods. Work carried out on the basis of cardiology department of 3rd clinics of TMA. The study involved 12 Masters of Cardiology. In the first stage of the test, each master was offered to listen to an audio track using headphones. The track was created by a professional specially for testing and consisted of 8 bands which are played simultaneously. The subject had to mentally distinguish one of the bands and play it with his/her voice. The data were verified with the computer. If we had a similar band in computer, the answer was counted as correct and Master proceeded with identification of the next band of the track. At the end of the stage all correct answers were summarized and tabulated. In the second stage, the participants were asked to auscultate the heart. The patient, whose heart was supposed to be auscultated was previously examined by an experienced cardiologist M.E. Rahimova. Six auscultation phenomena were defined in this patient. Participants of the test should have described as many phenomena as they could. The number of truly detected sounds tabulated for every master correspondingly. Data was analyzed.

Results of the study. The average value of the results of the first stage was $5,5 \pm 1,44$ and of the second stage - $4,5 \pm 0,99$. Mode was equal to 4 in both tests. Two masters showed maximal results (8 out of 8) in track identifying. But most of participants could find only half of the sounds. These data totally corresponded to results of 2nd stage of investigation, where leaders performed as well as in previous test. From these data correlation ratio is calculated, which was equal to 0,91.

Summary and Conclusions. Strong direct correlation is observed between the ability to break down a track into its components and differentially listen to the sounds of the heart. The more "musical phrases" could contestant isolate from all variety of sounds of track, the more auscultation phenomena he/she was able to identify. Hence better examination of a heart was done. Based on the results and conclusions it is considered to hold the second part of the study, namely, to study the possibility of improving auscultation skills by repetitive listening to specially created audio tracks.

AN ALGORITHMIC APPROACH OF DIAGNOSTICS FOR GP IN RED EYE SYNDROME

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Goals and objectives: In this research work there was reviewed one of the common problems in primary care - the Red Eye (RE). The main goal is simplification of early differential diagnostics of RE syndrome in primary health care. Another goal is algorithm design of diagnostics for RE syndrome.

Material and methods: A consecutive study 16 patients with RE syndrome with using five main and suitable methods in primary health care - professional questioning, inspection with lateral illumination, measuring of visual acuity with Sivtsev - Golovin table, measuring intraocular pressure by palpation and approximately assessing of visual fields by Donders. All methods were based on detection five common

symptoms decreasing of visual acuity, discharge, eye pain, itching and photophobia.

Results. Among 16 patients ($n=16$) who were included in the study, 4 patients with decrease of visual acuity were examined at a mean age of 47 ± 0.54 years (25%). All patients with decreasing of visual acuity were directed to specialist with the exception of 1 patient who has sick for last 10 years with high degree myopia. Next 3 patients with eye pain were found at a mean age 34 ± 0.28 years (18.75%). 1 patient with uveitis, 1 patient with acute glaucoma attack and 1 patient with blefaritis. 5 patients with discharge were detected at a mean age 28 ± 0.76 years (31.25%). Character of discharge was purulent in 2 patients and serous in 3 patients. In this group 1 patient with dacryoadenitis, 2 with viral and 2 bacterial conjunctivitis. Last 4 patients with itching and photophobia were defined at a mean age 48 ± 0.36 years (25%). 3 patient with allergic conjunctivitis and 1 patient redness associated with overwork of eyes. Finally, 11 patients (68.75%) were entered to 1st category and 5 patients (31.25%) were entered to 2nd category of GP service.

Conclusion. Firstly, gradually using of five methods with identification of five main symptoms simplified the process of differential diagnostics. Secondly, this algorithmic approach can be recommended as a diagnostic algorithm for GP in RE syndrome. It was called "Five to five method" provisionally.

FEATURES OF THE COURSE AND STATUS OF THE CARDIORESPIRATORY SYSTEM IN RHEUMATOID ARTHRITIS AND SYSTEMIC LUPUS ERYTHEMATOSUS

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Goal. The study of the characteristics of the course and status of the cardiorespiratory system in patients with rheumatoid arthritis (RA), systemic lupus erythematosus (SLE), depending on the carrying out of basic therapy.

Materials and methods. Were examined 86 patients with RA and 38 patients with SLE. Patients receiving methotrexate (MTX) at an average dose of 10 mg/week included in 1 group (61 patients), group 2 consisted of 25 patients with RA, receiving only no steroidal anti-inflammatory drugs (NSAIDs) and glucocorticoids (GC).

SLE patients were divided into 2 groups – group 1 (25 patients) received cytostatic (cyclophosphamide) in the form of a program pulse therapy, group 2 (13 patients) treated mainly the glucocorticoids (GCS).

All the patients underwent General clinical and laboratory research.

Results. MT therapy was associated with a lower risk of cardio-vascular disease and overall and cardiovascular mortality. At the same time, the use of NSAIDs and corticosteroids has not been associated with a lower risk of vascular changes.

In patients with RA in 57% of cases observed in the lungs, of which 1/3 of the cases by the type of pneumonitis and interstitial pneumonia, in other cases were multifocal fibrosing alveolitis, especially in basal parts, strengthening bronchoscopists pattern. In patients taking long-MTX lung changes were more pronounced.

SLE patients receiving combination pulsterapii with cyclophosphamide 1000mg/ or software compared to patients not treated pulsterapii significant differences were found in decrease in symptoms of carditis, congestive heart failure.

Conclusion. 1. The defeat of the cardiovascular system is a frequent visceral lesions

in SLE and RA, which determine the prognosis of the disease. 2. Basic therapy MTX, cyclophosphamide in most cases has a positive effect on the cardiovascular system in RA, SLE, but can impair the function of the respiratory system at a sufficiently long-term use.

MORPHOLOGICAL PARAMETERS THYMUS AT EXPERIMENTAL HYPOTHYROIDISM AT YOUNG OF RATS.

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The close interrelation immune of system and thyroid gland is not subject to doubt. Nevertheless, the mechanisms of influence hypothyroidism of a condition on processes immunogenesis remain insufficiently found out. In job investigated influence short-term and long hypothyroidism at young (prepubescentis) rats on morphometrical parameters thymus. Hypothyroidism at prepubescentis of animals caused by introduction mercasolil in a doze 0.5 mg on 100 g of weight of a body within 14 days, further within one month they were given gave a supporting doze mercasolil at the rate of 0,25 mg on 100 g of weight of a body (short-term hypothyroidism). Other group of rats kept continued to receive mercasolil 1 month up to sexulorismature of age with the purpose of reproduction long hypothyroidism. On termination(ending) experiences thymus investigated morphological, morphometrical and ultra structural methods.

Morphometrical of research have shown, that the average area thymus at short-term hypothyroidism e on 10 %, and at long hypothyroidism e - on 14 % decreases in comparison with the control. The reduction of the area thymus goes for the bill only корковой of a zone (Cz), and the brain zone (Dz), opposite(on the contrary), rather extends. At short-term hypothyroidism eDz has made 37 %, and at long hypothyroidism e - 40 %, whereas at control animals the share M3 made only 26 %.

The calculation of crates in segments thymus has shown, that at rats with long hypothyroidism density of an arrangement timocytes in Cz almost on 15 % of below control animals, whereas at short-term hypothyroidism e the reduction of density of an arrangement of crates makes only 7 %. Density of distribution of cells Dz thymus at control and skilled animals remained without the special changes. At calculation cytograms thymus is revealed, that short-term hypothyroidism also renders the certain influence on cells structure Cz and Dz thymus. The reduction of number of all kindstimocytes from 8 up to 14 % was marked moderate, but authentic. At the same time, in this group of animals was observed significant (from 15 up to 35 %) increase of number monocyte and macrophage. The increase of quantity(amount) of these crates was highest in corticl to a zone thymus, in M3 it carried rather moderate character.

At long hypothyroidism the authentic reduction of a general(common) population of crates by unit of the area as cortical, and brain zones was marked. The number limfoblastCz more than in 2 times, and M3 - in 1,8 times has decreased in comparison with control animals. Reduction of number large, average and small limfoblast on 15-20 of % in all zones thymus also is revealed in comparison with the control is characteristics, that the number reticular-epithelium of cells (REC) in this group of animals authentically did not change, the small tendency (doubtful) to their increase in Cz and reduction in Dz was observed only. At the same time, both in cortical and in brain zones thymus the reaction shown as increase of quantity(amount) monocyte and especial macrophage from 25 up to 40 % in Cz and from 9 up to 18 %

in Dz thymus was saved expressed number monocyte and macrophage The increase of number plazma of cells in Dz more than on 20 % in comparison with the control, that was not observed at an animal with short-term hypothyroidism.

Thus, at experimental hypothyroidism the basic morphological changes occur in cortical to a zone thymus, where the processes immune proceed. These changes carry rather moderate character at short-term hypothyroidism and are most as much as possible expressed at long hypothyroidism.

CARBAMAZEPINE VERSUS LEVOTIRACETAM FOR PREVENTING SEIZURES IN TRAUMATIC BRAIN INJURY

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Objective. To establish the standard of care for patients with severe traumatic brain injury (TBI) is prophylactic treatment with carbamazepine for 7 days to decrease the risk of early posttraumatic seizures. Alternatively, levotiracetam does not require serum monitoring or have significant pharmacokinetic interactions. We compared the EEG findings in patients receiving phenytoin with those receiving levotiracetam monotherapy for seizure prophylaxis following severe TBI.

Materials and methods. Data were prospectively collected in 26 cases in which patients received levotiracetam for the first 7 days after severe TBI and compared with data from a historical cohort of 37 cases in which patients received carbamazepine monotherapy. Patients underwent 1-hour electroencephalographic (EEG) monitoring if they displayed persistent consciousness, decreased mental status, or clinical signs of seizures. The EEG results were grouped into normal and abnormal findings, with abnormal EEG findings further categorized as seizure activity or seizure tendency.

Results. Sixteen of 26 patients in the levotiracetam group warranted EEG monitoring. In 7 of these 16 cases the results were normal and in 9 abnormal; 2 patients had seizure activity, whereas 7 had seizure tendency. Twelve of 37 patients in the carbamazepine group received EEG monitoring, with all results being normal. Patients treated with levotiracetam and carbamazepine had equivalent incidence of seizure activity ($p < 0.01$). Patients receiving levotiracetam had a higher incidence of abnormal EEG findings ($p < 0.01$).

Conclusion. Levotiracetam is more effective than carbamazepine in preventing early posttraumatic seizures, but is associated with an increased seizure tendency on EEG analysis. Therefore is urgent for further researches.

CLINICAL AND ENDOSCOPIC FEATURES OF GASTRODUODENITIS ASSOCIATED WITH HELICOBACTER PYLORI IN ADOLESCENTS

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Currently, there is a critically growing number of children and adolescents with disorders of the upper gastrointestinal tract, especially associated with *Helicobacter pylori* (HP).

Objective: to evaluate clinical and endoscopic features of gastroduodenitis asso-

ciated with *Helicobacter pylori* in adolescents on outpatient and inpatient care in polyclinics No.45 in Almazar district, Tashkent city.

Materials and methods: the study involved 54 teenagers at the ages of 7 to 15 years with gastroduodenitis (CGD) associated with chronic HP.

Results of the research: abdominal pain was the leading symptom in clinical picture of CGD associated with HP, most frequently occurred before meals – 36 (87.8%), in 17 (41.5%) patients noted cramping pains and rarely dull. Pain was noted in all patients. Localization of pain in HP «+» CGD was in the epigastria area and in 12 (29.3%) around the navel. The clinical picture of CGD associated with HP was usually accompanied by dyspeptic symptoms: nausea, vomiting, waterbrash, bitter taste in mouth, change in appetite and violations of the chair. The most frequent dyspeptic symptom in adolescents CGD associated with HP was waterbrash in 27 (65.9%) cases. Waterbrash was primarily associated with functional and motor impairment of the stomach and duodenum, with failure of the cardiac department, and reflux esophagitis. Belching was noted less frequently, in 12 (29.3%) patients. CGD associated with HP pain was accompanied by nausea in 20 (48.8%) of adolescents and only in 1 (2.4%) case – with vomiting, fetid breath in 9 (21.9%), decreased appetite in 21 (51.2%) cases. Coated tongue was noted in 34 (82.9%) patients. Regular stool in 11 (26.8%), and constipation was observed in 30 (73.2%) patients with HP associated CGD. Clinically examined adolescents with HP associated CGD were indicative for a mild form of chronic intoxication in 10 (24.4%), medium form in 17 (41.5%) and a severe form of chronic intoxication in 14 (34.1%), with gray-ground coloured skin. Endoscopic study revealed different changes of the gastric and duodenal mucosa inflammation in adolescents with HP associated CGD. Endoscopic study of patients with HP associated CGD revealed transparent stomach fluid in 15 (56.6%) patients, yellow fluid in 21 (51.3%), and dark-green color fluid seen in 5 (12.1%) patients. Hypertrophy of the folds was noted in 5 (12.1%), subatrophic changes of the gastric mucous in 2 (4.8%), and gastric mucous hyperplasia was observed in 31 (75.6%) patients. Erosion was noted in 6 (14.6%) cases. Reflux esophagitis was observed in 34 (58.5%) adolescents with HP associated CGD.

Therefore, the presence of *Helicobacter pylori* considerably impairs clinical and endoscopic presentation of diseases affecting upper gastrointestinal tract.

COMPARATIVE ASSESSMENT OF EFFICACY OF COMPLEX TREATMENT OF OCULAR BURNS

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Actuality. Burn injuries range from 5% to 15% of all eye injury in ophthalmic practice. 65-75% of these cases occur in manufacturing, the rest at home. The frequency of this type of injury is increased due to the development of industrial chemistry.

Aim: to evaluate the clinical efficacy of the local drug “Taufon MF” in treatment of superficial burns of eyes.

Materials and methods: 30 patients (30 eyes) were observed.

The patients were divided into two groups: I group (control) - 15 patients (15 eyes) received conventional treatment, including antibiotics (0.3% eye drops of ciprofloxacin), anti-inflammatory therapy (0.1% diclofenac eye drops) and glucocorticoids (0.1% dexamethasone eyedrops). II group patients (study) - 15 patients (15 eyes), along with the above mentioned drugs used “Taufon MF” (4% -10 ml eye-drops of LLC «MEDIOFARM», Uzbekistan) 2 drops 3 times per day.

Results: the symptoms disappearance in the study group took place on average 1.6 times faster than in the control one.

All patients experienced a decrease of corneal syndrome, that was observed on the 4-5th day of treatment in the study group, while in control these effects were observed on the 6-7th day. Restoration of the defect and corneal transparency happening to 5-6th day in the study group, and corneal epithelialization was observed on the 5th day from the start of treatment (control group - 7-8th day).

Conclusions: The data indicates that the treatment with "Taufon MF" is more effective than traditional one. Preparation "Taufon MF" greatly facilitates the burn process and shortens epithelialization of the cornea and resorption of infiltrates, unlike conventional treatment.

EFFICIENCY OF PATHOGENETIC TREATMENT OF EARLY RHEUMATOID ARTHRITIS

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Goal. To evaluate efficacy, tolerability and safety of leflunomide in the treatment of early Rheumatoid arthritis (RA).

Material and methods. 60 patients was documented with diagnosis of RA at the age of 17 to 62 years, divided into 2 groups. 1st group was consisted of 40 patients with disease duration up to 6 months. (on average $4,5 \pm 1,7$ months.) and 2nd group was included 20 patients with RA duration of 6 months. up to 1 year (on average $7,8 \pm 4,5$ months.). Efficacy of treatment was evaluated by DAS 28, ACR criteria and general condition of pain (VAS), laboratory parameters. Leflunomide was administered in dose of 20 mg per day, duration of treatment was 12 months.

Results. In both groups was marked reducing of activity of the RA and clinical features were achieved during the first 2 months of treatment. In 1st group improvement was progressed in parameters during the treatment period. In 2nd group reducing of activity was occurred in 5 months. In 1st group 33 (82.5%) patients had clinical remission towards 6 months of treatment with leflunomide. The preparation has been canceled due to non-desirable events in 8 patients, serious side effects were not observed.

Conclusions. Leflunomide is a highly basic anti inflammation drug for the treatment of early RA, which well tolerated. In the appointment of leflunomide in patients with early RA exactly which has disease duration less than 6 months effectiveness of therapy higher than when administered at a later date.

FEATURES OF ARTERIAL HYPERTENSION IN THE CARDIOVASCULAR FORM OF DIABETIC AUTONOMIC NEUROPATHY

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Aim: To examine for hypertension in patients with type 2 diabetes with cardiovascular form of diabetic autonomic neuropathy.

Materials and methods. This study involved 50 patients (men and women) with type 2 diabetes, whose average age was $54,3 \pm 3,2$ years and 10 healthy people at the age $56,6 \pm 2,26$ years was a control group. After inclusion in the study, all patients

were conducted standard cardiovascular tests (ITC) for the detection of cardiovascular form of diabetic autonomic neuropathy (DAN), as a result of which all patients were divided into groups depending on the availability of DAN DAN+, and DAN-. When the patients in the study they conducted a survey, ECG study of heart rate variability and dispersion of duration of electrical ventricular systole.

Results of the study. The group identified by DAN+ 30 people and DAN- 20 people are distributed in this group. In patients with diabetes DAN long duration and the state of carbohydrate metabolism it was significantly worse than that of patients without DAN. Only the level of glycated hemoglobin was similar in both groups of patients. DAN diabetic patients associated with a significant decrease in heart rate variability ($p < 0,01$) and longer ($p < 0,001$) and the dispersion of the interval QT ($p < 0,001$). Labile for hypertension is characteristic of patients with DAN, in which greater scope is marked fluctuations in blood pressure during the day and a decline in the average values of blood pressure day / night. There breach of circadian blood pressure profile - mainly in the form of its insufficient decline at night (non-dipper) and pronounced rise in blood pressure at night compared to daytime (night-picker). The absence of blood pressure lowering at night is a clinically significant disorder as they are associated with the development of left ventricular hypertrophy and increases the risk of cardiovascular complications. Increased systolic blood pressure to 10 mm Hg at night is associated with increased cardiovascular risk by 31%. The reason for increase in blood pressure at night is considered to be an imbalance of sympathetic and parasympathetic activity, consisting in the relative predominance of sympathetic innervation of the night. Surveyed patients out of 30 patients had 3 (10%), dipper and 10 (33.3%) non - dipper, 17 patients 56.7% night-picker on the systolic blood pressure. In patients with DAN was daily SBP $143 \pm 8,7$ mm Hg, nightly SBP is $136,8 \pm 8,3$ mm Hg. Average daily DBP is $90,3 \pm 5,5$ mm Hg and nightly DBP is $81,7 \pm 5,0$ mm Hg. Systolic blood pressure of 30 patients showed type 2 diabetes in 10 patients (33.3%), 8 (26.7%) and 12 (40%) patients night- picker.

Conclusion. The patients with diabetes type 2 was found in 60% of diabetic cardiovascular autonomic neuropathy form of cardiovascular tests. In patients with type 2 diabetes with DAN hypertension was observed in 30% of the type of non-dipper, from 48.4% night - picker. The course of hypertension with type night-picker increases the development of cardiovascular complications in patients with type 2 diabetes with cardiovascular form of diabetic autonomic neuropathy.

EVALUATION OF HIGHER CORTICAL FUNCTIONS OF ALZHEIMER'S DISEASE

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Purpose. Evaluate the effectiveness of diagnostic disorders of higher cortical functions in patients with Alzheimer's disease using scales GDR (Global Deterioration Rating) and MMSE (Mini Mental Scale Examination).

Material and methods. Study involved 52 patients (32 men and 20 women) aged 65 to 77 years (mean age $70,8 \pm 3,3$ years) divided into 2 groups: group 1 (basic group) - Alzheimer's disease 45 patients, group 2 (comparison group) - 27 patients with chronic cerebral ischemia (II- IIIst.) with mild cognitive impairment. GDR and MMSE were used for assessing the severity of cognitive impairment.

Results. These neuropsychological studies indicate the results of cognitive functions: in group I - GDR $5,0 \pm 0,5$ scores, MMSE $21,8 \pm 4,05$ scores. In group II - GDR $2,0 \pm 0,5$ scores, MMSE $27,0 \pm 0,5$ scores. Senile dementia develops in commonly characterized by a relatively sparse confabulation products. Confabulation shifted to a more or less distant past ideas about the environmental situation and the self (amnesic confabulation). At the stage of mild dementia clearly identified the most features of amnesic aphasia, amnesic disorder component of praxis, and in some cases, signs of constructive dyspraxia. There is a long preservation of motor component of praxis.

Conclusions. The total scores on the MMSE and the GDR is a sensitive indicator of cognitive deficits and higher cortical functions of mild to moderate Alzheimer's disease before, is effective in determining therapeutic approaches and tactics of early prevention in patients with Alzheimer's disease.

REHABILITATION OF PATIENTS WITH VERTEBRAL AND SPINAL CORD INJURY BY ROBOTIC SYSTEMS “ERIGO”

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Research objective: development of a technique of application of robotic system “Erigo” for rehabilitation of patients in the first months after a spinal cord injury.

Research task: studying the efficiency of training sessions with application of the robotic complex «Erigo» to patients with consequences of a spinal cord injury to restore motion activity; investigation of the mechanisms of a medical effect of biomechanical exposure of the complex; the analysis of late results of robotic mechano-therapy application.

Object of research: patients with a vertebral and spinal cord injury in the intermediate period.

Materials and methods: The research was conducted at the unit of neuro-rehabilitation of the clinics of the Tashkent Medical Academy. The patients (15 people) with a spinal injury, average age 34. 6 took part in the rehabilitation program. In the given work the efficiency of complex technology neuro-rehabilitation is studied. The technique of physical rehabilitation with robotic system “Erigo” used for patients in the intermediate period of a vertebral and spinal cord injury has been developed and evaluated.

Results: The significant increase in the muscular force in the lower extremities of patients of group 1 by 1.0-1.5 points in comparison with those of group 2 was noted. The muscular tone has decreased by 0.8-1.2 points in the basic group compared to the control group. The changes in the rank in subgroups without complete impairment of conductivity were registered using the ASIA scale. Reliable improvement of indicators by 24 % in the subgroup of patients receiving training on «Erigo», while in the control subgroup, it was only by 12 %. In the subgroups with complete impairment of conductivity, no changes in sensitivity occurred. The early terms of transfer of the patient in vertical position with no orthostatic responses in comparison with application of the standard methods of rehabilitation have been established for the first time. In the basic group, the indicator has decreased from 66 % to 4 %; in the control group, from 62 % to 36 %. The patients of group 1 (66%) have been adapted to the vertical position by 4-9 training session, while in group 2 (36 %) of the patients, 18 training sessions were not enough to transfer the patients in vertical position, the others have succeeded by day 15-18. The results of mobility and locomotion

with auxiliary means are 2-3.5 times better in the group receiving robotic mechano-therapy. The indicators of central hemodynamics before the rehabilitation course and after its termination, and also in the course of application of the developed technique have changed: AP/S in the patients of the basic group decreased from 123.9 ± 6.8 to 117.5 ± 3.5 mm Hg, $p < 0.01$, AP/D - from 83.5 ± 2.4 to 75.5 ± 7.5 mm Hg, $p < 0.01$; in patients of the control group, the AP/S decreased from 119.8 ± 3.0 to 117.5 ± 3.7 mm Hg, $p < 0.01$, AP/D - from 78.7 ± 6.3 to 70.1 ± 4.5 mm Hg, $p < 0.01$.

Conclusions: The developed program of rehabilitation of patients with spinal cord injuries contributes as much as possible to early transfer of the patient in vertical position, to completion of locomotor deficiency at the expense of formation and support to a correct stereotype of walking, improves psycho-emotional level, that, in turn, allows the given type of persons, to obtain not only physical rehabilitation, but also social adaptation into society.

EXPERIENCE OF DIAGNOSIS OF FUNCTIONAL DISORDERS OF GASTROINTESTINAL TRACT IN PATIENTS WITH COMPLICATED FORMS OF TUBERCULOUS SPONDYLITIS AND THEIR SURGICAL TREATMENT

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Objective: Diagnosis of functional disorders of the gastrointestinal tract in complicated forms of TB spondylitis (TS), before and after spinal surgery.

Methods and scope of the study: The study involved 162 patients with complicated forms of the TS. 85 (52.4%) - male and 77 (50.6%) - female. Localization of the specific process: cervical- 9 (5.5%), thoracic - 47 (29.0%), thoracolumbar - 53 (32.7%), lumbar - 34 (20.9%) and lumbosacral spine - 19 (11.7%) cases. Neurological disorders: radicular syndrome - 97 (59.8%), deep paresis and plegia with dysfunction of the pelvic organs - 65 (40.1%) patients. Examination included: X-ray in all patients, the contrasted myelography - 7 (4.3%) cases, MRI performed in all patients with a magnetic field strength of 0.3 to 1.5 Tesla. The severity of neurological impairment was assessed on the basis of records of neurologist scaled by Frankel scale. Involvement of 2 and more vertebrae was found in 114 (70.3%), more than 3 vertebrae in 48 (29.6%) patients.

Results: Ultrasound examination carried out by the standard special technique, functional disorders was studied taking into account the localization of the specific process in the spine. Results showed that 9 (5.5%) patients with cervical spine involvement developed delayed evacuation accompanied by spasms of the pylorus, inhibition of peristalsis (superficial motility, less than $\frac{1}{4}$ of the depth of the lumen, rare frequency of contractions) for 15-20 minutes, and then rapid evacuation of more than half the volume of gastric contents, after that the evacuation was stopped again, wavering of the content of the enlarged duodenum, duodenal reflux, slowing the evacuation. In 47 (29.0%) patients with involvement of the thoracic spine and 53 (32.7%) patients with thoracolumbar spine involvement spasm of the pylorus, delayed evacuation in the duodenum for 10-15 minutes and normal or enhanced peristaltic activity (the depth of peristaltic waves - $\frac{2}{3}$ - $\frac{2}{4}$ of the lumen of the stomach) were observed. Then the evacuation was uneven and generally was

slowed (after 40 minutes in the stomach was about 100 ml of liquid). In 34 (20.9%) patients with lesions of the lumbar spine showed decrease of the motor-evacuation function of the stomach, which was accompanied by slowed and weakened peristalsis. In 19 (11.7%) patients with lumbosacral spine involvement periodically was symptoms of the disorder peristaltic activity (the depth of the peristaltic waves as 1/4 of the lumen of the stomach, a single frequency of contractions greater than 1.5 min.). The data showed high information of the developed technique in patients with complicated forms of tuberculosis of the spine and requirement of pathogenic therapy of the disorder.

Conclusions: The most objective, accessible and applicable in presence of paresis and paralysis of limbs before and after surgery in patients with complicated forms of TS and functional disorders of the gastrointestinal tract are ultrasound methods of examinations.

EFFICIENCY OF INTRAVENOUS IRON SUPPLEMENTATION IN CHRONIC HEART FAILURE WITH ANEMIA

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Objectives. This study was conducted to study the efficacy of intravenous iron in patients with decompensated heart failure with iron deficiency anemia.

Background. An important problem is the timely detection and elimination of conditions that exacerbate the severity of heart failure, such as anemia. The prevalence of anemia in patients with chronic heart failure according to a multicenter (ELITE II, ValHeFT, COPERNICUS, VEST, COMET, etc.) And clinical studies of 10 to 55%, while uniquely anemia is considered as a factor negatively affecting the course, prognosis and outcome of heart failure. Recent small researches in which was used intravenous iron without EPO in patients CHF with anemia, demonstrated increase in hemoglobin, decrease class NYHA CHF, an increase left ventricular ejection fraction, reduce the number of hospitalization.

Methods. Included were 63 patients, the main cause of hospitalization which was the heart failure of ischemic origin in the background. Patients were divided into two groups: in group 1 (37 patients) were treated ferrofer with standard therapy for heart failure hospitalization, group 2 (26 patients) was the comparison group.

The study included patients with FC II-III CHF. The 1st (core) group was 21 (56%) patients with class II and 16 (44%) from the class III, the 2-nd (control) - 15 (57.6%) and 11 (42.4%) patients, respectively. The average Hb level was $98,4 \pm 4,6$ g / l in the 1st group and $100,9 \pm 1,3$ g / l in the 2nd, In laboratory parameters, patients in both groups did not differ significantly.

Results. After 6 months. surveillance CHF FC in the iron group was significantly ($p = 0.033$) lower at 51.7% below baseline in the control group by 18.4% lower than the original. Patients in the iron group showed significant changes in hematological parameters compared with baseline: the average Hb level rose to $122,7 \pm 2,3$ g / l ($p < 0.001$), hematocrit - up to $37,1 \pm 0,7$ ($p = 0.001$), there was a significant increase in the levels of serum iron, ferritin and transferrin reduction. After 6 months in the group showed a significant increase in iron EFLV (with up to $31,3 \pm 3,2$ $36,3 \pm 2,7\%$, $p = 0.033$), whereas changes in the control group ejection has not occurred ($30,0 \pm 2,4$

to $34,1 \pm 1,3\%$, $p = 0.678$).

Conclusions. Adequate treatment of heart failure with correction anemia slows the progression of heart failure, which will reduce the number of readmissions, increase exercise tolerance and improve quality of life.

The important thing is that in our study achieved an improvement of clinical and laboratory parameters after payment of CHF in patients treated with iron, stored for a long time after discharge from the hospital. The progression of the severity of heart failure six months in patients treated with iron, was not significantly mentioned by the control group. This may indicate as a prolonged effect ferrofera and a more effective therapy for decompensated heart failure during treatment of IDA.

Thus, the present study demonstrated that intravenous iron can serve as a simple, safe and relatively inexpensive means of improving the level of Hb, improve symptoms and increase exercise tolerance in patients with CHF and iron deficiency anemia.

ELECTROCARDIOGRAPHIC VARIATIONS IN PSORIATIC ARTHRITIS PATIENTS

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Relevance of the theme. Psoriatic arthritis is a chronic disease characterized by erosion of articular surface, osteolysis of numerous joints, ankylosis of joints, spondylarthritis, sacroileitis and systematic injury. There is a high risk of impairment of the cardiovascular system in psoriatic arthritis, particularly when there is a rapid progressive course of atherosclerosis. Fatal cases rate in psoriatic arthritis compared to population is equal to 69% for men and 59% for women, which is caused by cardiovascular system. That is why electrocardiographic findings play a vital role in early diagnosis of cardiovascular system impairment in psoriatic arthritis patients.

Purpose of the research was to determine changes in electrocardiogram analysis in order to diagnose cardiovascular system impairments in psoriatic arthritis patients.

Method of research: In this research 50 psoriatic arthritis patients were analyzed who underwent treatment course at Rheumatology and Cardiorheumatology departments of the 1st Clinic of Tashkent medical academy in 2013-2015. Of those, 21 are men and 29 are women. Patients' age was between 19 and 80 (median age $52,2 \pm 1,9$), duration of the disease constitutes from 1 year up to 30 years.

In this research we studied functional characteristics of cardiovascular system impairment in psoriatic arthritis. Electrocardiographic signs of impairment of the cardiovascular system were positive in all psoriatic arthritis patients (100%).

Research results: This study showed that from 22 patients (44%) aged 19-45, 13 patients (26%) were observed with myocardium metabolic changes, 6 patients (12%) were observed with sinus tachycardia, left ventricular hypertrophy, metabolic changes in myocardium, 3 patients (6%) were observed with right total bundle branch block.

From 18 patients (36%) aged 45-60, 7 patients (14%) were observed with metabolic changes in myocardium, 9 patients (18%) – with left ventricular hypertrophy, dystrophic changes in myocardium, 2 patients (4%) had sinus tachycardia, left ventricular hypertrophy, dystrophic changes in myocardium.

From 10 patients (20%) aged over 60, in 6 patients (12%) electrical axis was de-

viated to the left, left ventricular hypertrophy, metabolic changes in myocardium were observed, in 2 patients (4%) – metabolic changes in myocardium, ventricular premature beats, and 2 patients (4%) had sinus arrhythmia, electrical axis deviated to the left, and total right bundle-branch block.

Conclusion: According to results of this research, there is a high risk of cardiovascular system impairment in psoriatic arthritis patients, and electrocardiographic test is recommended for prompt diagnosis of initial impairment of the cardiovascular system.

INFLUENCE OF ARTERIAL HYPERTENSION IN PATIENTS WITH METABOLIC SYNDROME AND NONST-ELEVATION ACUTE CORONARY SYNDROME

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Background. Hypertension is a strong contributor to cardiovascular disease in patients with the metabolic syndrome. It has been shown to not only be an independent risk factor, but it also contributes to the development of other risk factors for cardiovascular disease.

Aim of this work was to evaluate the impact of hypertension on the in-hospital morbidity and mortality in patients diagnosed with metabolic syndrome and acute coronary syndrome without ST segment elevation (ACS NSTEMI).

Material and Method: Prospective study of 72 patients with MS and ACS NSTEMI, between October 2013 and November 2015. They were divided into two groups: patients with MS and a history of hypertension (Group I: n = 59, 82.0%, 49.0% men) and patients with MS and without a history of hypertension (Group II: n = 13, 18.0%, 53.8% men) and compared for in-hospital mortality and for the primary composite endpoint (PCE) – nonfatal myocardial reinfarction, stroke and total mortality.

Results. Group I was older [I: 72.43 (interq (iq) =14.62) vs II: 67.56 (IQ=13.82), $p < 0.05$], had higher body mass index [I: 27.45 (IQ=6.68) vs II: 27.12 (IQ=5.84), $p < 0.05$] and a higher prevalence of previous stroke [I: 14.5% vs II: 0.0%, $p < 0.05$]. No statistical difference in relation to other previous cardiovascular history. On admission, there was no difference in the Killip classes, nor in the analytical parameters (blood glucose, creatinine, BNP). During hospitalization, there was no difference in regard with the adopted risk stratification strategy, or the in-hospital medication, except for ACE inhibitors [I: 67.9% vs II: 4.7%, $p < 0.01\%$] and diuretics [I: 48.3% vs II: 22.0%, $p < 0.05$] that were most frequently used in group I. There was also no difference for in-hospital complications, nor mortality [I: 6.3% vs II: 15.6%, $p = ns$] nor PCE [I: 11.8% vs II: 18.3%, $p = NS$] between the two groups. No difference in the secondary prevention strategy between the two groups.

Conclusions: Although there was a high prevalence of hypertension in patients with MS and ACS NSTEMI, this was not associated with increased in-hospital morbidity and mortality in this subjects.

THE ROLE OF INFLAMMATORY COMPONENT IN THE PATHOGENESIS OF PARKINSON'S DISEASE AND THE DEGREE OF AWARENESS ABOUT THIS DISEASE

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The purpose of work: The aim of our study was to determine the role of inflammation in pathogenesis of Parkinson's disease and the level of awareness of the population about this disease as well as conduction of an active educational work using modern methods.

Materials and methods: The study included 12 patients with a clinical picture of Parkinson's disease diagnosed in accordance with the generally accepted criteria in the Department of Neurology of the Tashkent Medical Academy. Among them: 5 men and 7 women, mean age was $59,3 \pm 11,6$ years, mean duration of disease - $4,5 \pm 2,1$ years. In defining the role of inflammation in the development of Parkinson's disease, the general blood analysis with determination of ESR and C-reactive protein has been implemented. The basis of our work to identify awareness of the population was electronic questionnaires actively promoted through social networks and the author's web page devoted to the PD.

Results: Out of the patients studied, the average severity of the clinical (motor) symptoms according to the rating scale of Unified Parkinson's Disease Rating (UPDRS) was $24,5 \pm 5,3$ points.

Most of the patients included in the study (8 patients - 66.7%), were socially active and were employed, while 4 patients (33.3%) were retired and had a group of disability. In general the blood test on 9 patients (75%) indicated a left-side shift in leukocyte formula with leukocytosis ($> 12.1 * 10^9$ mmol / l). C-reactive protein indicator increased to 36 mg / L on 8 patients (66.6%) with the absence of inflammatory processes on the latter. Electronic survey conducted online using Survio.com revealed the following:

1) a survey has been conducted on 100 people in the age group of 17 to 67 years, which suggests that people representing relatively high risk of developing the PD have been involved;

2) Respondents participated in the survey equally represented both genders: (51% men, 49% women);

3) 30% of respondents had no knowledge and information about Parkinson's disease, while remaining 70% possessed certain misconceptions about symptoms of the disease;

4) only 65% of respondents believe that PD causes disability, i.e. significantly reduces the quality of life, while only 16% of respondents had relatives with the disease;

5) about 40% have never met the patients with PD pathology. Most of the respondents (61%) believe that this pathology cannot be prevented.

Conclusions. The derived results clearly show the role of inflammatory component in the development of Parkinson's disease. The findings expressed low level of awareness of PD among both ordinary citizens and medical workers/students. This fact induced us launch and successfully run an online page <http://upda.ucoz.net> to

ensure an active promotion on social media in easier and better perceivable format.

Those respondents, who have encountered this problem before, have indicated late appeal to the family physicians due to lack of information about the disease. As a result, rendered medical assistance was inefficient and patient disability time-frame becomes rather short.

Online survey questionnaires as well as PD dedicated website help people define first signs of the Parkinson's disease, consult a medical specialist and start appropriate effective treatment while preventing early disability.

QUANTITATIVE MRI ASSESSMENT OF THE DIFFERENCES IN LATERALIZATION TEMPORAL LOBE EPILEPSY

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Objective. Defining language lateralization is important to minimize morbidity in patients treated surgically for temporal lobe epilepsy (TLE). Magnetic resonance imaging (MRI) offers a promising, noninvasive, alternative strategy to the Wada test. Here we have used MRI to study healthy controls and patients with TLE in order to (I) define language-related activation patterns and their reproducibility; (II) compare lateralization determined by MRI with those from of the Wada test; and (III) contrast different methods of assessing MRI lateralization.

Materials and methods. 12 healthy right-handed controls and 19 right-handed preoperative patients with TLE (12 left- and 7 right-TLE) were studied at 1,5T using MRI and a verbal fluency paradigm. A Wada test also was performed on each of the patients. Greater activation was found in several areas in the right hemisphere for the left-TLE group relative to controls or right-TLE patients. Either relative hemispheric activations calculated based on the extent or the mean signal change gave consistent results showing a more bihemispheric language representation in the left-TLE patients. There was good agreement between the Wada and MRI results, although the latter were more sensitive to involvement of the nondominant right hemisphere. The reproducibility of the MRI values was lowest for the more bihemispherically represented left-TLE patients.

Results. Our results further demonstrate that the high proportion (33%) of left-TLE patients showing bilateral or right hemispheric language-related lateralization suggests that there is considerable plasticity of language representation in the brains of patients with intractable TLE.

Conclusion. Noninvasive MRI measures of language-related lateralization may provide a practical and reliable alternative to invasive testing for presurgical language lateralization in patients with TLE.

SEIZURE SEMIOLOGY IN PATIENTS WITH BILATERAL TEMPORAL LOBE EPILEPSY

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Objective: Laterality in temporal lobe epilepsy is usually defined by EEG and imaging results. We investigated whether the analysis of seizure semiology including

lateralizing seizure phenomena identifies bilateral independent temporal lobe seizure onset.

Materials and methods: We investigated the seizure semiology in 17 patients in whom EEG-video-monitoring documented bilateral temporal seizure onset. The results were compared to 20 left and 20 right consecutive temporal lobe epilepsy (TLE) patients. The seizure semiology was analyzed using the semiological seizure classification with particular emphasis on the sequence of seizure phenomena over time and lateralizing seizure phenomena. Statistical analysis included chi-square test or Fisher's exact test.

Results: Bitemporal lobe epilepsy patients had more frequently different seizure semiology (100% vs. 40%; $p < 0.001$) and significantly more often lateralizing seizure phenomena pointing to bilateral seizure onset compared to patients with unilateral TLE (67% vs. 11%; $p < 0.001$). The sensitivity of identical vs. different seizure semiology for the identification of bilateral TLE was high (100%) with a specificity of 60%. Lateralizing seizure phenomena had a low sensitivity (59%) but a high specificity (89%). The combination of lateralizing seizure phenomena and different seizure semiology showed a high specificity (94%) but a low sensitivity (59%).

Conclusion: The analysis of seizure semiology including lateralizing seizure phenomena adds important clinical information to identify patients with bilateral TLE.

QUALITY OF LIFE PATIENTS WITH PSORIATIC ARTHRITIS

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In recent years, psoriasis and psoriatic arthritis (PsA) is considered as the clinical manifestations of systemic process of the psoriatic disease. Along with other chronic diseases, PsA able to significantly impair the quality of life (QOL) of patients who may suffer both physical and psychological discomfort.

Material and Methods. The study involved 40 patients with a documented diagnosis of PsA, including 23 women. and 17 male. The patients' age - from 25 to 75 years (cf. age $50,2 \pm 10,0$ years.). 27.1% of patients in the study had the time of disease activity grade I, 65,7% - II, 7,2% - III. In 19 persons. there was vulgar and limited in 21 - common psoriasis in stationary stage. QOL of patients was determined by SF-36 questionnaire. Carried out with the calculation of 8 main indicators: FF - physical functioning, RFF - role-physical functioning, B - pain, OZ - general health, F - vitality, SF - social functioning, the RAF - the role emotional functioning, CT - mental health. Assessment of functional status was performed using a questionnaire HAQ (Health Assessment Questionnaire).

Results. Analysis of the SF-36 scales showed that patients with PsA all QoL were significantly worse than in the control group. In the most varied indicators of physical health (FF, RFF, B, OZ). RFF were reduced by 71.7%, component B at 46.5%, the rate of FF 50.3% as compared with healthy individuals. Among the QOL indicators characterizing the psychological health (F, SF, RAF, PP), to a greater extent RAF were reduced - by 57.8% and F - 33.6%. Indicator CF, which is the highest among all scales of QOL in patients with PsA (54.4%), however was 20% worse than in healthy individuals. To evaluate the factors affecting the quality of life indicators of patients with PsA, an analysis was undertaken of some correlations of clinical parameters

with the values of the individual SF-36 scales. Most schools had a statistically significant correlation with age, disease activity, the number of tender and swollen joints, pain and fatigue VAS, etc. high negative correlation between all the scales of the SF-36 and the functional status of patients with PsA according to HAQ was found

Conclusion: PsA patients significantly improves the quality of life: physical suffering, psychological health, their social functioning is disrupted. Severity of violations on various scales of SF-36 correlated with the main indicators of inflammatory activity (number of tender and swollen joints, articular index Ritchie, the severity of pain and morning stiffness, VAS), as well as functional status by the HAQ.

EFFECTS OF ARB BLOCKERS ON INSULIN RESISTANCE AND LIPID PROFILE IN PATIENTS WITH METABOLIC SYNDROME

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Objective. The aim of this study was to assess the effects of using ARB blockers on insulin resistance, glucose metabolism, body fat composition, and lipid profile in patients with the metabolic syndrome (MS).

Materials and Methods. A total of 61 patients with MS, who had been followed for at least one year were included in the study. The patients were divided into two groups: Group 1-29 patients (17 female, 12 male; aged 45-62 years old, mean age 51 ± 8.0) who were not using an ARB blocker and Group 2-32 patients (17 female, 15 male; aged 47-61 years old, mean age 54 ± 7) who were taking an ARB blocker. Anthropometric and laboratory data obtained at baseline and at the 3rd, 6th, and 12th months of follow-up were compared in the two groups.

Results. Comparison of the data in the two groups at third, sixth, and twelfth months revealed no statistically significant differences in terms of weight standard deviation score, body mass index standard deviation score, weight for height percentile, body fat percentage, and very low-density lipoprotein values. However, there were statistically significant differences in mean glucose ($P=0.027$) and insulin levels ($P=0.412$), homeostasis model assessment for insulin resistance ($P=0.002$), LDL ($P=0.025$) and high-density lipoprotein ($P=0.0012$) values, and highly significant differences in mean triglyceride values ($P=0.00028$).

Conclusions. The positive effects of ARB blocker drugs, particularly on dyslipidemia and insulin resistance, might bring them forth as first-line drugs in the treatment of patients with metabolic syndrome. Further studies are needed for a definitive conclusion.

PSYCHOSOCIAL AND BEHAVIOURAL CONSEQUENCES OF EPILEPSY AND ITS MANAGEMENT OPTION AS PSYCHO-NEUROLOGIST

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Epilepsy is often associated with anxiety, depression, behavioural problems and cognitive dysfunction. Psychological interventions such as psychotherapy; individual, group or family counselling; progressive relaxation therapy and cognitive behavior therapy have

been used to treat psychopathology associated with epilepsy (Davis 2014; Miller 2015).

Objectives. To evaluate the benefits of interventions used to treat clinically significant psychotic symptoms occurring in people with epilepsy with regard to global improvement, changes in mental state, hospitalization, behavior, quality of life, effect on the frequency of seizures and interaction with antiepileptic drugs.

Materials and methods. From 2013 to 2015 in the department of neurology at 1st and 2nd clinics of TMA observed 48 patients with epilepsy, 26 males and 22 females, with idiopathic epilepsy, aged between 18 – 60, without any other somatic or neurological comorbidity at the time of the psychological evaluation. Among the patients, 23 patients had early-stage epilepsy, its duration being up to 3 years; 25 patients, had seizure remission. We divided them into 2 groups: 1st group (n=24) which was performed “psychotherapy +AED”, 2nd group (n=24) which was performed only “AED therapy”. To assess the cognitive, emotional and behavioral spheres, a psychological diagnostic assessment was carried out by using following scales as experimental psychological diagnostic methods: The Shmisheck-Leongard questionnaire consists of 88 questions, 10 scales to explain specific character accentuation, The Eysenck Personality Inventory (EPI) measures two pervasive, independent dimensions of personality, Extraversion-Introversion and Neuroticism-Stability, Beck's Depression Inventory (BDI) is 21-item self-report questionnaire that measures the severity of depression.

Results. Results showed a decrease (improvement) in the (BDI) over the course of treatment, with a mean decrease from 17.6 ± 7.1 (SD) to 11.3 ± 5.9 (SD) post-treatment in 1st group. In addition, 12 patients experienced a decrease in epileptic seizure frequency during the treatment period. 7 had no epileptic seizure events, except for occasional recurrence when they experienced increased emotional distress. Several months after the 12-week trial, a follow-up questionnaire was completed. The results showed that 14 of the 24 remained seizure-free. The rest reported a reduction in severity, intensity and duration. At the time of write-up, the authors' long-term follow-up had shown that of the five participants who had continued in therapy with one of the authors, all had been either seizure-free or had only a mild increase in seizure activity at times of stress. Of the 24 participants in both groups, 7.7% reported being seizure-free at the start of treatment; 47.3% ($P = 0.02$) and 24% ($P = 0.05$) respectively were seizure-free at the end of treatment and follow-up. With regard to treatment protocols, all of the 48 patients (100%) were taking antiepileptic drugs at the start of treatment, but by the end of treatment only 9 patients were taking antiepileptic drugs in 1st group. At follow-up, of the 16 patients who responded, there had been no change in their medication use since the end of treatment in 2nd control group. Significant improvements were seen in the scores on the psychological measures including the BDI and EPI in 1st group

Conclusions. The findings suggest that “psychotherapy +AED” have greater effectiveness as measured by treatment persistence and lower risks for hospitalization and emergency department visits compared with only AED therapy.

"THE PECULIARITIES OF URINARY TUBERCULOSIS IN MODERN CONDITIONS IN TASHKENT"

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Introduction. Up to now, genitourinary tuberculosis in adults has been continuing to appear in the form of running and common forms, due to the complexities

of the diagnosis of this disease are initial manifestations of the disease and lack of clear clinical criteria to detect early signs of urogenital tuberculosis.

Objective. To optimize the system of timely detection of urinary tuberculosis in Tashkent.

Materials and Methods. It was selected the number of new cases and the dispensary registered with genitourinary tuberculosis who were subjected to retrospective analysis. To evaluate the studies used different methods of statistical analysis.

Results. Genitourinary TB pathogenesis hematogenous is being clinically implemented in terms of the immune maladjustment. Isolation of groups at risk of developing urinary tuberculosis, and their organization of follow-up helps to identify the disease in its early stages. In men with 28.3% of tuberculosis of the urinary system is manifested symptom of chronic prostatotectystitis, while 72.7% of women were observed pattern of chronic inflammation of the upper urinary tract and bladder.

Such a pathognomonic clinical picture of the disease leads to late uptake and thus to late diagnosis of the disease and requires the allocation of at-risk groups and their follow-up.

The number of patients with urogenital tuberculosis in Tashkent for 2012 was 4.95%, includingly 2.12% was initially identified at the dispensary which was consisted of 2.68%. 2013s total number of patients of 4.75%, 2.03% were initially identified, who were taken 2.73% in the dispensary.

In 2014 the total number of patients with 5.19%,who were 2.23% in the dispensary, another group was 2.76% in the dispensary. In recent years, it has been an increase in the identification and in the dispensary registration of patients with urogenital tuberculosis.

Discussions and conclusions. In 2014, it was performed indicative early detection of urinary tuberculosis during preventive examinations of the population, but not achieved coverage criteria for diagnosing early stages, compared with the years of 2012 and 2013. In 2014 the number of patients taken to the dispensary registration and the number of patients who, for the first time revealed the MAT increases. The results indicate the need for further improvement of detection of urogenital tuberculosis, as well as the targeting surveys in populations with a high risk of TB, especially the social risk groups.

EFFICACY OF COMBINED ANTIHYPERTENSIVE TREATMENT WITH AMLODIPINE AND TELMISARTAN IN PATIENTS WITH METABOLIC SYNDROME

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Background. Hypertension is a strong contributor to cardiovascular disease in patients with the metabolic syndrome. It has been shown to not only be an independent risk factor, but it also contributes to the development of other risk factors for cardiovascular disease. Over the last few decades, a number of classes of anti-hypertensive drugs have been used to treat hypertension, with the ultimate goal of reducing the incidence of endpoints such as heart attacks and stroke. Some of the

broad categories of antihypertensives include angiotensin-receptor blockers (ARB) and calcium channel blockers (CCB).

The aim of this study is to assess the efficacy of monotherapy with ARB blocker telmisartan or calcium channel blockers amlodipine and their combination in patients with metabolic syndrome (MS).

Material and Methods. The study enrolled 38 patients (21 females, 17 males, aged 45-64 years old; mean age 54.2 ± 9.8) with MS. The examination at baseline and after 12 weeks of treatment included office blood pressure measurement, 24-hour BP monitoring, heart rate variability (HRV) and carbohydrate profiles estimation.

Results. In moderate hypertension BP normalized in 45% and 47% on monotherapy with telmisartan or amlodipine, respectively ($P=0.042$) and in 84% patients given telmisartan+amlodipine ($P=0.027$). The latter combination and telmisartan monotherapy had a positive effect on HRV parameters. Telmisartan monotherapy improved carbohydrate metabolism as shown by reduction of postprandial hyperglycemia and hyperinsulinemia in MS patients.

Conclusion. Combined treatment with amlodipin and telmisartan is more effective than monotherapy with each of the above drugs.

SPECIFICS OF CLINIC AND COURSE OF VENOUS ENCEPHALOPATHY IN DIABETES

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Cerebral hemodynamic is complex and multicomponent system that supply adequate level of blood and metabolism of brain, including regulation of blood volume coming to brain, distribution of it among different areas of brain, regulation of blood circulation on microcirculatory level, as well as supplying venous outflow.

It is known that diabetes is one of the important and independent risk factors of the development of the cerebrovascular diseases. Every 5 seconds someone falls ill with diabetes worldwide and every 7 seconds someone dies from this disease that gets status of noninfectious epidemic of XXI century

Three quarters of the volume of the cerebral bloodstream make up venous sector, but more than 90% of all the work of brain vascular pathology related to arterial bloodflow.

Lesion of venous blood circulation of brain is one of the little-studied and actual problem of neurology. As known, arterial and venous system of the brain are high-organized reflexive zones, supplying consistence and adequate of the brain blood flow. Arterial blood flow can be intensified or slow down in active participation of mechanisms of regulation of blood flow via veins.

Acute lesions of venous blood circulation make up to 5% out of all forms of acute cerebro-vascular pathology, however chronic forms of venous cerebral dyscirculation occur considerable more and with this problem is not full acquainted as general practitioners as neurologists

During full clinico-paraclinical examinations of patients with discirculatory encephalopathy the signs of venous outflow difficulties are observed at 77,6% patients, and along with disease progression, venous insufficiency is increased, objective symptoms of which occur at 18,4% patients with DE1 and 57% patients with DE2

Study of venous pathology of the brain is actual problem in connection with high occurrence of cerebral vascular diseases, with high frequency of diagnostic mistakes and insufficient organization of therapeutic measurement.

GENDER EFFECTS ON ISCHEMIC STROKE OUTCOMES

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Objective. We sought to examine the relationship between gender, age, co-morbidities, and outcomes in patients with non-hemorrhagic stroke.

Materials and methods. Retrospective chart review was performed on 517 consecutive non-hemorrhagic stroke patients (48% women, 20% with diabetes, 26.8% with CAD, 38% with dyslipidemia, 62.2% with HTN, 4.2% with peripheral vascular disease, 4.7% with renal insufficiency) treated at a single academic medical center.

Results. Younger patients were more likely to be men (age<50 55%, 51-60 58.3%, 61-70 59.6%; $p<0.05$) while older patients were likely to be women (age 71-80 54.9%, >80 56.6; $p<0.05$). Accordingly, the subsequent analysis stratified the cohort into two groups, <70 and >70 years old. Regardless of age, men had a higher prevalence of CAD (age <70, 25.2% vs 18.8% in women, and age >70, 43.7% vs. 23.1% in women; $p<0.05$) and dyslipidemia (age <70, 43.4% vs 32.5% in women and age >70, 44.8% vs. 30.6% in women; $p=.05$). There were no significant gender based differences in BMI, prevalence of diabetes, hypertension, peripheral vascular disease, or chronic renal insufficiency. The mean follow up duration was 47.3+/-0.9 months. Gender did not affect mortality in patients younger than 70 years old (15.5% men vs. 15.6% women.) However in patients of age >70 mortality was significantly increased in men (50.5% in men vs. 41.7% in women; chi-squared $p<0.001$, log-rank $p<0.0001$, Figure). In logistic regression analysis, when compared to women younger than 70 years old, men of the same age had similar mortality (HR 1.0; 95%CI 0.5-1.9, $p=0.980$); while age greater than 70 conferred 4-5 fold increased risk of mortality (HR 3.9; 95%CI 2.1-7.0, $p<0.0001$ in women, and HR 5.5; 95%CI 3.0-10.3, $p<0.0001$ in men). When gender and age were accounted for, history of coronary artery disease and/or dyslipidemia did not affect the outcomes.

Conclusion: Men with non-hemorrhagic stroke were more likely to have dyslipidemia and history of coronary artery disease. This, however, did not translate into increased mortality in younger men. Gender appears to have a differential effect on non-hemorrhagic stroke outcomes that warrants future investigation.

EFFECTS OF ROSUVASTATIN AND SIMVASTATIN ON LIPID SPECTRUM IN PATIENTS WITH METABOLIC SYNDROME

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Objective. The purpose of this study was to examine the effects of statin therapy on lipoprotein particle concentrations in patients with the metabolic syndrome

Research design and methods. Patients with dyslipidemia and the metabolic syndrome (n = 15) were randomly assigned in a double-blind study comparing 10

mg rosuvastatin (RSV), 10 mg simvastatin, or placebo daily for 6 weeks. From weeks 6 to 12, patients in the RSV and placebo groups received 20 mg RSV, whereas the STV group increased their dose to 20 mg daily. LDL cholesterol, and other lipoproteins were measured by immunoenzyme methods, 6 weeks, and 12 weeks. Lipoprotein levels were compared by analysis of covariance.

Results. LDL-C was reduced significantly more in patients receiving rosuvastatin 10 mg when compared with those receiving simvastatin 10 mg at 6 weeks (41.7 vs. 31.2%, $P < 0.001$). Significant LDL-C reductions were also observed in patients receiving rosuvastatin when compared with those receiving atorvastatin at 12 weeks (48.9 vs. 40.1%, $P < 0.001$).

Conclusions. At equivalent doses, rosuvastatin had a significantly greater effect than simvastatin in lowering LDL-C and improving the lipid in patients with the metabolic syndrome.

MODERN APPROACHES TO THE TREATMENT OF DIABETES TYPE 2

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Objective. Efficacy and safety of the drug liraglutide in the treatment of patients with type 2 diabetes.

Materials and methods. In this research we took a group of 40 people with T2DM, were receiving treatment at 3rd clinic of TMA in the department of endocrinology. The mean age of the patients was $56 \pm 3,15$ years, the duration of diabetes was $3,59 \pm 1,54$ years. To determine the status of the carbohydrate metabolism. Each patient was examined for analysis of Fasting blood sugar (FBS) and Post prandial blood sugar (PPBS), Glycosylated hemoglobin, body mass index, as well the evaluations of the quality of life on a scale -SF-36. Prior to the initiation of incretins, the patients were on sulfonylurea's and biguanides.

Results. All patients at the time of admission were complaining of dryness in mouth, generalized weakness, pain in legs which reflects towards the decompensated diabetes. The levels of blood glucose before and after meals were $8,16 \pm 0,82$ mmol/l and $11,28 \pm 1,01$ mmol/l respectively, Glycosylated hemoglobin $-9,27 \pm 1,2\%$, body mass index $-31,5 \pm 0,96$. All patients started with viktoza 1,2 mlg Twice daily with combination therapy with Glimipride. Before the discharge the patients re-examined for thereanylasis. During the duration of treatment with viktoza 1,2 mlg twice daily with combination therapy with Glimipride. There was decrease in FBS and PPBS levels upto 15,5% and 20,5% respectively, Glycosylated hemoglobin-16,95%, body mass index -4,76%, quality of life assessment scale-SF-36 improved to $24,6, \pm 3\%$ and there was also decrease in the symptoms like dryness in mouth upto 40%, weakness upto 36% and pain in legs upto 22%.

Conclusions: treatment with viktoza 1,2 mlg leads to better improvement in blood glucose levels as Fasting blood sugar improved by 15,5%, Post prandial blood sugar by 20,5%, Glycosylated hemoglobin-16,95%, body mass index-4,76%, The quality of life assessment scale SF-36 upto $24,6, \pm 3\%$. Intake of viktoza 1,2 mlg in the patients in T2DM is more effective.

OPTIMIZATION OF TREATMENT TACTICS IN PATIENTS WITH PATHOLOGICAL TORTUOSITY OF THE INTERNAL CAROTID ARTERIES

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Ischemic stroke is a major cause of morbidity, mortality and disability in the world. In the structure of the causes of chronic cerebrovascular insufficiency pathological tortuosity of the internal carotid artery is the second largest after the atherosclerotic lesion.

The purpose of the study. A comparative study of the effectiveness of surgical and conservative treatment in patients with chronic ischemic attack caused by pathological tortuosity of the internal carotid artery.

Material and methods. We studied 100 patients with pathological tortuosity of the internal carotid arteries. Of these, Group I consisted of 60 patients with pathological tortuosity of the internal carotid artery who underwent reconstructive surgical intervention. Group II (control group) consisted of 40 patients with verified pathological tortuosity of the internal carotid arteries who received only conservative treatment. The clinical part of the survey consisted of a survey, a neurological examination. Paraclinical part included color duplex scanning of the internal carotid arteries, CT, MRI.

Results and evaluation. In group I, 60% of surveyed 28.4 were men, 71.6% - women aged 38 to 80 years (mean age $63,8 \pm 0,93$). In the II group of 40 surveyed 30% were men, 70% - women aged 39 to 78 years (mean age $62,6 \pm 0,82$).

In Group I sustained relief of symptoms of chronic cerebrovascular insufficiency was observed in 49 (81.7%) patients and the dynamics of neurological symptoms was absent in 11 (18.3%) patients. None of the patients throughout the observation period did not develop acute cerebral circulation. In 17 (42.5%) patients of group II was negative dynamics of neurological symptoms. In 2 (5%) patients developed ischemic stroke.

Results of surgical and conservative therapy indicate an unfavorable course of chronic cerebrovascular insufficiency in patients of Group II. An analysis of the dynamics of neurological showed high efficacy of surgical treatment of pathological tortuosity of the internal carotid arteries. The clinical efficacy, ie, relief of symptoms of chronic cerebrovascular insufficiency, was 81.7%. Prevention of acute cerebral circulation was 100%.

Conclusion. 1. The clinical picture of pathological tortuosity of the internal carotid artery is characterized by symptoms of ischemic stroke, transient ischemic attacks and chronic cerebral ischemia. **2.** Comparative study of the effectiveness of surgical and conservative treatment in patients with chronic ischemic attack caused by pathological tortuosity of internal carotid arteries showed high efficacy of surgical treatment.

RETROSPECTIVE ANALYSIS OF THE EFFECTIVENESS OF CAROTID ENDARTERECTOMY IN PATIENTS WITH TYPE 2 DIABETES ASSOCIATED WITH CHRONIC CEREBROVASCULAR INSUFFICIENCY

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Objective. Conducting a retrospective analysis of the effectiveness of carotid endarterectomy in patients with type 2 diabetes associated with chronic cerebrovascular insufficiency by examining the medical records of patients who received ca-

rotid endarterectomy and the standard conservative treatment in the Department angioneurology clinic number 2 Tashkent Medical Academy.

Materials and methods. The study has been done on the basis of department angioneurology at the clinic number 2 TMA. The object of research were selected patients with type 2 diabetes associated with chronic cerebrovascular insufficiency informed only with unilateral carotid stenosis who received carotid endarterectomy and the standard conservative treatment in the department of angioneurology in the 2010-2014. According to medical records that were provided to us the average age of patients was 62.6 ± 1.27 years. It was selected 62 patients with 10 years of experience of diabetes. 67.19% of the patients were men and 32.81% women. The parameters that affect the quality of life of patients were selected blood sugar levels, glycated hemoglobin, urea and creatinine in the coagulation and changes of the average arterial pressure. As a result of observation, patients were divided into 3 groups. The first group consisted of patients who did not have serious consequences and who were under subcompensation with chronic cerebrovascular insufficiency and diabetes mellitus, in these patients, glycated hemoglobin was less than 7.5%, fluctuation of the fasting blood glucose was $7.53 \pm 1,3$ mmol/l, variations in average systolic arterial pressure was 162.66 ± 7.43 mm Hg. The second group consisted of patients who did not have serious consequences and which were at the stage of decompensation of chronic cerebrovascular insufficiency, in these patients glycated hemoglobin was higher than 7.5%, fluctuation of fasting blood glucose was $8,6 \pm 1,41$ mmol/l, variations in average systolic arterial pressure was $178,66 \pm 5,43$ mm Hg.

The third group consisted of patients who had developed severe consequences (chronic renal failure as the result of diabetic nephropathy, diabetic micro and macro angiopathy) and which were at the stage of decompensation of chronic cerebrovascular insufficiency (glycated hemoglobin level was higher than 7.5%), fluctuation of fasting blood glucose was greater than 10 mmol/l, variations in average systolic arterial pressure was 194.667 ± 12.21 mmHg.

Results. As the results of retrospective analysis of patients in the first group the effectiveness of carotid endarterectomy intervention was high, and these patients hardly reveals not only acute and chronic symptoms after surgery, and no adverse changes that affect the indicators for and no adverse changes parameters that affect the course of diabetes (blood sugar level, glycated hemoglobin, urea, and creatinine in the coagulation) resulting after surgical stress. In this group of patients with an average arterial pressure after an operating period of progressively decreasing, the average fluctuation of arterial pressure dropped to 150.11 ± 1.65 mm Hg, it was achieved stabilization of diabetes mellitus. In the second group of patients the effectiveness of carotid endarterectomy was relatively lower, in this group after the transaction acute complications observed acute ischemic stroke (in 1 patient), as a result of operational stress after oscillation was detected in blood sugar levels. However, in these group patients the average arterial pressure progressively decreased (mean oscillation systolic arterial pressure decreased to 158.7 ± 1.38 mm Hg). In the third group of patients the effectiveness of carotid endarterectomy is practically not observed, in this group after operating as acute complications identified strengthening of acute stroke (in 6 patients), restenosis revelation of the vessel in which the operation was carried out (in 2 patients), increased incidence of critical care diseases, as a result of post-operative stress frequently observed fluctuations in blood sugar levels, and hypo repeated hypoglycemic state. However, this group of patients despite the reduction in means systolic arterial pressure at 182.46 mm Hg, the oscillation frequency was ± 9.21 , which led to severe postoperative period.

Conclusion. As a result of the observations, we concluded that the effectiveness of carotid endarterectomy in patients with type 2 diabetes associated with chronic cerebrovascular insufficiency is directly connected with the passage, the severity and consequences of the development of diabetes ($r=0,97$), preoperative period every procedure aimed at compensation of diabetes leads to more effective treatments to reduce the consequences of development, as well as improve quality of life of patients.

INTELLECTUAL SUPPORT FOR THE DIAGNOSIS

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Purpose and objectives. The amount of professional knowledge necessary for successful practice physician, has always been significant. In modern medical facilities are formed and accumulated huge amounts of medical data and how promptly and effectively the information used by physicians, specialists depends on the quality of care provided to them. (B.A.Kobrin, T.V.Zarubina, 2009). Using predictive medical information system for diagnosis based on algorithms that use formal methods of mathematical analysis of medical data, will significantly release the physician from routine activities, enabling deeper analysis of clinical information (A.A. Abdumanonov, M. K Karabayev, 2013).

Material and methods. Introduction of medical data base of patients made at the Department of Abdominal Surgery of the Ferghana branch of the Republican Scientific Center for Emergency Medicine 300 medical records of patients were entered into the database of computer information systems.

Results and discussions. In the initial stage of intellectualization MIS «ExterNET» us, together with experienced physicians relevant fields of medicine, created and introduced into clinical practice system for intellectual support of a physician during the examination of patients is similar, but for urgent pathologies.

In addition, we have developed an information system "intellectual support" that contains the database and knowledge base and blocks of software, using clinical data from the database of electronic patient records system "ExterNET", provides prediction and detection of problem situations in the patient's body and promotes the adoption of effective medical solutions to eliminate or prevent.

Conclusions. Presents actual conduct of intelligent health information systems to support decision-making diagnostic and treatment with use of databases and medical knowledge base and software using clinical data from the electronic patient records system "ExterNET" provides prediction and detection of problematic situations and promote the adoption of effective medical solutions.

EVALUATION QUALITY OF LIFE IN PATIENTS WITH SYSTEMIC LUPUS ERYTHEMATOSUS

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Objectives. To assess the quality of life and to find out the association with the clinical features of patients with SLE.

Materials and methods. 20 patients with SLE were examined. The average age was $30,5 \pm 1,8$ years. Duration of the disease was $7,8 \pm 1,91$ years. Activity of SLE was assessed by SELENA –SLEDAI scale. The used questionnaires were LUPUSQoL,

HADS, FACIT. Carry out general clinical and immunological studies (ANA, antibodies to 2-spiral DNA, C3, C4). Roentgenogram of thorax organs, ECG.

Results. Activity of SLE: minimal-5(25%), moderate-8(40%), high-5(25%), very high-2(10%). Clinical characteristics of patients: in 18(90%) detected affection of skin and mucous membranes, affection of musculoskeletal system, 15(75%) - constitutional manifestations, affection of heart and lungs - 11(55%), kidneys-8(40%), gastro-intestinal tract-9(45%), CNS-6(30%), immunological disturbances-13(65%). FACIT - it is functional rating scale of fatigue, The total score less than 30 was determined as severe form of fatigue. In our results 95% of patients have severe form of fatigue. High score in patients with the defeat of CNS accounted 4(80%), and without the defeat of CNS - 1(20%). By LUPUSQoL questionnaire the worst quality of life was noted according to the scale "Fatigue" (70.8%) and the scale "Body image" (72%), and the best one was assessed by the scales "Pain" (77.89%) and "Intimate relationship" (82,85%). The worst results by LUPUSQoL questionnaire detected in patients with the affection of skin, central nervous system and kidneys and in patients where took the high doses of glucocorticosteroids.

Conclusions. SLE results in disorder of social adaptation, development of chronic stress, anxiety and depression. Timely revealing violations in quality of life of patients, correction of depressive disorders improve compliance of patients.

In clinical practice, to assess the quality of life in patients with SLE should be included international questionnaires. Only in this way patient will be assessed comprehensively and doctor will know about problems of patients.

SURGERY



MODERN METHODS OF DIAGNOSTIC EXTRA-ORGANAL TUMORS OF PELVIC

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Actuality. Diagnostics and surgical treatment of extra-organal tumors of belly cavity, small pelvis and presacral area is a difficult section of modern oncology. Defective test sick and diagnostics of oncological patients imprudence by the standards result in the installation of inadequate diagnoses and respectively to wrong treatment tactics.

Material and methods. From 2011 to 2014 years at proctology department of National Cancer Research Center were examined and treated 40 patients with extra-organal tumors of pelvis. The age of patients ranged from 2 to 64 years (average 45.5). From them 17 are females (42,5%) and 23 males (57,5%). Patients were examined according to the protocol number 1, which included along with traditional methods of ultrasonography, CT, MSCT in angiographic mode, trephine biopsy of the tumor. The criteria for selection were the location of the tumor in the pelvic cavity and presacral area neoplasm verified diagnosis and lack of severe comorbidity.

Results and discussion. At 40 patients following types of tool research is made: X-Ray at 39 (97,5%); MSCT at 31 (77,5%); rectoscopy at 39 (97,5%); irrigoscopy at 40 (100%); ultrasonography at 40 (100%); Endoscopy at 40 (100%); MRI at 38 (95%); sphincter metry at 38 (95%); CT at 5 (12,5%); trans-rectal-sonography at 35 (87,5%).

Studying received data, we will note following: the main diagnostic errors arise at the tumors of big sizes engaging more than two anatomic zones, particularly at the

initial pelvic localization. At ultrasonography it takes place at the expense of limitation of the review of the area of interest and impossibility of receipt of display of all tumors in aggregate of her mutual relations with environmental units and structures. During irrigoscopy visualization of the tumor only possible at the expense of squeezing of direct and sigma intestine, impossibility of receipt of all tumor and mutual relations total displays with environmental units and structures. Discrepancy at MSCT is caused at the expense of visualization of the tumor only in one cross-section (axial) plane that can hide degree of her interrelation with above and below lying structures. Many these deficiencies are not ingrain to MRI. Implementation of duplex (trans-rectal-sonography) scanning with color doppler contrasting allowed substantially to raise efficiency of USI, for example, at verification of local tumor prevalence - up to 97,4%. We pay a specific attention to given method, as it determines further direction of diagnostic and treatment.

Conclusion. Diagnostics of the Extra-organal tumors of pelvis should be implemented by application of modern beam methods of research, such as MSCT, irrigoscopy, ultrasonography, MRI and Trans-rectal sonography.

COMPLICATIONS OF NEPHROTHIASIS ENDOSCOPIC SURGERY: CAUSES, CLASSIFICATION, TREATMENT PROTOCOLS AND PROGNOSIS

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Introduction. Urolithiasis is considered as a widespread disease within urological diseases and takes second place among inflammatory diseases. The prevalence of nephrolithiasis among general population is more than 4%. Nephrolithiasis morbidity significantly increased during last 20 years and in case of tendency to grow in the nearest future the morbidity level may increase in two times. [Voshula V.I., 2006; Pereverzev A.S. et al., 2004; Tiktinskiy O.L. et al., 2000]. For the last 80 years the open surgical operations in treatment of urolithiasis as main method of treatment was used [Tiktinskiy O.L. et al., 2000]. Nowadays the less invasive surgical methods in treatment of patients with nephrolithiasis are widely available.

Purposes. Wider promotion of endoscopic surgery using in treatment of nephrolithiasis and reduce the complications, the study of reasons and prophylaxis.

Materials and Methods. 268 patients with staghorn renal stones, who were performed per cutaneous nephrolithotripsy (PCNLT) with single access by standard method. The average age of the patients ranged from 6 to 77 ($32,4 \pm 4,2$) years. The size of the stones ranged from 13 to 94 ($43,6 \pm 2,3$) mm.

Results. Using standard PCNLT to remove staghorn renal stones as monotherapy allowed to fully get rid of the stones (stone free) in 205,6 (76,7%) patients. The average duration of hospitalization after surgery was $5,4 \pm 0,3$ bed / day (from 2 to 31), the average time of removing drains after surgery was $5,8 \pm 0,6$ (3 do 28) days, intraoperative blood loss was observed in 28.7 (10.7%) patients, its volume amounted to between 100 and 1050 ($380,2 \pm 28,8$) ml. In 15.8 (5.9%) cases bleeding was considered as a complication, as it required replacement therapy. Postoperative complications were observed in 40.49 (15.1%) patients, of whom in 15.8 (5.9%) there was bleeding and in 24.65 (9.2%) - worsening of urinary tract infections.

Conclusions. At the moment PCNLT is very widely used in treatment of nephro-

lithiasis. Because this method significantly decreases postoperative complications (less bleeding and wound surface). It will help patients to recover more quickly. Despite the overall good tolerance of the most patients to this operation, a variety of complications in 15.1% cases are observed. However, if the complications are eliminated on time, it will end with positive consequences.

EVALUATION OF EFFECTIVENESS OF TRANSJUGULAR INTRAHEPATIC PORTOSYSTEMIC SHUNT (TIPS) FOR CONTROLLING PORTAL HYPERTENSION COMPLICATIONS IN CIRRHOTIC PATIENTS

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Introduction. Portal hypertension (PH) is characterized by complex changes that occur when obstruction of blood flow in the portal vein of different origin. The most dangerous complication of PH is bleeding from varicose veins (VV) of the esophagus and stomach. VV bleedings were observed in 72% of patients with liver cirrhosis (LC). Approximately 30-50% of patients during the first episode of hemorrhage die within 6 weeks. One of the most striking developments in recent years related to treatment of complications of PH, is the putting into practice of a new endovascular method is transjugular intrahepatic portosystemic shunt (TIPS).

The aim of the study. To evaluate the possibility of TIPS to reduce portal pressure (PP) and control complications of PH. On the other hand, in comparison with endoscopic sclerotherapy (ES) and endoscopic ligation (EL).

Materials and Methods. Between September 2014 and November 2015, 186 patients (64% was males, 36% was females) with ranging in age from 28 to 54 years underwent ES and EL in the Department of General Surgery of 2-clinic of the TMA. In 95.7%, patients were infected with hepatitis B virus, in 4.3%, patients were alcoholic hepatitis and had complications from LC and PH. Patients divided 2 major groups. First group include 95 patients who underwent ES and second group take in 92 patients who underwent EL. In first group 18 patients was determined signs of recidivism of bleeding. Of these, 15 patients were operated by open surgery. Other 20 patients died cause of acute bleeding and liver failure. In second group 14 patients were diagnosed with recidivism of bleeding and all of them underwent TIPS after EL. In 18 patients open surgery was done. 13 patients died cause of complications of LC and bleeding. Patients underwent TIPS with the use of stents with a diameter of 7-8 mm long and from 8 to 10 mm. Child-Pugh classification was used to evaluate hepatic function status and class B in 113 cases and class C in 73. All patients underwent standard clinical examination.

Results. In the dynamics was carried out laboratory tests, ECG, endoscopy. We used in the dynamics of colour duplex scanning, the indicators of which indicate significantly reduced PP. Analysis of results of ES and EL in patients with bleeding showed significant efficacy of ligation method in comparison with sclerotherapy. If ES eradicate varicose veins of the esophagus, the patient was subjected to repeated endoscopy, EL is performed in a single session using a multiply ligation device. Results showed that who was carried out ES and EL complication of rebleeding was found. MSCT allowed patients who underwent TIPS, and it was successfully performed. Thus, the technical success of the TIPS was 100%. PP was 43.8 ± 2.5 until

TIPS, and after surgery, PP was 23.6 ± 1.5 . Diameter of the portal vein and splenic vein (cm) decreased from 1.67 ± 0.14 to 1.28 ± 0.13 and from 1.37 ± 0.12 to 1.09 ± 0.08 respectively. Blood flow in portal vein (cm/sec) increased from 14.8 ± 1.2 to 51.1 ± 6.1 . Speed of blood circulation in intrahepatic shunt was 135.0 ± 13.5 cm/sec.

Conclusion. TIPS is the most effective method to decrease of PH and complications of LC. TIPS is efficient method of creating a Porto-cavernous fistulas anastomosis, which is characterized by low invasiveness and low complication rate that serves as an alternative to traditional portosystemic shunting is the treatment of choice in the treatment of patients with LC class B and C according to Child-Pugh. The creation of TIPS is instant decompression system of the portal vein decreases portal pressure and decreases the probability of rebleeding.

PARTICULARITIES OF THE SURGICAL TACTIC AND ANESTHESIOLOGICAL GUIDE OF THE PATIENTS WITH THE PATHOLOGIC DEFORMATION OF THE CAROTID ARTERIES

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Objective. To improve the results of the surgical treatment of the patients with the pathologic deformation (PD) of the carotid arteries (CA) by the way of working out of new approaches of the anesthesiological guide and surgical tactic.

Materials and methods. There were analyzed the results of the examination and treatment of 261 patients with the PD of the CA with the different degrees of chronic cerebro-vascular insufficiency (CCVI). They were performed 296 open reconstructive operations. The patients were on the stationery treatment at the 2nd clinic of the TMA from 2010 to 2015 year. According to the Pokrovskiy's classification (1976) CBVI I degree was found out at 17 (5,7%) patients, II degree – at 30 (10,1%), III degree – at 118 (39,9%), and IV degree – at 131 (44,3%) patients. The patients were separated to 2 groups. The first (control) group contained of 78 patients which were at the stationery treatment from 2010 to 2012 year. The second (basic) group contained of 183 patients which were at the stationery treatment from 2013 to 2015 year. The surgical treatment was performed in both groups. The difference was in that the artificial hypertension was performed to all the patients in the control group, but in the basic group the artificial hypertension was not performed at the patients with the both side PD of the CA.

Results. At the analyzing of the results of treatment of the patients of the control group it was found out that at 3,6% of the patients was developed an ischemic stroke (IS) at the contrlateral side during the operation. Every patient had additional pathology – arterial hypertension and all was them was performed the artificial hypertension. The intraoperative stroke at the ipsilateral side developed at 2 (2,4%) patients and the indicator stroke-lethality was 2,4%. There were no intraoperative ischemic stroke at the contrlateral side, the intraoperative ischemic stroke at the ipsilateral side developed at 3 (1,4%) patients and the indicator stroke-lethality was 0,5%. Recurrent stenosis in the area of anastomosis because of the growth of the atherosclerotic mass developed in long term period at 6 (7,1%) patients. There was not lethality from the IS and MI. The lethality from the IS and MI in long term peri-

od was not observed in the basic group. The same time the complications connected with the development of the IS in the ipsilateral carotid pool in 1,07% and MI in 0,53%. The main positive moment in the treatment of the patients of the basic group were reducing of the contralateral intraoperative stroke and stroke+lethality.

Conclusions. Performing of the artificial hypertension during the operation is not recommended the patients with the both side hemodynamic significant pathologic deformations of the CA to protect the brain from the ischemia. Also we recommend to carry out the additional endarterectomy from the CCA and ECA to the patients with the pathologic deformation of the carotid arteries and hemodynamic not significant stenosis but with II and III types of plaques to prevent the recurrent stenosis in long term period.

COMPARISON OF ULTRASOUND DUPLEX SCANNING AND COMPUTED TOMOGRAPHY ANGIOGRAPHY IN PATIENTS WITH CHRONIC CEREBROVASCULAR INSUFFICIENCY

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Objective. To compare the results of ultrasound and x-ray diagnostic methods with intraoperative data in patients with chronic cerebrovascular insufficiency.

Materials and Methods. The study of the results of examination and treatment of 212 patients with various stages of chronic cerebrovascular insufficiency in the clinic of Tashkent Medical Academy. Patients were divided into 2 groups. The first (control) group - 81 patients who underwent reconstructive operations by the data of x-ray and duplex scanning methods. The second (main) group, 131 patients who underwent reconstructive operations only according to the duplex scanning.

Results. Full compliance USDS data on the extent of carotid artery stenosis to intraoperative data was observed in 115 cases (87.8%). "False positive" information obtained in 3 cases (2.0%). Underestimating the severity of stenosis of the carotid artery on the USDS results obtained in 13 (10.2%) cases ("false negative" information). USDS sensitivity in determining the degree of stenosis of the CA for a comparison group of patients was 87.8%, in determining the nature of the state of the plaque and its surface - 95.3%. Specificity (probability of negative result in patients with absence of the disease) was 97.4% both in determining the degree of stenosis of an artery, and in determining the state of the plaque. In 10 cases atherosclerotic changes in the carotid arteries on CTA haven't been identified, in 2 cases CTA was uninformative. In two cases, the CTA study describes ICA occlusion, and intraoperative - stenosis of 65% and 85% with signs of ulcerative plaques. The sensitivity of CTA in determining the degree of carotid artery stenosis in the control group was 53.3%, in determining the nature of the state of the plaque and its surface - 57.5%, specificity (probability of negative results in patients with absence of disease) was 61.1% in determining the degree of stenosis artery, and 22.5% in determining the state of the plaque.

Conclusions. Duplex scanning is the method of choice for diagnosing of brachiocephalic arteries pathology, which has such advantages like accessibility, lack of radiation exposure, the speed of examination, and, if necessary, easy duplication of research and determination of hemodynamic parameters of blood flow, as well as the

determination of the type and surface of the plaque.

Integrated use of ultrasound and x-ray research methods allows to assess the extent of the defeat of the brachiocephalic vessels, establish the indications for surgical treatment and to avoid tactical mistakes, also improves the results of treatment of patients with chronic cerebrovascular insufficiency.

THERAPEUTIC AND DIAGNOSTIC LAPAROSCOPY IN EMERGENCY SURGERY

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The purpose- Improving outcomes of patients with urgent surgical abdominal pathology, prevention of postoperative complications.

Material and methods. Research was performed on the base of 1 city clinic hospital for the period from 2014 to 2015, department of general surgery. Diagnostic and therapeutic laparoscopy were performed in 166 patients with urgent surgical diseases. Today in our clinic laparoscopy is actively used in: cholecystectomy, appendectomy, debridement and drainage of the abdominal cavity with peritonitis, cystectomy.

In 22 (13.3%) cases performed diagnostic laparoscopy. Laparoscopy has avoided laparotomy in 6 (3.6%) patients with suspected acute appendicitis. Using of diagnostic laparoscopy allowed to determine a rational treatment strategy in 22 patients with acute abdomen. In 6 (3.6%) cases, the diagnosis was established on the grounds of a direct outcome of laparoscopic surgery. In 30 (18.0%) cases acute appendicitis diagnosed, in connection with the latent laboratory parameters and doubtful clinical data resorted to laparoscopic appendectomy. In 3 (2.3%) patients with suspected acute appendicitis was recommended and performed diagnostic laparoscopy followed by laparoscopic cystectomy. In 2 (1.5%) patients received a diagnosis of patients with unknown etiology of peritonitis with laparoscopic study which revealed perforated ulcer of the stomach, and therefore the operation carried out laparotomy access. In 14 (8.4%) cases, the diagnosis was established by circumstantial evidence (blood or exudate in the side channels of the abdomen, hematoma in the packing or the round ligament of the liver, diffuse adhesions), without a clear localization of pathology of the abdominal cavity, which required the transition to laparotomy. Upon confirmation of the diagnosis of acute appendicitis during diagnostic laparoscopy we did laparoscopic appendectomy in 4 (3%) patients. 99 (59.6%) urgent cholecystectomy performed in patients with acute cholecystitis. In the 7 cases made the conversion to laparotomy due to the need to revise the common bile duct.

Laparoscopy actively used for the diagnosis of early postoperative complications. In the immediate postoperative period, laparoscopy was performed in 6 (3.6%) patients with suspected peritonitis or intra-abdominal bleeding. In 2 cases diagnosed with peritonitis, which was the implementation of an emergency laparotomy. 1 patient was diagnosed with laparoscopy local peritonitis, which allowed laparoscopic sanitation and avoid relaparotomy. One in the development of bile peritonitis after laparoscopic cholecystectomy diathermocoagulation gallbladder bed, laparoscopic abdominal sanitation.

The Results. After analyzing the results of applying laparoscopy it was found that the average length of stay of patients with acute cholecystitis was 3,4 days, 2,8 days

with acute appendicitis.

Conclusion. Laparoscopy is a highly effective, safe, low-invasive method of surgical treatment, which gives the least amount of postoperative complications and promotes early activation of patients.

**MICROBIOLOGICAL MODIFYING IN ESOPHAGUS
AND GASTRIC THE PATIENT WHO HAD OPERATION
LOWER PART OF ESOPHAGUS AND CARDIO
ESOPHAGEAL ZONE OF GASTRIC**

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Nowadays, frequency of gastric cancer, especially cardioesophageal cancer has been widespread. Percentage make for approximately 15-40% and intensive indications have reached 5.5 to 100000 individuals. Cancer of this localization is the second leading cause of cancer-related mortality and the fourth most common cancer globally. There are, however, distinct differences in incidence rates in different geographic regions. While the incidence rate of gastric cancer has been falling, that of gastric cardia cancers is reportedly on the rise in some regions. *Helicobacter pylori* (*H. pylori*) infection is a major risk factor of non-cardia gastric cancer, and data has emerged concerning the role of *H. pylori* eradication for primary prevention of gastric cancer.

Dietary, lifestyle and metabolic factors have also been implicated. Although addressing these other factors may contribute to health, the actual impact in terms of cancer prevention is unclear. Once irreversible histological changes have occurred, endoscopic surveillance would be necessary. A molecular classification system offers hope for molecularly tailored, personalised therapies for gastric cancer, which may improve the prognosis for patients. Gastric adenocarcinoma is also associated with inflammation, which is induced by *H. pylori* infection, yet the bacteria also cause genetic and epigenetic changes that lead to genetic instability in gastric epithelial cells. *Helicobacter pylori* eradication reduces both.

However, many factors must be considered in determining whether treating this bacterial infection will prevent cancer or only reduce its risk-these must be considered in designing reliable and effective eradication therapies. *Helicobacter pylori* infection contributes to the development of diverse gastric and extragastric diseases. The infection is necessary but not sufficient for the development of gastric adenocarcinoma. Its eradication would eliminate a major worldwide cause of cancer death, therefore there is much interest in identifying how, if, and when this can be accomplished. In recent years worrying themes have emerged such as increasing levels of antibiotic resistance and falling cure rates which illustrate there is no room for complacency with respect to *H. pylori*. In addition there are many significant issues which have not been elucidated regarding the role played by *H. pylori* in very serious pathologies such as gastric and esophageal cancer and other more benign disorders common in the developed world such as gastroesophageal reflux disease, functional dyspepsia and perhaps obesity which carry a significant impact both economically and as regards to symptoms. Future guidelines aimed at European prac-

tioners and patients will need to address the questions raised by these issues as well as the more familiar areas such as constituents and duration of therapy.

Aim. 1. Improve results of treatment to patient after radical operation performed cause of esophageal and gastric cancer.

2. Investigation role of bacterium to pathogenesis of oncologic illnesses , particularly gastric and esophageal cancer.

3. Implement effective methods of treatment and prevention.

Materials and Methods of investigation. It is scheduled that to perform complex clinic examinations, bacteriological analysis and reveal chemico -physical modifying of mucous membrane of gastric and esophagus in 30 patient.

Scientific novelty. 1. Investigation of microbiological changing in esophagus and gastric of patient who had operation cause of cancer of lower part of esophagus and gastroesophageal zone of gastric.

2. Estimating value of treatment with probiotics in postoperational period.

Summary: It is expected that amount of helicobacter pylori will increase in esophagus and stomach after operation in this localization and treatment with probiotics will help to reduce number of this bacterium. By this way recidives are prevented after radical operations.

THE SENSITIVITY OF TRANSABDOMINAL ULTRASOUND IN THE DIAGNOSIS OF ACUTE URETERAL OBSTRUCTIONS CAUSED BY UROLITHIASIS

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Introduction. The main cause of obstruction of the upper urinary tract is urolithiasis. Its consist of all urological diseases is about 40%. Traditional X-ray methods have a leading role in the diagnosis of urolithiasis, but they do not always allow to recognize small and x raystones. Most authors suggest greater use of computed tomography (CT) as a more informative method for detecting stones. The role of ultrasonographic examination at ureterolithiasis limited to the assessment of renal pelvis and lower ureter.

Objective. Assess the sensitivity of transabdominal ultrasonography in the diagnosis of ureteral stones.

Materials and Methods. We conducted ultrasonographic examination on 76 patients (52 men, 24 women) with a mean age of 35 ± 8 years, with symptoms of acute renal colic, the cause of which was ureterolithiasis. The study was performed on the ultrasound scanner Toshiba Aplio and Philips iU-22 using convex sensors for abdominal studies 2.5-5 MHz linear transducers 5-8 MHz.

Results. The presence of calculi in the ureter was found on computed tomography. The average diameter of the stone by CT was $7,4 \pm 4,4$ mm. Most often stones were located in the distal ureter: in the bottom third of the 32 (42.1%). Further, the frequency of detection of stones followed the upper third - 27 (35.5%) and middle third - 17 (22.4%). In 69 (90.8%) was found hydronephrosis varying degrees. Ultra-

sonography of 76 patients with ureteral stones were detected in 62 (81.5%). Depending on the localization of the stones in the lower third of the ureter were found in 27 (84.3%) patients, in the middle third - in 10 (58.8%) and in the upper third - in 25 (92.6%) patients. 14 (18.5%) patients during ultrasonography presence of calculus was not revealed occlusive stone diameter was smaller than 4 mm and hydronephrosis signs were not detected.

Conclusions. The sensitivity of ultrasonography in identifying ureteral stones amounted to 81.5% and depended on their size and location.

EFFECTIVENESS OF VARICOCELECTOMY IN ADOLESCENTS

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Introduction. According to the WHO, the etiology of male infertility is currently represented almost 30 reasons. At the same time in the idiopathic form accounts for up to 16-25% of all cases. It is believed that varicocele causes infertility in 10-40% of patients. Such large differences in these indicators testifies to the discussion of the provision. The prevalence of varicocele in adolescents aged 14-18 years is 19%. Early identification of varicocele allows for correction of impaired fertility and preserve the reproductive function of childbearing age. The literature debated questions about the effectiveness of surgical correction of a varicocele, and the impact of the disease on the level of spermatogenesis and fertility in adolescents ejaculate.

Materials and methods. The basis of the research results have made the examination and treatment of 40 patients with a diagnosis of varicocele degree I-II appealed to the "Republican Specialized Center of Urology" in the period from 2014 to 2015. Diagnosis by palpation and dopplerography examination of the scrotum. The age of patients ranged from 16 to 18 years (mean age $17 \pm 0,5$ years). Before the operation period revealed the following average in adolescents: Volume (ml) $2,4 \pm 0,1$; concentration (million/ml) $55 \pm 4,3$; Live sperm (%) $60 \pm 3\%$; Active mobility $11,7 \pm 1,2$; Low mobility of $30 \pm 1,5$; Normal morphology (%) $41 \pm 1,5$; Cells spermatogenesis (%) $3,7 \pm 0,3$; Fructose 150 ± 25 mg%; Testicular volume of 14 ± 4 ml; 38 (95%) patients carried Inguinal deligation veins of the spermatic cord from the left, and the remaining 2 (5%) patients made Inguinal deligation veins of the spermatic cord on both sides.

Results. The patients returned to the visual inspection after 6 months. Repeated survey operated patients, we found the following results: Volume (ml) $2,1 \pm 0,1$ [WHO standards 2.0-6.0]; concentration (million/ml) $65 \pm 5,3$ [WHO standards more than 20]; Live sperm (%) $70 \pm 5\%$ [WHO standards more than 50]; Active mobility $37,7 \pm 3,2$ [WHO standards more than 25]; Low mobility of $26 \pm 1,8$ [WHO standards more than 25]; Normal morphology (%) $54 \pm 2,5$ [WHO standards more than 50]; The cells of spermatogenesis (%) $2,3 \pm 0,5$ [WHO standards 1-2]; Fructose 75 ± 20 mg% [WHO standards more than 13]; Testicular volume of 14 ± 4 ml [WHO standards 12-17]; Repeated palpation of the scrotum and dopplerography examination revealed no pathology.

Conclusion. From the above data it can be concluded that, the level of the basic parameters of semen fertility characterizing the mobility and the number of normal sperm forms, shows a significant decrease in their in the varicocele in adoles-

cents surveyed preoperative stage. However postoperative semen analysis adolescents shows a beneficial effect on corrections varicocele, which allowed to raise the level of preoperative subfertility above the lower limit fertility.

DYNAMICS OF DEVELOPMENT, FORMATION AND DEVELOPMENT OF MICROVASCULAR STOMACH IN OLD POSTNATAL ONTOGENESIS

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Among endocrine diseases diabetes is the most common. In some regions of the world, its share comes to 56%. He damaging vessels of various calibres, causing macro- and microangiopathy, metabolic changes in the microvasculature of, promotes their structural and functional lesions, various complications. The reason for the early development of vascular lesions and diseases of the internal organs, according to many reports, is hyperglycemia.

The aim of The research. The study of the dynamics of development, the formation and the formation of microvascular stomach in old postnatal ontogenesis (2 years) with diabetes mellitus.

Materials and methods. To study angioarchitectonics stomach through the thoracic aorta was slowly introduced into the mass Gerota H.H.Kamilova modification. The material obtained by the method of antireflection Malygina and after appropriate wiring embedded in paraffin. Sections enlightened drugs thickness of 60-90 m in the subsequent dew axing concluded polystyrene. Thereafter, the slides were stained with haematoxylin-eosin.

It was determined diameters, the thickness of each layer microvessels and percentage. Statistical treatment of the results was performed using standard methods of variation statistics using Student's t-test.

Results of The study. The results indicate that after two years the simulation of alloxan diabetes in rats in the interstitial tissue of all layers of the stomach wall and around the vessels noted more significant growth of connective tissue with the formation of thick layers and hyalinises foci. Consequently, arterioles and capillaries is significantly narrowed. Especially pronounced sclerotic changes around the arteries, the wall is considerably thicker. In this, the endothelium and smooth muscle cells fuse to form a single layer in the wall of the hyperchromic arterioles. Around these vessels muscular layer of the stomach loosened and infiltrated connective tissue cells and collagen fibres penetrated. The submucosa of the gastric funds, described inflammatory and sclerotic changes are more pronounced than in other departments. Perivascular infiltration causes deformation, thickening of the vessel walls, narrowing of the lumen with marked venous stasis. In the lamina propriety glands between the thickened layer of fibrous connective tissue, decreases the capillary, which indicates atrophy of the glands.

Conclusion: 1. When alloxan diabetes observed in the stomach wall thinning and thickening of the endothelial basement membrane adventitia of arterioles and capillaries, the progression of inflammatory and sclerotic processes in the mucosa and submucosa. 2. In the subsequent (2 years) sclerotic changes include other membrane of the stomach, causing degenerative changes in the walls of the stomach, irregular changes in microvascular lumen, leading to hypoxia and organ failure.

HISTOPATHOLOGY OF CEREBELLAR TUMORS IN CHILDREN CAN BE PREDICTED ON BASIS OF FINDINGS ON PREOPERATIVE BRAIN MAGNETIC RESONANCE IMAGING

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In accordance with modern literatures pilocytic astrocytoma (PAs), medulloblastoma and ependymoma constitute the major part of posterior cranial fossa tumors in pediatric patients, with 27-40-%, 30-55%, 5-10-% respectively. In this group of patients, knowledge of preoperative probability of histopathology has a considerable influence on many aspects of care. According to the recent researches, medulloblastomas correlate with hyperintensity on diffusion-weighted imaging, whereas measurement of T (2)-weighted signal intensity (T2SI) is useful in identification of low-grade cerebellar neoplasms. This study was conducted to evaluate whether objective findings on these MRI sequences reliably correlated with the underlying histopathology.

Methods. We analyzed the MRI findings of 32 children with cerebellar tumors operated in the Republic Scientific Centre of Neurosurgery during the period of 2010-2015. Region of interest determination was used to account the relative diffusion-weighted signal intensity (rDWSI) and relative T2SI (rT2SI) of each neoplasm.

Results. To foretell histopathology, a simple method consisting of sequential measurement of rDWSI and rT2SI was constructed. As a result, 24 of 32 (75%) tumors were accurately predicted. Also, the results were confirmed by using Tukey's multiple comparison tests: medulloblastomas have significantly higher rDWSIs than PAs/ependymomas, and PAs have significantly higher rT2SIs in comparison with medulloblastomas/ependymomas.

Conclusion. To sum up, measurement of rDWSI and rT2SI using standard MRI of the brain can be used to prognosticate histopathology with favorable accuracy in pediatric patients with cerebellar tumors.

STAGE SURGERY RESULTS IN PATIENTS WITH COMBINED CAROTID ARTERY DISEASE AND GALLSTONE DISEASE

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Objective. Evaluation of stage surgical results correction in patients with concomitant carotid arteries and gallstone disease.

Material and Methods. The surgical treatment results of 50 patients (male - 13, female - 37) were treated at the department of angioneurology and abdominal surgery of the 2th-clinic of Tashkent Medical Academy in the period from 2010 to 2015 with combined carotid arteries and gallstone disease. The age of patients ranged from 42 to 69 years (median age $57,41 \pm 7,11$). In all patients the neurological status was evaluated before and after surgery and in the long term.

All 50 patients with gallstone diseases was revealed hemodynamically significant lesion of the carotid arteries.

According to the difference of treatment tactics the patients were divided into 2 groups:

- **I group (basic)** - 16 patients who had first stage performed reconstructive sur-

gery on carotid arteries, 2nd stage - laparoscopic cholecystectomy.

• **II group (control)** - 34 patients who abstained from the proposed surgical treatment in the carotid pool, they were underwent only laparoscopic cholecystectomy.

Results. According to the classification of A. Pokrovsky (1979) asymptomatic (I stage ChCVI) disease was observed in 2 (4%) patients, transient ischemic attack (TIA) - in 7 (14%), encephalopathy - in 32 (64%), and 9 (18%) patients had an ischemic stroke in anamnesis.

The indications for reconstructive operations on carotid arteries for symptomatic lesions were - all types of plaque narrows the lumen of the vessel 60% or more. For asymptomatic lesions - homogeneous plaque narrows the lumen of the vessel to 70% or more, and heterogeneous hypoechoic, ulcerated plaques with stenosis of 60% or more. In the control group, in the early postoperative period (30 days), ischemic stroke occurred in 1 (2.9%) patient was done the conservative medical therapy, the patient has marked regression of neurological symptoms. In the long term (to 36 months). This indicator increased to 20.6% (7 patients).

In the basic group, in the early postoperative period the ischemic stroke was not observed. In the long term period in 1 (6%) patients with previous ischemic stroke developed repeated ischemic stroke on the contralateral side was developed after conservative measures with a positive result.

Conclusions. When treating patients with combined carotid artery disease and gallstone disease must adhere to the tactics of the dominant is the carotid surgery for prevention of ischemic stroke. Subsequently, preference should be given to the surgical interventions with the least aggression, including laparoscopic surgery. Priority perform reconstructive surgeries on the carotid in patients with gallstone disease in most cases, to achieve improvement of the patient, to avoid serious complications such as acute stroke disability.

OPTIMIZATION OF DIAGNOSTICS OF CHRONIC PHARYNGITIS

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Chronic inflammation of the throat is one of the most common pathologies in the ENT practice. Chronic pharyngitis occupies more than 5.7% of the total number of ENT organs. So it does not decrease the interest constant research in the issue of its etiopathogenesis and treatment.

The course of chronic inflammatory process may depend on the virulence of the microflora, the state of the microorganism, and the state of the mucous membrane - its innervations, circulation, degree of moisture, contamination and the nature of the microflora.

The aim of the research was the optimization of treatment of patients with chronic pharyngitis by means of their microbiocenosis and biochemical indicators of an organism.

The objectives of the research included:

1. Definition of microbiocenosis of oropharyngeal area with various forms of chronic pharyngitis.
2. Identification of specific indicators saliva enzyme activity in various forms of chronic pharyngitis.
3. Evaluate the proposed scheme of complex treatment of chronic pharyngitis.

The investigations have been performed on the base of II clinic of TMA in the

ENT department at 2015. Overall 22 patients were examined: 10 men, 12 women aged 18 to 34 years old with chronic pharyngitis. We were hold pharyngoscopy and endoscopic examinations of pharynx, salivary pH research, and microbiological research of pharyngeal mucosa and biochemical blood tests.

The results showed that chronic pharyngitis enforce to violation of all the functions and protective inflammatory reactions. The course of the disease is often accompanied by painful symptoms for patients and often leads to a reduction in the quality of life of patients. All this contribute to the need for further research of the etiopathogenesis of chronic pharyngitis, the research of the nature of the influence of various factors on the mucous membrane of the pharynx, the clinical picture and the peculiarities of its course in different individuals and in different forms of the disease. In this regard, the development of new effective treatments for chronic pharyngitis is of great scientific and practical importance.

Thus the development of an integrated approach to the diagnosis and treatment of chronic pharyngitis, assessment of the role of concomitant somatic diseases and in the development of chronic inflammatory diseases of the throat allow to reduce the incidence of this pathology and increase the effectiveness of treatment and reduce the number of relapses of the disease which improve the quality of life of patients.

THE IMPACT OF CHRONIC RHINOSINUSITIS ON SLEEP-DISORDERED BREATHING

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Background. The nose plays an important role in sleep quality. Very little is known about sleep problems in patients with chronic rhinosinusitis(CRS). The aim of this study was to investigate the impact of CRS on sleep-disordered breathing.

Methodology. CRS patients who underwent functional endoscopic sinus surgery were collected between July 2010 and May 2015. Before surgery, they filled 20-item Sino-Nasal Outcome Test and Epworth Sleepiness Scale questionnaires, were asked about the severity of nasal obstruction, and received acoustic rhinometry, smell test, an endoscopic examination, sinus computed tomography, and a one-night polysomnography. Sleep quality was evaluated in these patients and was correlated with the severity of rhinosinusitis.

Results. One hundred and thirty-nine CRS patients were enrolled in the study. Among them, 38.1% complained of daytime sleepiness, and this sleep problem was correlated with the symptom of nasal obstruction. Obstructive sleep apnea syndrome (OSAS) was diagnosed in 64.7% of the patients, but there was no correlation with the severity of rhinosinusitis. Nasal polyps did not worsen sleep problems in the CRS patients.

Conclusions. This study showed that CRS patents had a high prevalence of OSAS, and worse OSAS in CRS patients was not correlated with the severity of rhinosinusitis.

THE IMPACT OF HYPOLIPIDEMIC DRUGS ON COURSE AND PROGNOSIS OF LUNGS CANCER

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Introduction. Nowadays, hypolipidemic drugs reached the status of widespread medicines, which proved their effectiveness in prevention and therapy of Coronary

heart disease (CHD). It was determined, that drugs of this group have some other biological effects, particularly their impact on growth and differentiation of stem cells, which for long time was known as the cause of appearance of undesirable side effects during therapy. However, couple years ago was began to speak theory, according to which side effects of this drugs have possibility to transform into strong tool in the fight with terminal stages of cancer.

Aim of the study. The purpose of this study was to determine the long term effects of hypolipidemic drugs on course and prognosis of patients with terminal stages of the lungs cancer.

Materials and methods. The object of the study were 48 patients, which consist of 36 males (75%) and 12 females (25%), with middle age $48 \pm 1,5$ with lungs cancer in IIIa and IV stages. They were placed under observation in period of time from November to December of 2013. All patients were divided into 2 groups: Basic group-23 patients with CHD, who were taking the hypolipidemic drugs (atorvastatin, simvastatin) in dosage 20-40 mg daily during 2-7 years; control group-25 patients, who weren't taking hypolipidemic drugs. The average duration of observation was 18 months.

Results. During study there was observed, that the average length of the life of patients from control group accounted for 9 months, whereas the average duration of the life of patients from basic group accounted for 11 months. It was determined, that among those patients, who used hypolipidemic drugs at least for 2 years, there was a decrease of letality in average for 19% from concretely cancer deaths. Moreover, there was shown an upward tendency in length of the life relatively with increasing of hypolipidemic drugs dosage.

Conclusion. According to carried study, it can be said, that patients with lungs cancer, who taking hypolipidemic drugs for long period, have shown statistically significant increase of life duration. This statement is not absolutely clear, because we can say exactly is this effect connected with influence on stem cells or it caused by decreasing of cholesterol in organism, but there are some grounds to estimate this direction very perspective for longer investigation and access to clinic practice.

CLINICAL MANIFESTATIONS OF ACUTE EPIDIDYMITIS IN PATIENTS OF DIFFERENT AGE

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Introduction. Acute epididymitis, an infectious-inflammatory disease of the epididymis, lasts less than six weeks. In some cases, the inflammatory process is involved, along with involved testis, and then it comes epididymo-orchitis. In the structure of emergency urological incidence of acute epididymitis share ranges from 4.6 to 10.2%. Acute epididymitis fifth in the incidence of urological disease in men aged 18 to 50 years. Acute epididymitis is mostly one-sided, two-way process is observed in 9% of patients. In 15% of patients as a result of suffering an acute inflammation formed a chronic inflammatory process in the epididymis, which in turn is causing sclerotic, degenerative changes in it, a violation of patency of the vas deferens, leading to the development of obstructive infertility.

Materials and methods. The basis of the research results have made the examination and treatment of 60 patients with epididymitis, applied in "Republican Specialized Center of Urology" in the period from 2014 to 2015. The age of patients

ranged from 18 to 60 years (mean age $39\pm 6,5$ years). Depending on the causes of epididymitis, studied patients were divided into three age groups: Group 1 - 20 patients with age of patients from 18 to 35 years., Group 2 - 20 patients with age of patients from 36 to 55 years . Group 3 -20 patients age group of patients over 55 years. Patients were carried out in accordance with the algorithm of examination of patients with epididymitis, adopted at the clinic, including assessment of complaints and medical history, physical examination, analysis of urine, bacterial urine culture if indicate, ultrasound examination. The study evaluated by common reasons of epididymitis, as well as depending upon the age.

Results. In the study of patients to detect acute epididymitis revealed the following: In the first group, 75% (15 patients) found sexually transmitted infections : Chlamydia spp. Neisseria gonorrhoeae; 15% (3 patients) trauma urethra; 10% (2 patients) after suffering a UTI at which found E.Coli, Klebsiella. In the second group revealed 80% (16 patients) after suffering a UTI at which found E.Coli, Klebsiella; 10% (2 patients) trauma urethra; 5% (1 patient) found sexually transmitted infections : Chlamydia spp. Neisseria gonorrhoeae; 5% (1 patient) operated for hydrocele; In the third group revealed 80% (16 patients) after TURP, TUR of bladder tumors; 10% (2 patients) after suffering a UTI at which found E.Coli, Klebsiella; 10% (2 patients) after Bergman surgery (hydrocele).

Conclusion. From the above data it can be concluded that between 18 and 35 years, the cause of acute epididymitis found sexually transmitted infections in 75% of cases. So, mostly young sick epididymitis due to sexually transmitted infections. The second group of patients aged 36 to 55 years, the cause of acute epididymitis revealed 80% UTI, and patients of middle age suffer from acute epididymitis due UTI. The last third of the group aged above 55 years, 80% of the cases revealed state after TURP, TUR bladder tumors; On these patients we can say that the main cause of acute epididymitis was different operational intervention.

OPTIMIZATION OF SURGICAL TREATMENT OF PATIENTS WITH CRITICAL LOWER LIMB ISCHEMIA

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Objective. Improved results of treatment of patients with critical lower limb ischemia (CLLI) by improving the diagnosis and surgical tactics.

Material and methods. During the period from 2014 to 2015. In the Department of Vascular Surgery Clinic II-Tashkent Medical Academy for hospital treatment were 79 patients (male 58, female 21) with CLLI. In 14 (17.7%) patients with CLLI coronary heart disease has been identified (CHD). In 65 (82.2%) patients revealed combined carotid artery (CA) and lower limb arteries (LLA). Of these, 47 (59.4%) patients had coronary artery disease identified (7.9% of patients had previous myocardial infarction). When determining treatment strategy an important role presents the opportunity endovascular correction.

Results. In 19 (24%) patients with stenosis of the CA at CLLI managed to regress, in 12 (63.1%) produced by the installation of the catheter for continuous intra-arterial catheter therapy, and then performed carotid endarterectomy. Of these, 9 (47.3%) patients in the 7 day performed reconstructive surgery on the LLA. 5 (26.3%) patients after carotid endarterectomy performed endovascular interven-

tions. 1 (1.2%) patient made high amputation of limbs due to the progression of ischemia. In 1 (1.2%) patients developed acute myocardial infarction deaths.

Selecting the one-stage tactic it was based on the impossibility of relief CLLI and no other interventional procedures or their ineffectiveness. Simultaneous operations in patients with stenosis of the CA at CLLI made in 4 (5%) patients. No complications were observed.

In 22 (27.8%) patients with lesions of the CA and the LLA first stage performed endovascular interventions for kinks out of which 5 (6.3%) patients underwent fusion surgery. In 1 (1.2%) case is made with high amputation deaths, and 1 (1.3%) patient amputation at Sharpe.

Public intervention in CLLI first stage were performed in 16 (20%) patients. The 4 (5%) cases performed palliative intervention (thoracoscopic sympathectomy). Of these, 1 (1.2%) produced high amputation of limbs due to the progression of ischemia. In 6 (7.5%) patients with lesions of the coronary artery (CA) and the LLA first stage stenting spacecraft and the second stage of reconstruction of the LLA. In 2 (2.5%) patients, the first step is made in the open intervention of the , in 6 (7.5%) patients - endovascular intervention.

The effectiveness of interventions determined on the basis of improving the blood flow in the lower extremities. Initially ABI patients was $0,27 \pm 0,04$, for 3-4 days after surgery on the LLA, ABI has increased to $0,53 \pm 0,3$ ($p < 0.05$).

Conclusion. The treatment of patients with CLLI should depend on the lesions of other arterial pools. The priority in selecting the method of surgical interventions should be endovascular interventions in connection low operational risk. In patients with CLLI an integrated approach in the diagnosis and treatment of such a severe category of patients. This allows you to determine the optimal surgical approach for each individual patient.

THE INFLUENCE OF RISK FACTORS IN PROGRESSION OF COLORECTAL CANCER IN STAGE III AFTER RADICAL TREATMENT

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Aim of the research: to study the impact of risk factors on the progression-free survival of tumor in patients with stage III colorectal cancer after radical treatment. Based on the study of factors to develop a nomogram to calculate the expected probabilities of live 3 and 5 years with no signs of resumption of the disease.

Materials and methods. The object of the study were patients ($n=100$) with primary colorectal cancer stage III, received treatment RONC and TashCOD from 2010 to 2015. Median follow-up for all the studied was 39 months. In the case of the localization of the tumor in the rectum patients underwent radiotherapy single focal dose of 5 Gy, the total focal dose of 25 Gy in 5 days. After it ended on 1-3 th day performed radical surgery. All patients with tumors of the rectosigmoid colon, and a compound obtained by radical surgical treatment depending on the tumor. Adjuvant treatment was performed in 51 patients out of 100 according to the scheme: Calcium folinate 200 mg/m^2 in the 30-minute/infusion 5-fluorouracil 400 mg/m^2 4-hour in / infusion of 1-5 days. Start the first course - 28-30 days after the operation. The interval between the beginning of the course to 28 days. Conducted 4-6 courses. From the data

set excluded patients who underwent 1-3 courses of adjuvant chemotherapy. As relapse accepted fact of registration of locoregional recurrence, distant metastasis or death from the underlying disease. Survival was estimated by Kaplan & Meier Test and Log-Rank Test. Confidence intervals were calculated based on estimates of the standard error formula Greenwood. As risk factors are considered: age, gender, tumor location (according to the International Classification of Diseases), depth of tumor invasion of the bowel wall (T), the extent of metastatic involvement of regional lymph nodes (N), the degree of malignancy of tumor cells (G), the absence of adjuvant chemotherapy proposed operation. To evaluate the joint effect of potential risk factors survival regression analysis was used. The analysis used the nonparametric Cox proportional hazard model.

Results. Adverse prognostic factors for the development of any progression of tumor in patients with stage III colorectal cancer after radical treatment for 5 years, in order of importance as follows: Metastatic lesion 4 or more regional lymph nodes (N2): relative risk (RR)=2.2 (95% confidence interval (1,6÷3,0)), $p=1,04e-06$; Depth of tumor invasion of the intestinal wall, corresponding T4: OR=1.6 (95% CI, (1,1÷2,2)), $p=0.0100$;

The absence of adjuvant chemotherapy developed scheme: OR=1.5 (95% CI (1,09÷2,04)), $p=0,0116$; The localization of the tumor in the rectum (C20): OR=1.5 (95% CI (1,06÷2,0)), $p=0,0204$. We construct a nomogram to calculate the expected probability of survival without progression of tumor (3 and 5 years) patients with stage III colorectal cancer.

Conclusions. Built on the basis of univariate analysis identified predictors of adverse prognosis nomogram to calculate the expected probabilities of live 3 and 5 years with no signs of resumption of the disease for patients with stage III colorectal cancer, allow to individualize the program of complex treatment of patients.

USING THE MINI INVASIVE TECHNOLOGIES IN PATIENTS WITH ACUTE CHOLECYSTITIS

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Objective. Ways to improve the results of using mini invasive technologies in patients with acute cholecystitis.

Material and Methods. Was performed Laparoscopic cholecystectomy (LChE) during the period from 2014 to 2015 in 79 patients with acute calculous cholecystitis. The age of patients ranged between 26 and 67. Gender structure: women were 58 (76.3%) and men were 18 (23.7%). With acute calculous catarrhal cholecystitis were operated 3 (3.8%) patients, with acute calculous phlegmonous cholecystitis were operated 47 (59.5%) patients and with acute gangrenous cholecystitis were operated 29 (36.7%) patients. With symptomatic cholelithiasis and mechanical jaundice received 9 (11.4%) patients. From them 7 (8.9%) patients after endoscopic retrograde cholangiography (ERChG) were confirmed concrements to the common bile duct and 2 (2.5%) patients were revealed stenosis cholangitis. All of these patients the first step was performed endoscopic papillosphincterotomy (EPST). In 2 patients with choledocholithiasis EPST carried out in 2 phases. One patient was 63 year old woman for the extraction of stones from hepaticocholedochus ERChG with EPST had to perform before and 4 days after the LChE with good early and late re-

sults. As a result of clinical examination, ultrasound determined the indications for emergency surgery or conservative treatment was performed within 12-24 hours. When signs of acute cholecystitis decreased, LChE performed 24-48 hours from the time of admission, or 1-3 months in a planned manner after discharge of the patient from the hospital. Patients with choledocholithiasis, LChE performed 2-3 days after ERChG and removing stones from the common bile duct.

Results. In 12 (15.2%) patients during LChE, we met with a situation where the rear wall of the gallbladder to separate from the liver without damaging of the liver parenchyma was impossible. In these cases the entire rear wall or its parts, which could not be isolated from the liver, were left subsequent electrocoagulation mucosa, with any case post-operative complications. Paravesical abscesses were observed in 1 (1,3%) cases. Syndrome Mirizzi met in 2 patients. Local serous peritonitis was diagnosed in 58 (73.4%) patients and the local-fibrinous peritonitis was diagnosed in 18 (22.8%) patients. Intra-operative complications occurred in 3 (5.1%) patients in the form of bleeding from the cystic artery - 3 (3.8%) and hepatic veins - 1 (1.3%) cases. Postoperative complications were observed in 2 (2.5%) patients: fester umbilical puncture - 1 (1.3%), upper abdominal abscess puncture - 2 (2.5%).

Conclusions. LChE and ERChG with EPST is the procedure of choice in patients with acute calculous cholecystitis, can improve the postoperative period, to reduce the number of postoperative complications, as well as significantly improve the long-term results of treatment of patients.

CLINICAL MANIFESTATIONS OF RHINOSINUSITIS IN HEMOBLASTOSIS

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Diseases of the nose and paranasal sinuses is the leading diseases of ENT organs, as well as in patients with diseases of the blood revealed a significant percentage of the various forms of rhinosinusitis.

The aim of the study was to examine the manifestations of inflammatory diseases of the nose and paranasal sinuses in patients with hematological malignancies.

Material and methods. In total 60 patients with acute and chronic leukemia, we are hospitalized to clinic of Research Institute of Hematology and Blood transfusion of Ministry of Health of Republic of Uzbekistan. The diagnosis was made in conjunction with the hematologists on the basis of laboratory and clinical parameters of peripheral blood and bone marrow. Hemorrhagic syndrome in acute hematological malignancies were detected in 14 (28.3%), chronic - in 31 (51.7%) patients examined. The presence of inflammatory diseases of the paranasal sinuses were detected on the basis of clinical and instrumental studies. Hemogram was performed on a hematology analyzer.

Results and discussion. Studies have shown that acute hemoblastoses – the purulent-inflammatory diseases of the nose and paranasal sinuses were found in 25 (41,6%) of patients and occurs with severe symptoms of purulent process. Microbiological research has been shown a predominance of sowing several microorganisms, often anaerobes. At the same time, chronic sinusitis occurs in the form of purulent inflammation, inert, poorly respond to treatment, often accompanied by epistaxis. Isolated sinus revealed a lesion in 8 (13,3%) surveyed, policy, and hemi,

pansinusitis detected in 11 (18,3%); 9 (15%) and 7 (11,6%) patients. These peripheral blood hematological parameters deteriorated significantly increased the number of blast cells. In analyzing the changes of integral indicators of peripheral blood leukocytes of patients were established more pronounced shifts in patients with mixed pathology, which coincides with the clinical course of the underlying disease, the development of thrombus syndrome. When inflammation of mononuclear phagocytes promote local increase coagulating properties of the blood, tissue fluid, lymph, which is accompanied by thrombosis and impaired microcirculation, thereby forming a fibrin has a protective role in limiting the area of inflammation. However, in parallel, in the area of inflammation, increased fibrinolytic activity, leading to the normalization of blood flow in Microvessels and simultaneously stimulates the development of the destructive phase of inflammation.

Conclusion. In chronic hemoblastoses purulent-inflammatory diseases of the nose and paranasal sinuses proceed with the erased clinical and acute - symptomatic of purulent process and endogenous intoxication.

THE MORDEN APPROACHES IN TREATMENT OF FURNIER GANGRENE IN PATIENTS WITH DIABETIS MELLITUS

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Objective. To study clinical course of Fournier gangrene and the choice of treatment tactics in patients with diabetes mellitus.

Materials and Methods. In the report published by the Republican Center of Purulent Surgery and Surgical Complications of diabetes patients, which was provided by Ministry of Health of the Republic of Uzbekistan, in the period from 2012 to 2015, 29 patients with phlegmon Fournier were observed. The average age of the patients was 62.6 years and all patients had diabetes. The average hospital stay was 12.4 days. All patients received intensive care which is an important element in the treatment of anaerobic infections. That included: 1) Regulation of blood sugar levels (insulin therapy), 2) Antibiotic Therapy. Taking into consideration the mixed microbial etiology, first of all the broad spectrum drugs were administered such as (fluoroquinolones III-IV generation cephalosporins III-IV generation carbapenem combined with metronidazole and systemic antifungal drugs). After the bacteriological examination of the wound the corrections were made. 3) Massive Infusion Therapy. The Infusion volume of up to three liters per day (colloids, crystalloids, protein drugs), 3) Prevention of thrombosis and embolism (non-fractionated heparin, antiplatelet agents), 4) Antihypoxants and immunomodulators (Neupogen) 5) Symptomatic therapy.

Results. An important role in the development of cellulitis Fournier was played by diabetes in all patients, cardiovascular systems were affected in 7 patients, alcoholism - in 2 patients, urinary tract infection and ad rectal area - in 4, contributed by long-term use of hormones and cytostatic in connection with rheumatoid arthritis-1. The Lethal outcome was observed in 3 (10.3 %) patients from multiple organ failure with severe intoxication and sepsis syndrome. In 25 (86.2 %) patients had a spontaneous form of gangrene Fournier, in 4 (13.8%) - repetitive, in 3 (10.3%) with orchiepididymitis in the background, and one (3.4%) - after the Winckelmann operation. All patients underwent complete clinical and radiological study. As well

as electrocardiography was performed and blood culture and wound exudate flora with sensitivity to antibiotics. In 8 cases (27.6%) patients on admission were transferred to the intensive care unit due to the severity in their condition and for short-term preoperative preparation. Typically, the disease begins acutely, with typical symptoms of intoxication: general weakness, a sharp increase in body temperature to febrile digits (40°C) tachycardia, chills, and weakness. The putrid stench which is the characteristic of damaged soft tissue, effacement classical signs of infection with prevalence of symptoms of general intoxication.

Discussion. In our opinion –the radical surgical treatment which is focused on purulent- necrotic core, followed by daily dressings and an adequate antibiotic and infusion therapy are the main stages of complex treatment. It is required that during the surgical treatment the extensive dissection of the tissue that is affected by infection while relying on visual indications of change in tissue, precise necrectomy without the fear of baring testicles. Surgical treatment should be performed after a short preoperative preparation. In patients with septic shock surgery was performed only after stabilization of blood pressure and admission surgery was limited only to lampasnymi incisions to drain pus and aeration of the tissue.

Conclusions. Due to the presence of diabetes mellitus, the spread of anaerobic putrefaction has a malignant progression than without it. It is due to a decrease in reaction in the immune system, the polyvalent (distressed) micro flora and the anatomical structure of the perineum and inguinal regions. In the treatment of Fournier gangrene the main importance is a timely surgery (radical surgical treatment of purulent- necrotic focuses, phased necrectomy, dermepentesis) and multicomponent intensive care.

SHORT-TERM RESULTS OF ENDOVASCULAR TREATMENT OF PATIENTS WITH ISCHEMIC HEART DISEASE

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Objective. Assessment of the immediate clinical and angiographic results of coronary artery stenting in patients with stable ischemic heart disease IHD.

Material and methods. The study includes the results of examination and treatment of patients with IHD, which from September 2015 to November 2015 in the 2nd Clinic of the Tashkent Medical Academy were performed endovascular interventions on the coronary arteries in 26 patients. The indication for intervention was the presence of angiographic and clinical significant stenotic coronary vessels. In most cases, these were male patients – 61,5% (n=16), aged from 44 to 75 years and female patients – 38,5% (10). The duration of ischemic heart disease averaged $5,6 \pm 0,4$ years. From the cardiovascular risk factors most often observed hypertension, dyslipidemia, smoking, and 42,3% (n=11) of patients had previous myocardial infarction. Patients were mostly with stable angina, functional class 3-4. When echocardiography - study, all patients were evaluated left ventricular ejection fraction, averaged $52 \pm 4,6\%$. In all cases, coronary angiography was performed routinely. According to coronary angiography revealed 46,2% (n=12) of cases a single vessel disease, 34,6% (n=9) –bilateral vascular, 3 patients three defeat. Stenosis were 80-99% and were determined by measuring the specific software universal angiographic device. Coronary occlusion was observed in 19,2% (n=5) patients.

Results. All patients were conducted successful endovascular intervention. Dur-

ing the stenting in most cases, 61,5% (n=16) used the procedure for direct stenting. In 11,5% (n=3) cases of bifurcation lesions of the anterior interventricular artery with involvement in the mouth of the atherosclerotic process used diagonal branch T-stenting technique. Most were implanted stents coated with antiproliferative drugs – 26,9% (n=7). The remaining patients were implanted with bare metal stents. In 100% of cases managed to achieve good immediate angiographic result. Endovascular interventions and hospital period was uneventful in all cases. Patients were discharged from the hospital in a stable condition. Staying in the hospital patients was 3 to 5 days, 4 days averaged.

Conclusion. The use of percutaneous coronary interventions in the treatment of coronary artery disease is a relatively safe and effective. Performing percutaneous coronary intervention in the clinic with no cardiac support is acceptable with careful selection of patients, the procedure experienced operator and the availability of highly skilled cardiac team.

EPIDURAL VERSUS MULTIMODAL ANALGESIA FOLLOWING MAJOR ABDOMINAL SURGERY

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Pain is one of the most common, unpleasant and frightening symptoms associated with surgery. Major abdominal surgeries with abdominal incisions lead to severe abdominal pain, which if treated inadequately, can cause shallow breathing, atelectasis, retention of secretions and lack of cooperation in physiotherapy. Adequate postoperative pain control enables fast patient rehabilitation and decreases hospital stay, also significantly reduces postoperative complications.

Objective: to compare epidural and multimodal analgesic methods following the major abdominal surgery.

Materials and Methods: 80 patients, who underwent elective major abdominal surgery, were divided into two (epidural and multimodal) groups. In epidural group thoracic epidural catheter was placed immediately after the surgery at Th8-Th9 level. In this group patients received epidural injections of bupivacaine 8ml-0.25% and 50mcg fentanyl every 2-4 hours. In multimodal group patients were given intravenously 1000mg acetaminophen infusion every 8 hours, 30mg of ketorolac every 6 hours and 100mg of tramadol every 12 hours. In both groups pain management was started immediately after operation and prior the complaints for pain. Pain intensity, haemodynamic changes, motor block of lower extremity, nausea and vomiting were recorded in every group for 3 postoperative days. In the end all patients were asked to answer “Yes” or “No” to question “Are you satisfied with the postoperative pain management?”.

Results: overall pain intensity was lower in epidural group. Incidents of very severe and severe pain were not observed in epidural group. In multimodal group only 3 (7.5%) patients complained for severe pain on the 1st postoperative day. Moderate pain incidence was 12.5%, 0% and 0% in epidural group, but in multimodal group 42.5%, 22.5% and 5% on the 1st, 2nd and 3rd postoperative days respectively. Mild pain incidence was 75%, 50% and 22.5% in epidural group and 50%, 75% and 57.5% in multimodal group on the 1st, 2nd and 3rd postoperative days respectively. On the 3rd postoperative day 75% of patients in epidural group and 37.5% of patients in multimodal group had not any pain. 91.5% patients in epidural and 85% patients in

multimodal groups were satisfied with pain treatment method. Lower block motor extremity was not recorded in epidural group during our trial. There were 4 (10%) occasions of significant blood pressure drop following the epidural infusion of bupivacaine and fentanyl in the epidural group which were treated with bolus crystalloids. On the other hand there were no significant haemodynamic changes in multimodal group ($p < 0.01$). Prevalence of nausea and vomiting were equal in both groups.

Conclusion: epidural analgesia provides better control of postoperative pain than multimodal regime, but patient satisfaction was very similar in both groups 91.5% and 85%. Although epidural analgesia ensures slightly better satisfaction, but this method was associated with some risk as a significant blood pressure drop which we observed in 4 of our patients. We recommend multimodal pain management following major abdominal surgery as an effective and safe pain control method.

ROLE OF PROLONGED INTRA-ARTERIAL CATHETER THERAPY IN COMPLEX TREATMENT OF ACUTE PANCREATITIS

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Objective: to improve the results of treatment patients with acute pancreatitis by prolonged intra-arterial catheter therapy(PIACT) in complex treatment.

Materials and methods. Were analysed results of treatment of 24 patients with AP during the first 48 hours of illness, admitted to the 2-clinic of the Tashkent Medical Academy from 2013 to 2015. Complex conservative treatment was performed according to standard of management of patients with AP. In all patients complex treatment begins with PIACT, which was supplemented by a differentiated minimally invasive operations – echo-controlled puncture-drainage method, endoscopic papillosphincterotomy, videolaparoscopic intervention. Special angiographic catheter was introduced into the celiac trunk through one of the femoral arteries by Seldinger technique. After intraarterial catheter was introduced at a rate of 40 mlph of 0,25%-250 ml Novocaine solution, 40 000 IU of Contrikal, 250 ml of Rheopoliglucine solutions of wide spectrum of antibiotics (Merepenem or fluoroquinolones). PIACT duration was 3-7 days.

Results. Free fluid buildup was diagnosed in 15 (62.5%) patients who underwent puncture under ultrasound and X-rays, in 9 (37.5%) patients underwent abdominal drainage to eliminate the accumulation of fluid. Endoscopic papillosphincterotomy due hyperbilirubinemia was performed 9 (37.5%) patients; laparoscopic abdominal drainage due to the presence of free fluid in the abdominal cavity - 11 (45.8%) patients. For 4 (16.7%) patients after 3 weeks of hospitalization was performed laparotomy with internal drainage of omental bursa.

PIACT in most cases, made it possible to transport the drugs directly into the pancreas, leading to improvement of microcirculation, resulting in decreased edema and ischemia parenchyma.

Conclusions. PIACT in patients with AP in combination with minimally invasive surgery in 88.6% of patients allowed to achieve good outcomes.

VALUE OF UZBEK VERSION OF INTERNATIONAL INDEX OF ERECTILE FUNCTION-5 (IIEF-5) QUESTIONNAIRE EVALUATE EFFECTIVENESS OF TREATMENT

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Introduction. Erectile dysfunction (ED) is a very common medical problem affecting the lives of millions of men around the world. It's estimated that more than 150 million men worldwide suffer from erectile dysfunction and accordance with the data of the National Center for Health Statistics (NCHS), ED is the cause of more than 500 million outpatient visits to doctors. Rate of the frequency of urination disorders strongly associated with human age which increases after getting older. At the same time in men middle and older age groups, there are variety of sexual dysfunction, such as erectile dysfunction. Moreover, the risk of ED increases with the progression of urination disorders. Among the male population 13-29% of people have urinary disorders moderate or severe, 8-35% - ED of varying severity. It is clear from results of questionnaires International Prostate Symptom Score (IPSS) and the International Index of Erectile Function (IIEF), that micturition disorders and erectile dysfunction present in 71-80% of men same time.

The detection rate of both conditions increases with age, ranging from 59 to 86% in patients 40-60 years and reaching 79-100% in males 50-70 years. Currently, the primary criteria in most studies patients with ED –is a method of assessing the treatment of where there assesses sexual function. In this category, the most common methods used were questionnaires.

At the present stage is popular profile questionnaire-International Index of Erectile Function (IIEF-5), and it most widely used instrument in multicenter, international clinical studies to identify erectile problems. Currently, the majority of existing questionnaires, such as the original English version of the International Index of Erectile Function (IIEF-5), have been developed in Western countries, and to assess the local population of each country needed a translated version of the questionnaire, taking into account the cultural and social-demographic characteristics of the people.

That's why we have translated and adapted original English version of the questionnaire assessing symptoms of erectile dysfunction into Uzbek, based on the linguistic, social and religious characteristics of the local population. Uzbek version of the International Index of Erectile Function-5 (IIEF-5) consists of 5 questions and each question evaluated 5 degrees so maximal score of questionnaire is 25 minimal 5.

Material And Methods. We evaluated 56 male patients who suffered from ED with age from 26 to 58(mean age $39.6 \pm$). They filled Uzbek version of questionnaire IIEF-5 before and after treatment. IIEF-5 will used grading of ED and effectiveness of the treatment. Duration of treatment was from 20 till 40 day (mean $32.4 \pm$ day). PDE-5 inhibitors were used as monotherapy.

Results. Among results before treatment minimal score was 11 while maximal 17 (average score $15.8 \pm$) after treatment scores increased considerably minimal and maximal scores 16 and 23 respectively (avarage $21.7 +$). Results show that increasing of score among patients below than 45year is higher than patients over than 45year. For instance average score increase in younger patients to 8.3 while in

older than 45 is 5.2.

Conclusions. Uzbek version of International Index of Erectile Function-5 (IIEF-5) helps us to diagnosing ED, evaluating severity and assesses treatment of erectile dysfunction as well as original English version.

RADIOLOGICAL DIAGNOSIS OF CHRONIC GLOMERULONEPHRITIS

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Background. Chronic glomerulonephritis is a leader among chronic kidney disease in their medical and social significance, because of the high prevalence and progressive, often refractory to treatment, flow, leading to chronic renal failure (CRF), which requires constant costly replacement therapy.

Objective. To improve the method of ultrasound in chronic nephritis.

Materials and methods. All 70 patients underwent an ultrasound scan of the kidneys and urinary tract. It have been evaluated: general sizes kidney (length, width), structure of the renal parenchyma, also were detected reno-parenchymatous index and density of parenchyma.

Results. It was detected increase density of renal parenchyma, especially in cortical layer, severity of sclerotic process was connected with course and duration of disease by ultrasound examination in 70% patients with chronic glomerulonephritis. By ultrasound it had been found in 2/3 of the cases decrease the thickness of the renal parenchyma with respect to its overall diameter, which confirmed the development of secondary pielonephritis. Echo structure as parenchyma little different from the norm. In 52,6% observations revealed different degrees of deformation pyelocaliceal system with stagnation and the presence of stones. At ultrasound renoparynchimal indices are 24-46%. Index compression of the parenchyma of ultrasound picture corresponds to healthy kidneys; by ultrasound renoparynchimal index within 20-46% and the index sealing parenchyma over 25% of diagnosed chronic glomerulonephritis; by ultrasound renoparenchymal index less than 20%, the index sealing parenchyma 0-25% diagnosed chronic pyelonephritis.

Conclusion. Thus, ultrasonography is the most gentle method of diagnosis of chronic nephritis. It allows us to quickly carry out the differential diagnosis of nephritic changes.

TREATMENT OF VARICEAL BLEEDING IN PORTAL HYPERTENSION

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Relevance. Variceal bleeding portal genesis is an urgent problem surgery. At the present stage the leading role for minimally invasive techniques in the treatment of complicated forms of portal hypertension (PH). The use of endoscopic ligation (EL) in conjunction with the operation trans jugular intrahepatic porto-systemic shunt (TIPS / TIPS) is a highly effective combination in treatment of these patients.

Goal. To improve the results of treatment of patients with esophageal varicose bleeding cirrhotic genesis through the use of minimally invasive techniques - EL and TIPS / TIPS.

Material and methods: we have observed 346 patients with PH in patients with liver cirrhosis. The study included 70 patients with a history of bleeding time. The maximum follow-up was 38 months. Patients are divided into two matched groups. In Group I (36) holds in the EL monovariante, in II (34 people) - EL, coupled with the procedure TIPS / TIPS. In 31 cases the shunt allowance supplemented by selective embolization of the left gastric vein. EL 10 patients was performed against the backdrop of hemorrhage. Postoperatively, patients in both groups were subjected to the inspection tests, assessed the state of the veins of the esophagus and the risk of recurrent bleeding. Individuals of the second group performed routine ultrasound to assess the functioning of the DG intrahepatic shunt.

Results. In most cases, both groups postoperative period was uneventful. In a 360-day period of rebleeding in patients in group I was noted in 6 (16.6%), while the second - in 3 patients (8.8%). Over the entire period of observation, this complication was observed in 11 patients in group I, and 6 - the second. 30-day mortality in the two groups were observed. The one-year mortality rate in group I was 6 (16.6%), in II - 2 patients (5.8%). The survival rate for a 3-year follow-up in groups was 61.2% and 82.4%, respectively. The best results in Group II explain the elimination of the main etiological factor of bleeding - PG, made possible by the operation TIPS / TIPS. This portable manual shunt patients with decompensated forms of CPU. EL Running in conjunction with the operation TIPS / TIPS reduces the risk of recurrence of hemorrhage and a more intensive preoperative preparation in patients with decompensated liver disease stages.

Conclusions. 1. The combination of the EL and TIPS / TIPS reduces the risk of recurrent variceal bleeding portal genesis in the early and late postoperative period. **2.** The use of minimally invasive techniques possible in patients with decompensated forms of PHs and high operational risk.

TREATMENT OF THE PATIENTS WITH COLORECTAL CANCER COMPLICATED WITH INTESTINAL OBSTRUCTION

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Purpose: improve the rational approach to surgery of the patients with colorectal cancer complicated with intestinal obstruction.

Material and methods. We analyzed 224 case histories of patients with cancer of the colon and rectum, complicated by intestinal obstruction, 22 of them (8.3%) -with acute intestinal obstruction, 202 (91.7%) - with partial intestinal obstruction.

There was a distribution according to the age: until 60 years-there were 62(27,6%) patients , from 61 years and older- 202 (72,4%) patients. All patients with acute intestinal obstruction were older than 72 years, with accompanying cardiac pathology.

Patients with acute intestinal obstruction came to the hospital in serious condition, with complaints on abdomen increasing, vomiting, absence of stool and gas within 3-4 weeks .There were numerous Kloybers bowls in the small intestine on the review radiography. Patients with partial intestinal obstruction turned for the help to a doctor, after 5-12 months from the beginning of complaints, with signs of gradual deterioration of general condition.

Patients with serious condition were performed gastric intubation with evacuation of intestinal contents, infusion therapy with preoperative infusion of colloids, amino acids, plasma substitutes, salt solutions, vitamins and cardiotropic drugs.

Results and discussions. All the patients with acute intestinal obstruction were operated on the same day within 2-3 hours after admission: 3 patients was performed right-sided hemicolectomy with the formation of single-barrel ileostomy, 19 of them was performed colostomy. 2 patients died from pulmonary thromboembolism after 3 hours from operation. After 2 months, 10 patients of 19 were made radical surgery with the liquidation of colostomy. 22 (8.3%) patients of 224 was performed right-sided hemicolectomy with the formation ileotransversanastomosis, 12 (4.2%) patients - hemicolectomy with the formation of single-barrel ileostomy, 68 (30.3%) - left hemicolectomy with making a single-anus, 90 (40.1%) with rectosigmoid cancer – Hartmann operation, 32 (13.4%) with rectal cancer –inside abdominal resection of rectal tumor with making sigma single-barrel stoma.

3-4 month later, 62 (27,6%) patients of 224(total) was performed reconstruction of continuity of the colon .There was no death. 3 patient had festering, 4 patients- anastomosis suture failure . Anastomoses were immersed in the retroperitoneal space and drained. The formed colonic fistulas closed after 2 weeks.

Conclusions. When colorectal cancer complicates by intestinal obstruction, it is reasonable to perform this operation in two steps: 1. Tumor removal with the formation of a single-anus. 2. Reconstruction of continuity of the colon should be performed in 2-3 months after the first operation.

RESULTS OF EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY IN CHILDREN

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Introduction. The upper urinary tract stone disease in children is rare in comparison to adults but is still challenging. Children may comprise up to 17% of patients with urinary stones in endemic countries. Since its introduction for pediatric urinary stone disease in 1986 the extracorporeal shock wave lithotripsy (ESWL) has become the primary treatment of choice in children with upper urinary system stones due to its low complication and high success rates. Despite the fact that ESWL is a relatively noninvasive, effective and safe procedure for children the complications and rehospitalizations may take place and parents should be informed about the potential risks. Therefore the purpose of this study was to assess the effectiveness of ESWL in children for the last 10 years.

Materials and Methods. A total of 86 boys and 66 girls 5 years to 16 years old (mean 6.1 years) were treated with low energy ESWL using the Lithostar lithotripter between January 2010 and December 2014 years. The 52 (34,2%) of patients were 5 to 10 years and 100 (65,8%) were older than 10 years. Radiological evaluation included excretory urography and urinary system ultrasound to define the stone burden and locate the stone. Of the stones 18 were ureteral and 110 were in the kidney. Children with a known UTI received culture specific antibiotics before ESWL and prophylactic antibiotics from the day before to 3 days after ESWL.

Results. A total of 152 children with urinary stones were treated. Five children underwent only 1 session of ESWL, after which they were lost to followup and not analyzed further. Overall success rate was 82,2% (125 of 152 patients) at postoperative month. However, overall stone-free rate was 73,9% (98 patients). A total of 38 children (25%) had residual stones after ESWL, of which 24 (19,5%) were 4 mm or smaller and 8 (6,9%) were larger than 4 mm. The success rate for ureteral stones was 75% (12 of 16 stones) and for kidney stones was 96, 2% (103 of 107). A total of 24 patients (15, 7%) had complications of ESWL during postoperative week 1 but only 19 (15,4%, 12 boys and 7 girls) were rehospitalized at that time. Of 5 children (22,7%) with steinstrasse complications 3 were identified only at regular office visits with no symptoms. General complaints were nausea/vomiting/intolerance of oral intake (14 children, 63.6%), pain in treated side/renal colic (7, 31,8%), gross hematuria (12, 54,5%) and fever (3, 13,6%).

Three children with fever and 16 with inadequate oral intake and/or pain were rehospitalized. Patients were treated with intravenous hydration, antiemetics, analgesics and antibiotics (in case of fever) until they were pain-free and able to tolerate oral intake. During followup 3 patients with complications required ancillary procedures (percutaneous nephrolithotripsy in 1, ureterolithotomy in 1 and ureteroscopic lithotripsy in 1), compared to 5 in the uncomplicated group (percutaneous nephrolithotripsy in 2 and ureteroscopic lithotripsy in 3). Only 1 steinstrasse complication required ureteroscopic intervention.

Conclusions. ESWL in children with upper urinary tract stones smaller than 25 mm seems effective and safe even when an ungated technique is used. Although the rehospitalization rate following ESWL is low (15%), parents should be warned about this possibility and the higher rate of ancillary procedures required, particularly in children with a known metabolic risk factor.

RESULTS OF ENDOLYMPHATIC CHEMOTHERAPY WITH LYMPHOSORPTION AND LYMPH REINFUSION IN CASES OF UNRESECTABLE GASTRIC CANCER

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Objective. To improve the results of unresectable gastric cancer treatment, by using endolymphatic chemotherapy, lymphosorption, and lymph reinfusion.

Materials and Methods. Research includes the results of treatment of 32 patients with advanced forms of gastric cancer. All patients underwent retrograde endolymphatic chemotherapy with lymphosorption and reinfusion. The stage of process generalization was evaluated according to complex laboratory findings and intraoperative visual inspection. Control group included 30 patients with IV stage gastric cancer, who got intravenous chemotherapy 5-fluouracil 500mg. Lymph should be collected in sterile conditions during 1,5-2 hours, since if it is taken during a longer period most of the lymph elements would be wasted. Due to preliminary stimulation and haparinization of thoracic duct for this time period can be collected 300-450 ml of lymph. Extracorporeal detoxication of lymph was performed by fractioning with use special sorbents. After lymphosorption, 1 gr of Leakadin was added to purified lymph and then it was reinfused intravenously. During the reinfusion lymph was exposed to ultra violet rays (UVO). All these manipulation from col-

lection of lymph to the end of reinfusion took maximum 3 hours. This process was performed every day or every other day, total – 4-6 times. After lymph collection patients underwent retrograde endolymphatic chemotherapy 5-fluouracil 1 gr.

Results. Before treatment the level of CM- peptides in patients was quite high and varied from 0,75 up to 0,95 units, after complex therapy in main group it was decreased to the upper limit of normal, indicating that lymph was detoxicated and became suitable for reinfusion, however level of CM-peptides I control group remained high. Partial clinical effect in main group was observed in 49% of cases, in control group only in 26,6%. Process stabilized in 39% and 31% correspondingly. Progression in main group was observed in 12% of patients and in control group in 42,2%.

Conclusion. Method of retrograde endolymphatic chemotherapy apart from the main focus of the process has high efficiency in cases of liver and retroperitoneal metastases. Method of lymph detoxication with immunostimulator addition and UVR exposure maximally decreases the intensity of endogenous intoxication, stabilizes hematologic indexes and improves subjective feelings of patients.

SURGICAL TREATMENT OF TEMPORAL LOBE TUMORS

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Objective. To analyze the clinical features, diagnosis, surgical approaches, and outcomes in a retrospective review of temporal lobe tumors.

Materials And Methods. 54 patients with temporal lobe (TL) tumors were identified from the neurooncology and skull base department's surgery database and from the operations log register. Preoperative magnetic resonance imaging and/or computer tomography scans were available for all patients. All 54 temporal lobe tumors were of intraaxial origin.

Results. Fifty-four patients with intra-axial TL tumors (mean age, 41+-1.7 yr) were collected during a 2-year period. The largest tumor groups were anaplastic astrocytoma (46.3%) followed by glioblastoma (22.2%), and diffuse astrocytoma (12.9%). The most frequent tumor location was the Type III tumor (27.8%). Of all tumors, 70.4% were malignant. Larger tumor size was associated with higher frequency of malignant histopathological findings, also with worse patient's postoperative general health status. Chief complaint was seizure in 61,1% of patients. In 26 (48,1%) of these, epilepsy was drug-resistant and lasted in average for 9 months. Another 7 (12,9%) patients had occasional and treatable seizures. Preoperative focal deficits, including hemiparesis (n=25), dysphasia (n=9), hemianopia (n=5), and paresthesia (n=11), were quite often. Prominent cognitive impairment was seen in 12 (22,2%) patients, and another 11 (20,4%) patients reported impaired memory. Four patients with brain tumors had undergone surgery previously. Several surgical approaches were chosen: transsylvian in 12.9%, subtemporal in 9.3%, transcortical in 70.4%, via old resection cavity in 7.4%. The most frequent neurological complications were transient: hemiparesis (12.9%), and dysphasia (9.2%). Significant new hemianopic defects were found in another 2.9% of the patients.

Conclusion. Tumors located in mediobasal temporal region are most frequent. Malignant gliomas make up the largest portion of tumors comprising 70,4%, and the most frequent histological type is anaplastic astrocytoma (46.3%). Adequate surgical approach for large (>3cm) temporal lobe tumors is transcortical, and to-

tal resection more preferable than subtotal or partial. Patients postoperative health status according Karnofsky score is significantly better when tumor size is small, and worse when tumor is bigger.

ELECTRONIC EVALUATION SYSTEM OF MOTOR INNERVATION DISORDERS OF HAND

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Background. Injuries of upper extremity stand separately among all traumas of locomotor system because of leading role of hand in human's activity. According to various sources lesions of hands take 25- 60% out of all injuries and about 40% of all visits to clinics. Majority of injuries are associated with lesions of such functional important structures as tendons, vessels and nerves. Lesions of nerves lead to severe consequences and disability. Patient outcomes and their labor potential depend on proper diagnostics and treatment. That is why we have to create a comfortable evaluation system of motor innervation disorders of hand based on clinical tests to make more informative diagnostics. The main concept is that one nerve innervates a couple of muscles.

Aim. To create a comfortable and easily used electronic evaluation system of motor innervation disorders of hand based on clinical tests.

Objectives. 1. To research anatomic and clinical aspects of hand's innervation.

2. To interpret and to estimate results of clinical tests of hand.

3. To create a system to evaluate motor innervation.

Methods. Specific literature and clinical tests were analyzed and to evaluate function of muscles chosen. All tests were divided in 3 groups: the first group – functional evaluation of muscle condition innervated by branches of median nerve, the second group - functional evaluation of muscle condition innervated by branches of radial nerve and the third group - functional evaluation of muscle condition innervated by branches of ulnar nerve. The results were interpreted qualitatively and were scored, where 1 point means «correct execution of exercise» and 0 points means «incorrect execution of exercise ». We put all data in the table and then we made the conclusion about functional condition of 3 nerves.

Results. 1. Anatomic and clinical aspects of hand's innervation were investigated, the muscles were separated in 3 groups depending on innervation.

2. Special test for evaluation of muscle activity were distinguished, rating system of results was created.

3. Electronic evaluation system of motor innervation disorders of hand was created.

Conclusion. As a result, electronic evaluation system of motor innervation disorders of hand was created. This system can be used in different hospitals and private clinics to diagnose disorders of peripheral nerves of upper limb.

OUR EXPERIENCE IN SURGICAL TREATMENT OF PATIENTS WITH OCCLUSION OF THE INTERNAL CAROTID ARTERY

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Objective. The study results of surgical treatment in patients with occlusion of

the internal carotid artery (ICA) and to determine effects in surgical rehabilitation .

Material and methods. Analyzed diagnosis and treatment methods in 42 patients with ICA occlusion who were hospitalized in angioneurological department in II clinical of TMA from 2013 to 2014 . 30 (71.4%) patients were male. The average age was $53,6 \pm 5,9$ years. 7(16,7%) – patients with CHCVI III degree and In 35 (83.3%) patients was observed CHCVI, IV stage All the patients studied neurological status before and after treatment . For quantify neurological deficit and in dynamics we used the scale Hachinsky (1985). 27 (64.3%) patients was performed resection and banding of the internal carotid artery(ICA) , endarterectomy from the external carotid artery (ECA) with putting patch ; 3 (7.1% patients - revision of the ICA , resection and ligation of the internal carotid artery ; 9 (21.4%) cases - a classic carotid endarterectomy; 1 (2.4%) patient - resection ICA redressation and reimplantation into the old mouth; 1 (2.4%) patient with putting alloprosthesis – to common and external carotid artery in 1 (2.4%) case - endarterectomy of the internal carotid artery , subclavicular and internal carotid bypass. Surgical treatment were performed 6 to 24 hours after onset of clinical signs of ischemic stroke - in 2 patients; from 1 day to 30 days - 4 patients; 1 to 6 months - from 6; from 6 to 12 months - have 7; from 1 year to 5 years - at 14 and more than 5 years - 2 patients.

Results. The analysis of treatment results showed that 39 (92.9%) patients had a smooth postoperative course. In 2 (4.7%) patients developed recurrent acute cerebra vascular insufficiency (CVI), they held conservative therapy, in the dynamics of the regress of neurological symptoms; in 1 (2.4%) patients developed bleeding from the surgical wound, in that case the patient urgently was performed stop bleeding and resection anastomosis of the carotid arteries, with common and external carotid prosthesis. In long term period 13 (30.9%) patients had significant regression of neurological deficit. In 14 (33.3%) patients showed improvement in neurological symptoms. Unfortunately in the late period 2 (4.7%) patients suffered recurrent stroke. After surgery operation V max of STA has increased from an average of $1,6 \pm 0,6$ to $2,8 \pm 0,3$ ($p < 0,05$), but in the STRA - with $1,1 \pm 0,4$ to $1,8 \pm 0,6$ ($p > 0,05$). The direction of blood flow in the STRA has changed in to retrograde flow ("from the sensor").

Conclusions. Reconstruction ECA if it is impossible to restore the blood flow in the occluded ICA predict to prevent subsequent re-stroke, but also has a significant therapeutic effect in terms of surgical rehabilitation of patients with cerebra vascular disorders. The best results are achieved surgery in patients with a high degree of stenosis in the ECA. Results of operations are directly dependent on the degree of stenosis in the ECA, at the time elapsed after an ischemic stroke, the initial degree of neurological deficits.

COMPARATIVE ANALYSIS OF THE RESULTS OF SURGICAL TREATMENT OF PATIENTS CYST SPLEEN

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In the majority of cases treatment of choice for hydatid cyst of the spleen is splenectomy (Kulikov L. et al., 2012), while taking into account the young age of the patients, splenectomy can not be considered the best method. Laparoscopic intervention in the spleen are often accompanied by intraoperative complications, leading to the forced splenectomy (Timerbulatov MV et al., 2010). There are reports of benign transdermal therapies spleen cysts under ultrasound and X-rays, however, remains

high relapse rate after these interventions (Yoshikava H., et al, 2006). In this regard, you can not develop a specific pathogenetic reasonable treatment strategy splenic cyst using minimally invasive techniques.

Objective. To improve the results of surgical treatment of patients with splenic echinococcosis by the comparative analysis of results of surgical treatment.

Material and Methods. During the period from 2012 to 2015 in two clinical TMA in 24 patients revealed cyst spleen. Of those isolated cyst in the spleen was observed in 16 patients. In 4 cases, combined with spleen echinococcus echinococcus of the liver, spleen and lung hydatid disease - 2 cases of abdominal cavity - in 2 cases.

The age of patients ranged from 15 to $64 \pm 0,8$ years. Among them were 17 women (66%) men-7 (34%).

All patients were examined by standard for diagnosis, all patients to the operating period produced abdominal ultrasound and MSCT of the abdomen.

With the localization of hydatid cysts in the spleen and in the liver or the abdominal cavity, as well as in cases of recurrent abdominal organs echinococcosis preference for open surgery. In other cases, minimally invasive interventions were undertaken.

All patients were performed surgery under endotracheal anesthesia with muscle relaxation. Laparoscopic intervention in echinococcosis spleen were performed with 3 trocars. The stages of its implementation procedures identical to those described echinococcectomy laparoscopic liver. Position of the patient on the operating table depended on the region of the cyst. So, if the cyst was located lower pole, preference was given to the situation of the patient at the back. In other cases, the lateral position is used.

Results. Thus, of the 24 patients, 16 cases of laparoscopic method. Of these, in 13 cases performed echinococcectomy spleen. In the remaining three cases, laparoscopic splenectomy because of the location of the cysts in the gate area of the spleen - in one case, because of the bleeding from the parenchyma of the spleen - in 1 case. In the last observation carried further conversion. In 8 cases performed open echinococcectomy. Of those, 2 cases splenectomy due to bleeding from the splenic parenchyma. In 6 cases performed echinococcectomy spleen.

Postoperative complications after laparoscopic surgery is not indicated. The postoperative course was smooth. The average hospital stay was $4,3 \pm 1,2$ days. After open surgery drainage tube removed 3 hours, with an average bed day was $7,9 \pm 1,6$ days. All patients received postoperative course of antiparasitic therapy. Echinococcus recurrence after minimally invasive surgery, we have not seen. In 2 cases after open surgery revealed a relapse of hydatid cysts. Thus, the use of minimally invasive techniques in the treatment of Echinococcus spleen significantly reduces the trauma of surgery, reduces the time of rehabilitation of patients.

ANTIBIOTIC PROPHYLAXIS IN ELECTIVE ABDOMINAL SURGERY

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Abstract. At the present stage of development of surgery the prevention of postoperative purulent complications is remaining to be an urgent problem. Our and foreign experience, based on a large clinical material shows that the level of postoperative septic complications in elective abdominal surgery does not tend to decrease and amounts to an average of 6.0-8.0%.

Objective. The aim of research was to study of efficacy of antibiotic prophylaxis (ABP) for prevention of inflammatory complications in the postoperative period

and reducing the cost and duration of hospital stay.

Material and methods. The material of the study were 24 patients hospitalized for elective surgery the abdominal surgery department from 2014 to 2015 on the basis of 2nd clinic of TMA. Patients were 46±1,5 years-old. Among them there were 10 men and 14 women. Surgeries performed in patients: laparoscopic or open cholecystectomy, hernia repair. Used antibiotics during the study period were: ampicillin/sulbactam (50%), ceftriaxone (29%), cefazolin (21%). Evaluation of the ABP carried out in accordance with the following criteria: the level of white blood cells in peripheral blood, the reaction temperature, the nature of the wound and so on. Regarding the scheme ABP, we adhere to the following: ultrashort-single preoperative administration of antibiotics; short - preoperative and intraoperative ABP; prolonged-perioperative ABP (before, during and after surgery (within 24 hours)). Doses of antibiotics were as follows 1.5-2 g per 30-60 minutes before the operation and one or two additional doses of 2 g, if necessary in the day (during intraoperative operation duration of two periods of a half-life of an antibiotic).

Results. Thus, ultrashort course of antibiotic prophylaxis was effective in almost all clean operations (I degree). When clean-contaminated operations (II degree) short circuit ABP was effective in 77%. The best results in this group of surgical interventions showed ABP with sulbactam/ampicillin. In the group of semi-dirty (III degree) continuous operations ABP was effective in 70.9%. In this group ampicillin/sulbactam and cefepime have worked well in the above dosages. When the IV degree of purity operations (dirty operations) ABP must be mandatory and with the transition to antibiotic therapy, as background very active infection. In these cases, ABP significantly reduces the terms of use of antibacterial drugs in the postoperative hospital stay (comparing with historical data where ABP was not carried out).

Conclusion. According to clinical and laboratory data the results after ampicillin/sulbactam were much better than cephalosporins. Probably it is due to the fact that postoperative septic complications are often caused by gram-negative microorganisms and anaerobes and ampicillin/sulbactam has been proved as a better antibiotic in this cases.

PREREQUISITES FOR HETEROTOPIC OVARIAN AUTOTRANSPLANTATION

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Background. Fertility after cancer cure young patients in recent years has become more urgent due to the fact that the patients themselves began to assert its desire to become a mother again after the restoration of the endocrine and reproductive functions. Clinically it is manifested syndrome of premature ovarian failure, infertility. The applied technology is now delayed autologous transplantation fragments cryopreserved ovarian cortical substance proved to be ineffective due to ischemia and subsequent loss of ovarian tissue. Further prospects of technology delayed the implementation of the reproductive function of women after treatment of cancers, scientists of the Institute of microsurgery (Tomsk) is associated with the whole of heterotopic autotransplantation of cryopreserved ovarian microvascular anastomosis.

Aim. Search recipient zone and morphometric parameters of the definition of vessels for ovarian autotransplantation.

Objectives. 1) the recipient list based on the local zone thermometry; 2) determi-

nation of morphometric parameters of elements of the pedicle of the ovaries;3) determination of morphometric parameters of the vessels recipient-zone.

Methods. 1) The study involved 58 volunteers aged 18 to 32 years old. During for 30 days the girl was measured armpit, elbow, groin, and basal temperature, the area which can be a potential recipient areas. The measurements were carried out using 4 thermometers firm "Amrus Enterprises BAT" (USA) for each area every day at 7:00 am. These data were presented in the form of graphs of temperature and analyzed based on established norms basal temperature fluctuation depending on the phase of the menstrual cycle. An additional criterion for evaluating the performance of thermometry served as basal body temperature changes on the first day of the menstrual cycle, one day before ovulation and three days before the start of the menstrual cycle. Thermometry results were processed using the program «Statistica 6.0», counted U-test Mann - Whitney to assess differences between the samples.

2) The autopsy of 25 women of childbearing age (organ complexes: uterus, appendages, vessels) was withdrawn under the Provincial GOOSE "Krasnoyarsk Regional Bureau of Forensic Medicine" Oguz "Bureau of forensics," the Tomsk region. Dissection vessels: ovarian artery and vein deep in the funnel pelvic ligaments, ovarian branches of the uterine vessels in their own ovarian ligament.

Results. 1) The optimal recipient area heterotopic ovarian autotransplantation "thawed ovary" is the groin (the front wall of the inguinal canal).2) The diameter of the ovarian vessels inside funnel pelvic ligaments: ovarian a.- 0.5mm, ovarian v.-3.0 mm.3) The diameter of the recipient vessel inguinal-iliac region: A.epigastrica inferior (ramus superficialis) -1.5mm, v. epigastrica inferior (ramus superficialis) -2.8 mm, a.epigastrica inferior (ramus profundus) -3.4 mm, v.epigastrica inferior (ramus profundus) -4.0 mm, A.circumflexa ilium superficialis- 1.35 mm, v.circumflexa ilium superficialis- 2.25 mm.4) According to the "index matching" graft revascularization (ovary) is possible by performing anastomosis end-to-side.

Conclusion.The results indicate that the optimal recipient area heterotopic ovarian autotransplantation is the groin area, where the temperature of the skin is the most close to the temperature in the abdominal cavity, which is anatomically and physiologically predetermined for oocyte maturation, and the vessels in this area are optimal for heterotopic ovarian autotransplantation by performing anastomosis end-to-side.

TREATMENT MODELITIES FOR PATIENTS WITH BILATERAL URETERAL STONES

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Purpose. Urolithiasis is the most common pathology of the urinary tract in Uzbekistan. Stones can be located in any part of the urinary tract. When placing the stones in the ureter obstruction can cause ureterohydronephrosis, urinary tract infections and shrinking of the renal parenchyma. In 2-6% of cases, stones can be located in both ureters. This condition can cause acute kidney failure. Therefore it is necessary in the short period to relieve the patient from the stones. The use of traditional methods for this operation lead to the undesired complications: scarring of the skin and the ureter, festering wounds. Therefore, in the last decades widely used

non-invasive methods of removing stones: extracorporeal shock wave lithotripsy or contact ureterolithotripsy.

Materials and Methods. During the period from January 2006 to December 2014 were examined and treated 98 patients with ureteral stones in both sides. The average age of patients was 45.6 ± 8.9 years, of which 62 (63.3%) were men and 36 (36.7%) women. The average size of stones was 1.6 ± 0.9 cm. Renal insufficiency (creatinine parameters in serum averaged 0.2 ± 0.1 mmol /l) was detected in 12 (12.2%) patients. Ureterohydronephrosis was detected in all patients, in 87 cases (88.7%) the thickness of the renal parenchyma was less than normal (< 1.5 cm). Intravenous urography performed only in patients whose serum creatinine levels were normal.

Results. All patients underwent transurethral ureteroscopic lithotripsy using 8-10 Fr rigid ureteroscope (Karl Storz). Simultaneous (in one session) removal of ureteral stones was performed in 78 (79.6%) patients, in case of lack of complications (bleeding or ureteral perforation). In other cases (10 patients) removal of stones had taken separately, in two sessions. The reason for this situation in two cases was significant bleeding from the wall of the ureter, in three cases of perforation of the wall of the ureter and in 5 cases the duration of the operation (lithotripsy one side) was more than 60 minutes.

Conclusions. In the presence of ureteral stones on both sides and above the normal level of creatinine should be performed decompression of the upper urinary tract. Surgery to remove the stones should be taken after the normalization of these indicators. In those cases where ureterolithotripsy performed with one hand it is not accompanied by complications and takes a short period of time it is advisable to attempt to remove the stone from the ureter to the opposite side. This reduces the length of the rehabilitation period, and cost-effective for the patient.

THE ROLE OF POSTOPERATIVE IMMUNOTHERAPY IN RENAL CANCER

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Introduction. Annually worldwide detected 198 thousand patients with renal cell cancer (RCC). The urgency of the surgical treatment of RCC is not in doubt. However, even after surgical treatment in 40-50% of patients with RCC metastases appear, with 80% of patients they occur during the first year after surgery. To date, the most appropriate approach in the treatment of RCC is a combination of surgical technique with adjuvant immunotherapy.

The purpose of research - the study of the effectiveness of adjuvant immunotherapy for RCC.

Materials and methods. The study included 40 patients who were examined and treated in the Cancer Research Center in the period from 2006 to 2010 on the RCC. The age of patients ranged from 18 to 73 years. Of these, there were 26 men and 14 women. The average age of the patients at the time of inclusion in the study was $59,3 \pm 2,83$ years. All patients post surgery used "Interferon-a" 10 million. IU, 4-course. Immunotherapy started 10-15 days after surgery.

Results and discussion. All patients were followed in the period from 1 month

to 3 years postoperatively. One patient died, the cause of death - pulmonary embolism. In 1 patient after 1 year of a relapse of the disease, the patient was operated again. Another patient at 1 year revealed a solitary metastasis in the contralateral kidney and the left lung - disease progression. In the remaining patients to date evidence to suggest recurrence, metastasis and progression of the disease, no.

Conclusions. Advanced operations in a specialized institution is accompanied by a decrease in the number of complications and satisfactory immediate results. Conducting adjuvant immunotherapy reduces the risk of progression of RCC.

TREATMENT OF PATIENTS WITH BENIGN PROSTATIC HYPERPLASIA CONCURRENT WITH URINARY BLADDER DIVERTICULA

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Introduction. Benign prostatic hyperplasia (BPH) is the cause of bladder outlet obstruction in 86% of men over the age of 50. More than half of these patients require surgical treatment. Over the past 10 years the treatment of choice (the gold standard) in the treatment of men with BPH is transurethral resection of the prostate. However, approximately in 20% of cases BPH may lead to the formation of false bladder diverticulum of different sizes. In such cases there are two main alternatives to be made: to perform the traditional removal of prostate adenoma and simultaneous excision of bladder diverticulum, or minimally invasive surgery.

That is why the purpose of the present study was to assess the difference between invasive and noninvasive treatment modalities of benign prostatic hyperplasia concurrent with urinary bladder diverticula.

Materials and methods. During the period from January 2012 to November 2013 and carried out a survey conducted treatment (transurethral resection of benign prostatic hyperplasia), 56 patients with an accident in the presence of bladder diverticula. According ultrasonography and cystogram diverticulum (48%) were located on the side wall of the bladder, 8 (%) of the patients on the rear wall. According to the analysis of urine all the men found a significant pyuria and urinary tract infection. identified according to its bacteriological examination. The average volume of urine glucose syrup was $3,4 \pm 0,3$ ml / s.

Results. The average volume of the prostate transrectal sonography according amounted to $56,5 \pm 9,7$ ml³, 34 (%) cases revealed hyperplasia of the middle lobe. The duration of surgery was $68,6 \pm 12,6$ min, intraoperative blood loss was an average of $206 \pm 13,8$ ml. In any case, there were no complications associated with resection of the prostate. After surgery, worsening urinary tract infections (acute pyelonephritis) was 8 (%) cases. Increased antibiotic therapy helped arrest the acute process. After removal of the urethral catheter all the patients urinated in a satisfactory flow. The median syrup urine volume was $13,4 \pm 0,5$ ml/s. Conventional intervention to remove the bladder diverticulum is not required in any case. The average length of hospital stay was $4,4 \pm 1,1$ days.

Conclusion. If you have an accident in conjunction with urinary bladder divertic-

ula method of choice is transurethral resection of the prostate, a gland in the amount not exceeding 60 ml³. The use of minimally invasive techniques in the treatment of this category of patients is safe and reduces the rehabilitation period. The presence of diverticula of the bladder after removal of bladder outlet obstruction does not prevent the recovery of a satisfactory flow of urine.

MODERN METHODS OF THE DIAGNOSTICS AND THE MANAGEMENT OF ANTERIOR KNEE PAIN

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Background. Patellofemoral pain syndrome is one of the most common problems that can be occurred in ortopedic practice. The most important point of this problem is that it can be caused by multiple factors. Therefore in major cases it is difficult to diagnose this condition.

Purpose. To identify the sites and intensity of pain in patients with patellofemoral pain syndrome. To develop the methods of early diagnosis and treatment of this condition.

Materials and methods. The prospective study was conducted at the Orthopedic department of the 2nd clinic of TMA. All patients met inclusion criteria and were enrolled and evaluated during the study time frame. A single sports medicine orthopaedic surgeon examined a consecutive sample of patients with patellofemoral pain not explained by one of several well-defined anterior knee pain diagnoses.

The study group consisted of 100 patients (75 females, 25 males) with median age of 14 years. Eleven discrete locations were palpated for tenderness. Hamstring tightness was evaluated by measuring the popliteal angle. Patients reported intensity of pain using a 0-to 9-point ordinal scale. Regression and nonparametric statistical methods were used.

Results. The most common site of pain was the patella during anterior-posterior compression (90 patients), followed by the distal pole of the patella, the medial plica, and the nonarticular medial femoral condyle. Median “worst pain” intensity was 6 out of a possible 9. The most common site of “worst pain” was also the patella in compression (63 patients). Median duration of symptoms was 10 months, with an interquartile range of 3 to 20 months. Pain intensity was inversely correlated with duration of symptoms (P, 0.01).

Conclusions. In these patients with patellofemoral pain syndrome, the major source of pain was the patella subchondral bone.

EVALUATION AND COMPARISON OF POSTOPERATIVE LEVELS OF LIVER FUNCTION TESTS IN OBESE PATIENTS VERSUS NORMAL PATIENTS AFTER OPEN ABDOMINAL SURGERY

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Purpose and Objectives. The aim of this study was estimate associations between postoperative levels of liver function tests and obesity indices in normal and

obese patients.

Material and methods: 20 postoperative patients were divided into two groups: (A) of obese patients (BMI > 25) (n=10) and (B) of normal patients (BMI < 25) (N=10). Body mass index (BMI), waist circumference (WC), body adiposity index (BAI), LFTs (ALT, AST, GGT, ALP, Bilirubin, INR) and CRP were estimated. A total of 20 patients were analyzed by examining the LFTs the day before, the 1, 3, 5 day after the surgery.

Results and discussions: Alterations in the LFTs (ALT, AST, GGT, ALP, Bilirubin, INR) and CRP were seen on the 1, 3, 5 postoperative day in obese patients. Minor changes in the LFTs (ALT, AST, GGT, ALP, Bilirubin, INR) and CRP were seen in normal patients.

Conclusions. Our findings suggest that an elevated liver enzymes level may be an independent predictor of postoperative liver dysfunction in obese patients.

SURGICAL TREATMENT OF LUNG METASTASES OF COLORECTAL CARCINOMA

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Purpose. Evaluate the effectiveness of choice of surgical treatment of metastatic lung lesions in colorectal carcinoma.

Materials and methods. In this paper, we retrospectively evaluated 50 patients who had undergone surgical treatment to establish the diagnosis of colorectal carcinoma lung metastases at the Republican Cancer Scientific Center.

Results and discussions. Altogether, 27 men and 23 women were operated (average age: 62 and 61 years). 52% of patients had solitary metastasis. We chose thoracotomy as a surgical access for majority of the surgeries (76%), and the most common type of surgical procedure was a wedge resection (74%). 3-year survival of patients after complete metastasectomy was 55.5%, and 5-year survival was 31.8% with a median survival of 42 months. We did not record any statistically significant influence of number of metastases ($p=0.3297$) and length of disease-free interval ($p=0.4423$) on the long-term survival, but we confirmed a significant difference of survival in different prognostic groups according to the International registry of lung metastases ($p=0.049$).

Conclusion. A surgical removal of colorectal carcinoma lung metastases in selected patients is an important curative modality that might prolong survival, improve the prognosis and at the same time have minimum complications. The results show that the strongest predictive indicator of prognosis is incorporation of the patients to the prognostic groups determined by the Republic registry of lung metastases.

CLINICO-FUNCTIONAL SUBSTANTIATION OF APPLICATION OF PHOTODYNAMIC THERAPY IN PATIENTS WITH CHONDROPERICHONDritis OF LARYNX

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Despite improvements in diagnostic methods, development of endoscopic techniques, wide application of modern antibacterial agents based on flora, sensitivity to antibiotics and some achievements larynx-tracheal surgery, treatment of problem the chondroperichondritis of larynx remains relevant. The progress of laser medicine has

led to the emergence of fundamentally new benefits effects on biological objects associated with the interaction of a focused laser beam, and a new class of pharmacological agents - photosensitizers. The positive results of the treatment of inflammatory diseases by photodynamic therapy show the high efficiency of this method.

Purpose of the study. Improving the efficiency of the treatment by applying the chondroperichondritis of larynx photodynamic therapy. The objectives of the study to explore the possibility of photodynamic therapy with various forms of chondroperichondritis of larynx.

Material and methods. The study is conducted on the basis of the ENT department II and III of the clinic of the Tashkent Medical Academy. It planned to survey 50 patient with chondroperichondritis of larynx; of these 40 patients are the first group that receive the standard treatment. In the second main group include 10 patients with whom traditional treatment is carried out and photodynamic therapy.

All patients with chronic chondroperichondritis of larynx is a comprehensive examination including: medical history; ENT examination; indirect laryngoscopy; endoscopic investigations; bacteriological research; X-rays; computer tomography and MRI.

Thus, the use of photodynamic therapy in patients with chondroperichondritis of larynx in the combined treatment using an apparatus with a laser radiation ALT "VOSTOK-03" and 0.05% solution of the photosensitizer methylene blue, allows a short time to reduce scarring laryngeal processes, reduces the portion of stenosis of the larynx in a shorter time as compared with conventional treatments.

ENDOSCOPIC PAPILOSPHINCTEROTOMY AT MECHANICAL JAUNDICE

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Purpose of the research: to study of the results of the performed endoscopic papillosphincterotomy at mechanical jaundice

Materials and methods. Clinic has its experience performing of EPST in 201 patients. The men were 54 (31.8%), women - 147 (78.2%). The patients were divided by age as follows: 10 (5.0%) patients were under 30 years old, 5 (2.5%) patients were aged 31-40 years old, 19 (9.4%) patients - 41-50 years old, 40 (19.9%) patients - 51-60 years old, 47 (23.4%) patients - 61-70 years old, 55 (27.4%) patients - 71-80 years old and 25 (12.4%) patients were older than 80 years old. In most patients, severity of the condition was aggravated by the presence of concomitant diseases: hypertension, coronary heart disease, chronic heart failure, myocardial infarction, peptic ulcer of duodenal ulcer, diabetes, and others. Preparing patients to ERPCG includes conventional spasmolytic and detoxication therapy. Immediately before the research premedication has been conducted with the atropine, promedol, seduxenum, suprastin or diphenhydramine. After filling the duct system and gallbladder with contrast substance from 1 to 3 X-ray images is performed. After the X-ray ducts rinsed with 0.5% solution of novocaine. According to indications, in lumen of the common bile duct antibiotic solution was introduced.

Results and discussion. The diagnosis after endoscopic retrograde cholangiopancreatography was set on the basis of endoscopic signs of the disease, the results of Major Duodenal papilla cannulation and catheter movement by bile ducts, the nature of dissemination of the contrast through the bile ducts on the monitor and x-ray data. According ERPCG diameter of choledoch in 26 (13.0%) patients was less than

6 mm, in 51 (25.5%) patients was from 7 to 10 mm, in 69 (35.5%) patients - 11-15 mm, in 42 (21.0%) patients - 16-20 mm, in 8 (4.0%) patients was 21-25 mm and in 4 (2.0%) patients amounted as 25-30 mm.

After EPST in 11 (5.5%) patients cause of jaundice had not been established. Endoscopic papillosphincterotomy was performed by both the methods with cannulation and without cannulation. The method without cannulation was often used at the location of the common bile duct orifice in parapapillar diverticulum or in the area of its edges. The length of papillotomy incision was in 108 (53.7%) patients until 10 mm, in 81 (40.3%) patients - 11-15 mm, and in 12 (6.0%) patients - 16-20 mm.

After EPST during endoscopic examination of the bile ducts concretions were extracted in nine patients, in 54 patients stones in ducts were not found. In 57 patients stones of the common bile duct were not extracted. In 46 of them attempt to the extraction of stones from the common bile duct was unsuccessful, and 11 patients the stones were initially left in the bile ducts in the hope of their self expectoration. The reasons for not allowing extraction of stones from the common bile duct during endoscopy were large size stones (48) and durable fixation of stones in the bile ducts (9).

Complications after EPST were observed in 30 (14.9%) patients. Bleeding from the papillotomy incision was occurred in 22 (10.9%), in 19 of them it was finally stopped during duodenoscopy and in 3 patients bleeding had been recurred after examination. Perforation of choledoch was tolerated in 5 (2.5%) patients. In the subsequent 45.3% of patients were operated. They were performed cholecystectomy, which in some patients combined with choledochotomy, removing stones from the choledoch, the application choledochoduodenoanastomosis and any method of the bile duct drainage. In 8 patients micro cholecystostomy was applied and 2 patients were operated on diagnosis of destructive pancreatitis.

Conclusion. Thus our experience in endoscopic papillosphincterotomy confirms its high therapeutic efficacy. In the presence of stones in the common bile duct ER-PCG must be completed with EPST and the extraction stones from the bile duct. It should be pointed, that it is possible to occur of serious complications during EPST, especially on atypical location of the common bile duct orifice. Performing EPST is possible in the presence of modern endoscopic equipment, adequate anesthetic management and highly qualified endoscopists.

ENDOSCOPIC APPENDECTOMY-CHOICE OF TREATMENT IN PATIENTS WITH UNCOMPLICATED ACUTE FORM OF APPENDICITIS

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Actuality. Acute appendicitis is one of the most common diseases and ranked first among the acute surgical diseases of the abdominal cavity. Despite the fact that the diagnosis and treatment of this disease is well designed, the percentage of diagnostic errors and complications over the years remains high.

Purpose and objectives was to improve the treatment results of patients with uncomplicated acute form of appendicitis through the application of laparoscopy in the diagnosis of the disease, improve technical aspects and define indications for implementation of laparoscopic appendectomy.

Material and methods. The analysis of treatment results of 77 patients with acute

appendicitis, treated in the clinic 2 TMA emergency in the Department of surgery from 2012-2014 years. Patients (46 women and 31 men) were aged 15 to 62 years. All the patients were from destructive forms of appendicitis. Found the following appendix location options: in the right iliac Fossa-in 88% of cases, pelvic-9% and retrocecal-in 3%. The following appendix stump treatment options: 62 (80.5%) by overlaying clips and 15 (19.5%) by overlaying the endostepler stump vermiform process. from 2006 year in the clinic we use mainly overlay method tantalum processing clips stump vermiform process (62 cases).The average length of a laparoscopic intervention was 35 minutes, which is comparable to the traditional open appendectomy. After the removal process, conducted sanitation abdomen: in 6 cases (8%) (with diagnosis local peritonitis) was installed drainage in right ileum area 71 (92%)-abdominal cavity closed. Intraoperative complication (bleeding from the artery vermiform process) had a single patient, bleeding stopped electrocoagulation. In 3 cases, necessitated the conversion of endoscopic intervention in traditional appendectomy (with loose infiltrations and perforation with purulent). The average time of stay in the hospital after endoscopic intervention about OA amounted to 3 days.

Conclusion. Valid laparoscopic appendectomy is different the fewest complications, fast recovery of working capacity and a good cosmetic effect, the possibility of a full-fledged audit of the abdominal cavity and perform combined and simultaneous operations without an extension of surgical access.

ERRORS AND COMPLICATIONS IN PATIENTS WITH MULTIPLE AND COMBINED TRAUMA OF THE LONG BONES

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Target and objectives. The purpose of this study was to evaluate the outcome of treating patients with a combination of chest injuries in multiple and combined injuries of the musculoskeletal system.

Materials and Methods. We observed from 2014 to 2015 there were 27 patients with multiple and associated injuries of the musculoskeletal system with a combination of damage to the rib cage. Men - 20 (74.8%), women - 7 (25.2%). The age of patients ranged from 35 to 65 years. All patients after first aid in the waiting room, because of the severity of the condition were admitted to the surgical intensive care unit. For rapid assessment of the severity of condition and treatment strategies we used method of assessing the severity of TS, which includes anatomical injury, age and comorbidities of patients. The evaluation of the central nervous system produced by generally accepted Glasgow Coma Scale. Following this procedure the severity of the patients was evaluated by 7do 11 points. All patients came to the hospital in a state of traumatic shock.

Results. In the intensive care treatment period performed resuscitation including intubation, central vascular catheterization, etc. All the patients in conjunction with anesthesiologists, neurosurgeons, thoracic surgery and traumatology was given appropriate medical care. After hemodynamic stabilization, in addition to X-rays produced by MSCT skull, chest and damaged limbs. During the treatment, we face the following complications that affect the outcome of treatment: ARDS (adult respira-

tory distress syndrome), hemothorax, thrombosis and fat embolism. In the dynamics of controlled blood pressure, central venous pressure, the level of hemoglobin, oxygen saturation, the control chest X-ray. During the first 2 weeks, blood pressure was maintained vasopressor agents. All patients had a tendency to a decrease in hemoglobin due to bleeding in the chest cavity. 6 patients after thoracentesis thorax was produced retransfusion blood. For the treatment of ARDS permanently maintain the level of oxygen and to eliminate pulmonary edema used antibiotics and decongestants. Thrombosis and fat embolism treatment produced by the traditional method. Of the 22 patients, 9 patients in intensive care needed in the period from 15 to 32 days. 11 patients after transfer to the emergency room trauma, for further treatment of posttraumatic pneumonia and anemia were transferred to the therapy department, and that was the reason for expectant management to surgical treatment, in connection with which we have restricted plaster immobilization. 1 patient was celebrated fragmented fracture of the right humerus head with a traumatic separation vessels and brachial plexus. After hemodynamic stabilization in conjunction with the neurosurgeons and vascular surgeons performed autovenous plastic brachial artery. 1 patient had a fracture of the femur injury of the femoral artery, and for health reasons, after resuscitation, a day together with a vascular surgeon patient is taken to the operating table and out of the crushing of the femoral artery over a large and heavy condition, amputation bottom right limb at Verneuil thigh. 8 patients after treatment and to improve the general state of surgical treatment, and 7 patients, conducted conservative treatment because X-rays on the control state of bone fragments was satisfactory. Total mortality was - 7 (31.82%) patients, despite the ongoing intensive resuscitation. The cause of death was extremely serious condition at admission of patients with hemodynamic instability and complicated by ARDS, thrombotic and fat embolism, cardiovascular and respiratory failure.

Conclusion. Thus, despite the advances in modern medicine, the treatment of patients with multiple and associated injuries of the musculoskeletal system, still remains a topical issue in traumatology and orthopedics.

CLINICAL MORPHOLOGICAL ISSUES OF BREAST CANCER DIAGNOSTICS AND PROGNOSIS

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Background. Recently impressive treatment results of breast cancer patients have been being achieved. In clinical practice, the clinical classification and staging of process serve as main indicators of prognosis treatment strategy selection. None of the cancer locations has such a number of treatment options as breast cancer for instance Letyagin V.P. (2000) for the treatment of breast cancer in similar stage noted about 60,000 nuanced approaches to the treatment of breast cancer. We believe the main reason of this is that the classification is based on only the primary tumor size and does not take into account the volume of the organ affected by the tumor.

Materials and methods. The effect of T index on the forecast was examined and monitored in 47 patients with breast cancer T2N0M0. The tumor-to-breast volume ratio was also studied. Tumor volume was measured using ultrasound, mammogra-

phy and MRI studies. The volume of breast has been studied with manual (anatomical) method MRI study before the operation and the Archimedes procedure (after mastectomy).

Results. Average volume of the breast due to MRI was 410,4 cm³, manual method 420,4 cm³, Archimedes procedure 410,7 cm³. Patients depending on the tumor-to-breast volume ratio were divided into the following groups: I group (T2/1) included patients whose tumor-to-breast volume ratio was equal to 1/1 to 1/3, II group (T2/2)- 1/3 and 1/4, III group (T2/3)- more than 1/4. Progression of the disease were different depending on tumor-to-breast volume ratio: in I group-25 months, in II group – 31.5 months, in III group- 55.3 months. The overall five-year disease-free survival in the observation groups was 72.3%. In the group of patients with breast volume to 200 cm³ survival rate was 33.3% (approximately), in the group of 300 cm³ 57.1%, 400 cm³ of 75% to 66.7% cm³- 500, 600 cm³, 66.7%, and in patients where the volume of the mammary gland was 600 cm³ 94.1% total. We have traced the outcome after the full course of treatment. The 5-recurrence-free survival was 72.3% (34 patients). The survival of patients in the I group (T2/1) was 33.3% in the II group (T2/2) of 57.1%, the best results were when the tumor-to-breast volume ratio were more than (T3/3) 1/4 81,1 % (p=0,249). ($\chi^2=2,533$ rd degree of freedom p<0,05).

Conclusion. Thus, tumor-to-breast volume ratio has a statistically significant impact on the outcome of breast cancer. In order to obtain reliable data a study of a large sample of patients have to be carried out.

PRINCIPLES OF SURGICAL TREATMENT OF PATIENTS WITH CORONARY ARTERY DISEASE IN COMBINATION WITH ATHEROSCLEROTIC CAROTID ARTERIES

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Objective. Define the role and evaluate the effectiveness of surgical treatment in patients with coronary heart disease (CHD) combined with atherosclerotic lesions of carotid arteries.

Material and methods. The results of the study and surgical treatment of 45 patients with combined atherosclerotic lesions of coronary artery and carotid bed, were hospitalized in the 2nd Clinic of Tashkent Medical Academy with August 2015 by October 2015. Of these, 32 (71.1%) patients were male. The average age of patients was 58,2±3,3 years. In all patients, the cause of the lesion of the vessels was the atherosclerosis.

Results. One- or three-vessel lesion was detected in 23 (51.1%) patients. From this number, to 15 patients were performed stenting of coronary arteries, to 3 patients with recurrent transitory ischemic attack (TIA) and embologenic plaques on a background of cardiotropic therapy at the first stage were performed reconstructive interventions on carotid arterial beds. Multivessel atherosclerotic lesion was detected in 20 (43.3%) patients. Thereby, to 28 (62.2%) patients had been performed classic carotid endarterectomy (CEAE) with applying overlay patch, to 12 (26.6%) patients had been performed eversion carotid endarterectomy, to 2 (4.4%) patients were with plastic of external carotid artery. 2 (4.4%) patients abandoned

open interventions on the carotid arteries.

One patient were performed carotid angiography emerged transitor ischemic attack (TIA), we link the cause of that complication with presence of embologenic plaque in the internal carotid artery (ICA). In the early postoperative period in 2 (4.4%) occurred ischemic stroke. In 2 (4.4%) patients emerged hematoma at the after punctured area.

Conclusions. **1.** If there embologenic plaques of the carotid arteries and atherosclerotic lesion of coronary arteries, is not recommended selective carotid angiography, otherwise there is a high risk of ischemic stroke and TIA. **2.** If the patient with continued or repeated TIA, at the first stage is preferable to the reconstruction of the carotid arteries, then at the second stage is recommended to carry out interventions on the coronary arteries. **3.** When the prevalent lesion of carotid arteries and progressive angina pectoris, with stable plaques of the carotid arteries, the first step should be carried out coronary intervention, then, as soon as possible to make the carotid reconstructive surgery.

TREATMENT OF PATIENTS WITH COMBINED ATHEROSCLEROTIC LESIONS OF CAROTID AND CORONARY ARTERIES

Karimov R. A.

Tashkent medical academy

Aim. To define the role and assess the effectiveness of surgical treatment methods in patients with ischemic heart disease (IHD) in combination with atherosclerotic lesions of the carotid arteries.

Material and methods. Analyzed the results of examination and surgical treatment of 45 patients with combined lesions of coronary and carotid arteries, who was hospitalized in the 2nd clinic of Tashkent Medical Academy from August 2015 to October 2015. Of these, 32 (71,1%) were male. The average age of patients was $58,2 \pm 3.3$ years. In all patients the cause of the vascular lesions was atherosclerosis.

Results. One- or two-vessel lesion identified in 23 (51.1%) patients. Of these, 15 patients at the first stage performed stenting of coronary arteries (CA), 3 patients with recurrent transitory ischemic attack (TIA) and with embologenic plaques on the background of cardiotropic therapy carried out reconstructive operations on carotid arterial basin primarily. Multivessel atherosclerotic lesion was diagnosed in 20 (43,3%) patients. Thus, 28 (62,2%) patients was performed classical carotid endarterectomy (CEA) with overlay patch, 12 (26,6%) patients eversion carotid endarterectomy, 2 cases (4.4%) patients underwent plasty of external carotid arteries. 2 (4.4%) patients from 45 refused open surgery on carotid arteries.

In one patient with carotid angiography developed transitory ischemic attack (TIA). Presumably, the reason of such complications must be embologenic plaques in the internal carotid artery (ICA). In the immediate postoperative period in 2 patients (4,4%) developed Ischemic Stroke (IS). In 2 cases (4.4%) emerged hematoma of post-puncture area.

Conclusions. **1.** In the presence of embologenic plaques of the carotid arteries and lesions of coronary arteries not recommended selective carotid angiography, as this raises the risk of developing IS and TIA.

2. In patients with continuing or recurrent TIA the first stage it is preferable to carry out the reconstruction of the carotid basin, and then, the second stage must perform the intervention on the coronary arteries.

3. At a prevalence lesion of coronary arteries and progressive angina, stable plaques of the carotid arteries, primarily to carry out interventions on the coronary vessels, after, in the shortest possible time to produce carotid reconstructive surgery.

THE ROLE OF SILDENAFIL IN ENHANCEMENT OF SPERM PARAMETERS

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Introduction. The reproductive function of one of the most important human body. The normal functioning of reproductive organs depends on many factors: vascular, immune, neurogenic, endocrine, psychological, and even eating habits. Among the reasons for divorce infertility accounts for 7.5%. Approximately 70% of infertile marriages annulled, whereas in families with children divorce rate is only 8%. Noteworthy upward trend in the proportion of male factor is in a barren marriage. Over the past 20 years it has increased from 30% to 50% and continues to grow steadily. Another important factor influencing not only on demographics but also on the quality of life of the population is male erectile dysfunction. In recent years, there are many effective medication for the treatment of ED.

Materials and methods. The basis of the research results have made the examination and treatment of 20 patients with oligospermia applying to the "Republican Specialized Center of Urology" in the period from 2014 to 2015. The age of patients ranged from 25 to 45 years (mean age $35 \pm 7,8$ years). Depending on the purpose of the study, patients were divided into two treatment groups:

Group 1 - 10 patients who were performed sildinafil of 100mg daily for 3-month.

Group 2 - 10 patients who were performed a placebo therapy.

Results. In the first group who received sidinafil of 100mg per day starting the median beat 2 ml ejaculate volume, sperm count 18mln/ml, 50% motility, sperm morphology normal 40%. In the control study in this group after receiving sildinafil of 100mg daily for 3-month average, we get the following results: 3,5ml ejaculate volume, sperm count 30mln/ml, 55% motility, sperm morphology normal 41%.

In the second group (placebo group) the median beat 2,1 ml ejaculate volume, sperm count 20 mln/ml, 52% motility, sperm morphology normal 41%. In the control study in this placebo group after 3 months of waiting, we received the following average results: 2,2ml ejaculate volume, sperm count 21 mln/ml, 42% motility, sperm morphology normal 38%.

Conclusion. From the above results we can be concluded that sildinafil effect on ejaculate volume, sperm count, sperm motility. We also note that the reception sildinafil enhances sexual stimulation, which in turn leads to increased secretory function of the prostate. It is from this fact we can associate an increase in sperm motility, a qualitative improvement in mobility, increasing the percentage of morphologically normal spermatozoa.

PARTICULARITIES OF THE CURRENT OF THE POSTOPERATIVE PERIOD AFTER EMERGENCY AND PLANNED GYNECOLOGIES OPERATION

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Tardy discovery, inadequate conduct of the womans with tumor gonad, abdominal pregnancy pregnancy, apoplexy gonad and others pathology on background of the infections, brings about development of the breaches of the menstrual cycle, sterility, chronic pelvic pain, as well as soldering process in small basin and to malignant regeneration quite often.

In connection with than us is put(deliver)ed purpose to study the particularities of the current of the postoperative period after emergency and planned gynecological of the diseases. The Problem of our study is - an estimation to clinical efficiency of the well-timed diagnostics and treatments at gynecological disease.

The Ed groups: I group - 18 womans transmit gynecological operations in planned order, II group - 21 womans transmit gynecological operations in emergency order. In under investigation group prevailed the age of the womans 30 and senior and factors of the difference had not. In I group by evidence to operations has formed: abdominal pregnancy -22,2%, cyst of the gonad - 50%, cystoma of the gonad - 11% and apoplexy of the gonad - 16,7%. In II group abdominal pregnancy - 38%, cyst of the gonad - 33,3%, кистома gonad - 4,8% and apoplexy of the gonad-23,8% has formed. The Type operative interference laparoscopy - 72,2%, laparotomy - 27,8% in I group, and in II group laparotomy - 100%. In 1 day of the postoperative period of the women(woman) were found in branch of the reanimations, in the following were translated in branch of the gynecologies. The Women(woman)s transmid in planned operative treatment antibacterial therapy got 44,4% then, women(woman) transmid operative treatment in emergency order antibacterial therapy got 100% and 90,5% got multifunction antibacterial therapy.

They Were Drawn at the average on 3 day of the women(woman) operated in planned order, but operated1 in emergency order is drawn on 6 day at the average.

Thereby, well-timed diagnostics and planned therapy reduces the material costs on medication and stationary finding of the patient.

ENDOVASCULAR TREATMENT OF ACUTE PURULENT-DESTRUCTIVE DISEASES OF LUNGS DURING SEPSIS

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In recent years there has been increase number of patients with severe and complicated forms of acute purulent-inflammatory diseases of the lung. According to different authors the percentage of septic complications in chronic inflammatory diseases, ranging from 30% to 70%. Despite the different approaches to the treatment of sepsis, results of treatment can hardly be regarded as satisfactory. To create an effective drug concentration in the pathological focus are widely used methods of selective intra-ar-

terial administration, particularly long-term intra-catheter therapy – LTICT (Gostishchev V.K. Smolar V.A. Kharitonov Yu. Torakoabstsessostomiya in complex treatment of patients with pulmonary gangrene // Surgery. 2014. P. 54-57).

In this regard, the aim of our work was to improve the results of treatment of patients with purulent-inflammatory diseases of the lung through the development of pathogenetically substantiated scheme of long-term intra-catheter therapy (Zalesny S.A. Efferent therapy in patients with purulent-destructive lesions lungs. MD Krasnodar. 2008.- 109 p).

Long-term intra-catheter therapy against sepsis was performed in 60 (23.5%) patients with pneumonia, abscess, 39 (15.2%) patients with gangrene of light 74 (28.9%) with acute purulent and 83 (32.4 %) with gangrenous abscesses of lung.

In 79 cases (30.9%) LTICT combined with continuous intravenous catheter therapy. This therapy was aimed at correcting the pathogenetic mechanisms of progression of acute suppurative destructive diseases of lungs.

Treatment consisted of intra-arterial bolus injection of antibacterial drugs in the 2-3 combination. Thus cephalosporins and aminoglycosides administered intraarterially in the maximum shock doses on the first day, respectively, as bactericidal activity have been achieved when the concentration of the antibiotic in the blood is 2-4 times higher than the average therapeutic. In further antebakterialnaya therapy corrected depending on the data bakteriaogrammy. Today undoubted role non-clostridial anaerobic microorganisms in the development of pulmonary destruction, so we used intra metrinidazol to 3000 mg per day.

The new scheme introduction of basic and basic drugs, depending on the degree of failure of non-respiratory activity light (snNDL), namely: in the first stages LTICT introduction of drugs that improve the microcirculation, as without it introduced products do not reach the lesion and eliminated from the body, getting into the bloodstream through arteriolo-venular shunts. Then we introduced detoxification preparations for the evacuation of toxic metabolic products, toxins, microorganisms and excessive inflammatory mediators and connects bolus administration of antibacterial drugs. In the second phase (3-4 days) on the background of reduced microcirculation and saturation to achieve lung tissues to antibacterial drugs carried out by catheter therapy was connected SBSU (albumin alvezin et al.).

In conclusion, development and implementation of original methods of combined intravenous and intra-arterial NLD correcting violations, fighting infection and inflammation have allowed compared to the control group of patients, reduce the time of catheter therapy and accelerate the process of limiting purulent-destructive process from 12-14 to 4-7 days, increase frequency and complete clinical recovery of 15.6%, reduce the incidence of chronic 5.5% and mortality by 15.7%.

COMPARATIVE ANALYSIS OF LAPAROSCOPIC AND OPEN DISMEMBERED PYELOPLASTY. OUR INITIAL, SINGLE HOSPITAL EXPERIENCE

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Objective. Comparison of retrospective results of laparoscopic and open pyeloplasties for uretero-pelvic junction obstruction (UPJ) in initial 50 cases.

Materials and methods. We compare retrospectively 50 patients who undergone laparoscopic pyeloplasty with 50 open pyeloplasties in period from 2010 till 2015y.

Results. In comparative analysis of laparoscopic and open pyeloplasties we conclude that: mean operative time for laparoscopic and open was 163 min versus 103 (P<0.01), blood loss 31ml versus 132 ml (P<0.01), dosage of used analgesics (diclofenac) after procedure 75mg versus 300 mg (P<0.01), average length of incision 1.6 CM versus 17CM (P<0.01), shortening of hospital stay days 3 versus 8 days (P<0.01), early returning to normal feed state 22 hours versus 30 hours (P<0.01). Intraoperative complications in laparoscopic group has been 4,0 % (two patients has been needed for PCN in early postoperative days because of excessive urine leakage from paranephral drain tube) and 6% for open group. Failure results has been detected in those patients, when there are wasn't any significant improvement of UPJ obstruction and flank pain. At the 6-month follow-up evolution none of the laparoscopic group patients reported wound pain, however 29% (14patients) of the open group patients reported wound pain.

Conclusion. Effectiveness of laparoscopic pyeloplasty is same as open pyeloplasty, however with low degree postoperative morbidity and wound pain in 6-month of follow-up.

SONOGRAPHY AND MAMMOGRAPHY IN THE DIAGNOSIS OF FIBROCYSTIC BREAST DISEASE

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Actuality. One of the most common manifestations dishormonal disorders in women is fibrocystic breast disease. The incidence of this disease varies from 30 to 50% among of all incidence of breast pathology. Accurate and timely diagnosis of fibro - cystic disease is one of the most challenging problems in modern radiation diagnosis, despite the use and implementation of new technologies and ultrasound mammography. Mammography and sonography made significant changes in the diagnosis of breast pathology. However, diagnostic mammography and sonography opportunities in solving this problem is far from exhausted and are for further study, which determined the relevance of this work.

Purpose of work. To study the efficacy of mammography and sonography possibilities in the diagnosis of fibrocystic breast disease.

Materials and methods. The research was performed on devices Mindray DC and Siemens Mammotom. Research is involve 80 patients. It was observed a group of patients from 70 patients with fibrocystic mastopathy and 10 healthy, applied for routine inspection of the breast at the age of 35 to 60 years or older.

Results. In a comparative perspective we studied the sensitivity of mammography and sonography in the detection of fibrocystic breast disease. When performing mammograms from 70 women surveyed fibrocystic breast disease was diagnosed in 51, which was (72.8+3.8%). When the ultrasound sonographic examination revealed benign in 67 women (95.7+2.6%). The sensitivity of sonography was higher by 23% in diffuse form of fibrocystic breast disease. Identified on ultrasound cysts do not exceed 20 mm in diameter, their sizes ranged from 10 to 35 mm, and only in one case the cyst has reached 120 mm.

Conclusion. Ultrasound is more sensitive in identifying benign breast tumors compared with mammography.

EVALUATING EFFICIENCY OF THE MANAGEMENT OF BRAIN EPENDYMOMAS IN PEDIATRIC PATIENTS

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The most common types of brain tumors are astrocytomas -31.1%, and then medulloblastomas -22.2%, ependymomas -15.5%. About 70% of ependymomas in children growth in the fourth ventricle, 20% - in the lateral ventricles and 10% - in the cauda equina. The average ages of occurrence of tumors in these areas are 2, 6 and 13 years respectively.

Objective. Evaluating the results of the treatment of intraventricular ependymomas in children.

Materials and methods. 30 operated children with ependymomas of the IV ventricle of brain aged 1 to 14 were analyzed in the children's department of republican scientific centre of neurosurgery in 2007-2010. There were 18 boys and 12 girls. They were carried out tumor removal operation- gross-total resection in 13 (43.3%), subtotal - in 8 (26.6%), partly - in 5 (16.6%) patients, and 4 (13.3%) - patients with unknown surgical background.

Results of the research. Analysis of treatment and of continued growth and recurrence-free periods showed that in 5 patients (38.4%) out of 13, had carried out total resection, recurrence of tumors was observed, in 8 patients with subtotal resection recurrence was in 6(13.3%), while in patients with partial removal and unknown data recurrence of neoplasm were reviled in 6 (15%) cases out of 9. Postoperative mortality in 5 (16.6%) cases. By malignancy: in 12 (40%) patients were I-II grades of anaplasia and grades III-IV anaplasia was in 18 (60%).

Radiation therapy patients were carried out on patients with tumors on grades III-IV anaplasia. With the combination of radiotherapy and radical removal in 13 patients recurrence-free period showed the spread of data from 8 months. up to 4.5 years, 3 years on average . When subtotal removal in 8 patients showed a variation of 6 months to 2 years, 15 months on average. Orlov's Quality of Life Scale before operation was 60-80 points on average, after surgery 75-85 points.

Conclusions.Total resection of ependymomas of brain ventricles grades III-IV anaplasia followed by radiation therapy slows development of relapse and growth which leads to the improving of quality of life.

METHODS OF ENDOVASCULAR TREATMENT AT PATIENTS WITH ACUTE DEEP VEIN THROMBOSIS OF THE LOWER EXTREMITIES

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Objective. To evaluate the efficacy and safety of catheter-aspiration thrombectomy and thrombolysis in treating acute deep vein thrombosis of the lower limbs (acute DVT).

Material and methods. We analyzed the results of endovascular interventions in 12 patients with acute deep vein thrombosis of the lower extremities that were hos-

pitalized to the 2-clinic of the Tashkent Medical Academy in the period 2014-2015. The median 7 of the patients were female, 5 male patients aged from 30 to 75 years. Patients applied for 4-7 hours from the onset of illness with complaints of swelling and tenderness of the lower limb. Endovascular interventions made in the 1-3 days from receipt. 10 patients had lesion the left lower limb, others had lesion the right lower limb. The difference circumference of the lower extremities in average: in the middle third of the leg 4 cm; in the middle third of the femur 6 cm. The diagnostic phase begins with duplex ultrasonography (USDS). During USDS determined the level and nature of thrombosis thrombus. To clarify the thrombogenicity determined laboratory parameters such as the hematocrit (55%), Petit (7-9 sec.), APTT (21-24), fibrinogen (440-500 mg/l), SFMC (4,5-5,0mg/100ml) which had been raised. Patients with prior endovascular intervention prescribed antiplatelet and anticoagulant therapy. All patients were routinely produced ascending venography. In all cases, the first step is produced mechanical thrombectomy with the subsequent installation cava filter in the inferior vena cava, the second stage of thrombolysis catheter bolus and prolonged administration. We used the popliteal access to prevent complications such as bleeding, hematoma during and after thrombolysis.

Results. In 10 cases, acute DVT the left lower extremity identified syndrome May-Thurner. These patients stented common iliac vein. In nine cases, was reduce the swelling for 3 days after surgery. When USDS deep veins of the lower limbs were passable, with compression of the sensor is squeezed, parietal thrombus is not revealed. In two cases, the cause of venous thrombosis right leg was hypoplasia of the femoral vein to the presence of floating thrombus, limited installation cava - filter, followed by conservative therapy. In one case on the second day of rethrombosis picture rethrombospiration produced a positive result. All patients were taking warfarin permanently and compression hosiery with moderate compression. After a comprehensive treatment of indicators such as the hematocrit (46%), PB (10-14sec.), APTT (28-32), fibrinogen (220-300 mg/l), SFMC (3,8-4,1mg/100ml) changed for the better.

Conclusion. Endovascular treatment is less traumatic and effective in the treatment of acute DVT in the both legs in the preventive measure of pulmonary embolism and PTS are accompanied by an early activation and improving the quality of patients life.

MONOSTAGE SURGICAL TREATMENT OF CHRONIC SCAR STENOSES OF LARYNX AND TRACHEA

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Objective. Improving the efficiency of the treatment of chronic scar stenosis of larynx and trachea by stage rehabilitation treatment, which allows reducing the time and stages of treatment to restore breathing and voice functions.

Materials and methods. We examined and performed surgical treatment 18 (12 men and 6 women) patients with laryngeal scar stenosis with median localization in the base of 1st and 2nd clinics of Tashkent Medical Academy. The age of patients ranged from 19 to 42 years old. The disease duration ranged from six months to 5 years. All patients were living with cannulas. In order to reduce the number of surgical procedures and timing of the treatment of scar stenosis of the larynx we im-

proved extension methods by redressation laryngeal cartilage, which were recommended by V.G.Zhenger. Analysis techniques of interventions has shown that the operation in the version proposed by Zhenger, a simple cut of the plate reduces the mobility of the thyroid cartilage fragments, due to the lack of distance between the parts. In connection with this, the second phase has to perform excision of scar-modified median structures chordaectomy and other routine operations. In this regard, in our modification, we have cut two isosceles triangles of the thyroid cartilage and the lateral parts of the arc cricoid cartilage and connected with the internal muscles of the larynx, vocal cords and mucous membranes. The generated fragments were diluted manually and gently pierced through the cartilage. After linking ligatures, cartilage fragment was displaced in the lateral direction, thereby widening the lumen. Then we fixed divorced half of the larynx to the muscles of the neck to the same side. Then larynx-tracheostomy for immobilization of fragments mixed into the lumen of the larynx introduced roller-pad for 12-13 days. A distinctive aspect of this operation was that for stable expansion of the lumen of the trachea into the bottom corner of the wound is sewn reinforced triangular flap.

Results. The effectiveness of the treatment was assessed by the degree of restoration of the disturbed functions (breathing, phonation). In 14 of all patients (77.8%) recovered fully functionality - breathing, phonation to socially meaningful level. The other four people (22.2%) breathe fully, but their voice is not socially acceptable.

Conclusion. Thus, a modified method of surgical treatment allowed reducing the number of graded and surgical procedures, to achieve a stable result and restore the functions of the larynx and trachea to the socially significant levels in most patients.

OPTIMIZATION OF TREATING FUNGAL DISEASE OF PHARYNX

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Among the fungal infections of the pharynx (pharyngomycosis) is most common candidiasis, called yeast *Candida*, uniting 20 species. Patients with pharyngomycosis isolated eight different types of pathogens, including "lead" four basic: *C. albicans*, *C. tropicalis*, *C. parapsilosis* and *C. glabrata*. First place is a disease that causes *C. albicans*. This species is found in the mouth and throat in 60% of healthy adults, mostly women, and male smokers. Other *Candida* species on the number of selections from healthy individuals is much less to *C. albicans*, accounting for 10 to 20% of all cases of oropharyngeal candidomycosis.

The aim of the work - to study the effectiveness of fungicidal drug "Lizak" in the treatment of pharyngomycosis.

Materials and methods. For a comparative study of methods of microscopy and culture from the throat swabs of oropharyngeal candidiasis were examined 42 patients aged 15 to 59 years. Patients hospitalized in the ENT clinic of TMA. Among the men surveyed were 13 (43.0%), women - 17 (57.0%). Diagnosis "pharyngomycosis" was established on the basis of mycological smears from the pharynx. Patients were divided into 2 groups. The first group (main) accounted for 22 (50.0%) patients who received conventional therapy in addition to complex drug "Lizak", the second group (the comparison) were 20 (66.6%) patients who received conventional therapy. To evaluate the results of treatment was conducted repeated smear from the

throat at one month after treatment.

Results of the study. The results showed that the efficiency of combined treatment of patients with pharyngomycosis using drug "Lizak" averaged 87%, which is reflected in a significant reduction of symptoms by 2-3 days of treatment and the absence of *Candida* results mycological studies. In the control group the effectiveness of the treatment was 53%. Since in this group a reduction of symptoms was found in the 7-10 day.

Conclusions. Complex preparation "Lizak" "allows qualitatively eliminate the pathological process in the tonsils and oropharynx, and can be used to treat pharyngomycosis.

POTENTIALITIES OF THE DIAGNOSIS AND TREATMENT IN THE PATIENTS WITH NONTUMOR LESIONS OF THE EXTRAHEPATIC BILIARY DUCTS

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Purpose. Potentiality of the noninvasive methods of examination in diagnosis of nontumor lesions of the extrahepatic noninvasive biliary ducts and choice of the operative treatment.

Material and Methods. In the Republican Clinical Hospital N1 of the Ministry of health of the Republic of Uzbekistan there were treated 23 patients with nontumor lesions of the extrahepatic ducts during the period from 2013 to 2014 years. The age of patients fluctuated from 20 to 85 years, mean age was $39,3 \pm 2,1$ years. Among the patients there were 16(69,5%) women and 7(30,5%) men.

In out clinical practice the identification of the causes for surgical treatment of the mechanical jaundice in obstruction of the extrahepatic biliary ducts was based on the findings of magneto-resonance pancreatocholangiography (MRPCG).

Results. Results of examination of the patients showed increase in level of the total bilirubin from 22,5 to 293,1 mmol ($87,4 \pm 9,23$ mmol/l) due to direct fraction.

Ultrasound investigation showed fluctuation of the diameter of the common biliary duct from 5 to 21 mm, mean diameter was $13,9 \pm 3,5$ mm. Of them in 40% of patients the diameter of the common bile duct was more than 7 mm. In 17(73,9%) of these patients there were observed clinical picture of cholangitis.

Magneto-resonance pancreatocholangiography (MRPCG) was performed in all patients. There obtained even 100% of data in the patients with pathology of the biliary ducts. The causes of the nontumor lesions of the extrahepatic biliary ducts included stenosis of the major duodenal papilla in 12 (52,2%) patients; choledocholithiasis – in 7(30,4%) patients, and association of the choledocholithiasis and stenosis of the major duodenal papilla – in 4 (17,4%) patients.

Of 11 patients with choledocholithiasis there were revealed large concrements (with diameter more than 1,2 cm) in 3 patients, and multiple small stones diameter (0,7-0,8 mm, to 40-50) were found in 1 patient in the extra- and intrahepatic ducts.

On the basis of MRPCG 19 patients (of them 12 patients with stenosis of major duodenal papilla, 4 patients with choledocholithiasis, 3 patients with association of stenosis and choledocholithiasis) underwent 2-stage surgical treatment. On the first stage stenosis and choledocholithiasis were eradicated by endoscopic method. On the second stage there was performed cholecystectomy. In 4 patients with large

and multiple concrements (1 patient with stenosis+choledocholithiasis) there was performed one-stage procedure: cholecystectomy, choledocholithotomy, formation of the choledochoduodenoanastomosis and choledochal draining by Khosted-Pikovsky. In the postoperative period in the patients there was observed positive dynamics. Biochemical parameters were normal. The patients were discharged from the hospital under satisfactory state.

Conclusion. Thus, in nontumor lesion of the extrahepatic bile ducts the correct diagnosis before surgery with use of MRPCG allows appropriate choice of the surgical strategy at one or two-stage treatment.

PERIOPERATIVE ANTIBIOTICS BEFORE URGENT ABDOMINAL SURGERY IN THE PROPHYLAXIS OF SURGICAL SITE INFECTIONS

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Surgical site infections (SSIs) are the third most common type of hospital-acquired infections and, on average, account for 17% of them (based on data from point prevalence surveys performed in industrialised countries in recent years). Perioperative antibiotic prophylaxis (PAP) is considered an effective measure for prevention of SSIs because the vast majority of SSIs are caused by endogenous translocation of the patient's intestinal microbiota (J.K. Bowater et al.). Studies have shown that approximately 15% of all antibiotics in hospitals are prescribed for surgical prophylaxis.

Objective. To compare "bactazon" with "ceftriaxone+metronidazole combination" in the prophylaxis of surgical site infections in the practice of urgent abdominal surgery.

Materials and methods. The study was performed in the Surgical Intensive Care Unit (ICU) №1 at II clinics of TMA from May 2015 to December 2015. This is a prospective study of 40 patients who underwent different kind of urgent abdominal surgeries (including hernia repair with placement of a mesh plug, appendectomy). The patients divided into 2 groups according to antibiotics choice. The following antibiotics were used: a) Bactazon 1,5 gr (Cefoperazone Sodium 1000 mg; Sulbactam Sodium 500 mg) for 20 patients (n=20) intravenously 20-30 minutes before surgery in the 1st group, "ceftriaxone 1gr+metronidazole 100 ml" for 20 patients (n=20) intravenously 20-30 minutes before operation in the 2nd group. The outcome measures of the study were: Wound infection, redness, swelling, pain, leukocytosis, temperature above 38°C, intra-abdominal abscess, length of stay in hospital, and mortality rate after surgeries.

Results. The overall result is that the use of antibiotics was equally successful for both groups. The infection rate was low overall in the 1st group 2 (10%) patients (n=20) and in the 2nd group accounted for 4 (20%) patients (p = 0.6). Patients in the 1st group had a shorter length of hospitalization (4.7±2.1 days vs. 6.1±2.3 days, p < 0.0001) and lower incidence of in-hospital ventilator-associated pneumonia (VAP) (1/20 vs 3/20), p=0.0001) in comparison to patients in the 2nd group. Most pathogens were susceptible to the drugs in both treatment groups. Postoperative pyrexia was noted in 2 patients in the 1st group where as in 4 patients in the 2nd group. In pyrexia, temperature ranged from 37,9-39,2 Celcius.

Conclusions. Firstly, protocol with Bactazon is almost equally effective as protocol with "ceftriaxone+metronidazole combination". Secondly, it appears that combining metronidazole with Ceftriaxone therapeutically has no significant (P = 0.0001) benefit over Bactazon alone. Finally, protocol with Bactazon is less expensive in

terms of total therapy than protocol with “ceftriaxone+metronidazole combination” and bactazon was more effective and safe in our survey. On the other hand, the drug was well tolerated in all cases.

COMPLICATIONS OF ACUTE EPIDIDYMO-ORCHITIS IN ADULTS

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Introduction. Epididymo-orchitis is a disease that may affect males in all ages. Acute scrotal pain sometimes requires prompt surgical intervention and therefore accurate diagnosis of different etiologies of acute scrotal pain has great therapeutic and prognostic significance. It most often presents unilaterally and occurs because of a specific or nonspecific urinary tract infection that seeds to the epididymis and testis through the lymphatic vessels or ductus deferens. Diagnostic procedures include physical examination, standard laboratory tests, scrotal ultrasound investigation, and microscopic examination of urethral discharges if they are present. Treatment should be started immediately after diagnosis of acute epididymo-orchitis and should include antibiotics, analgesics, and, if necessary, surgery.

Purpose. The aim of this investigation was to determine a treatment approach for acute epididymo-orchitis based on a patient’s examination results.

Results. The average age of the first group of patients was $52,6 \pm 2,8$ years, whereas the second group was $23,6 \pm 1,7$ years ($p < 0,02$). In the first group of patients duration of the disease was $24,7 \pm 1,6$ hours, in the second- $26,8 \pm 2,6$ hours ($p > 0,1$). In all cases, urine culture was positive. All patients underwent magnetic - resonance imaging (MRI) of the bodies of the scrotum. Destruction of testicular tissue (from the lesion) was detected in 38 (79.1%) patients, and they were subjected to surgery to remove the testicle. Due to the absence of destructive phenomena in the testicle at MRI and improvement of the patient's condition during antibiotic therapy the surgery was not performed. Such cases were 10 (20.9%). 32 patients of the 36 ones of the 1st group underwent orchiectomy, where’s of 32 patients in the 2nd group orchiectomy was performed only 6 patients. Thus after surgery rate was 5 times higher in patients who were performed earlier any intervention ($p > 0,02$). Furthermore the diabetes mellitus revealed in 25 patients (65%) who were within group undergone orchiectomy.

Conclusions. Thus, the presence of urinary tract infection is a predisposing moment for the development of acute epididymo-orchitis. However, the risk factor for the development of destructive changes in the testis, which are the indication for orchiectomy is the surgical intervention on the organs of lower urinary tract. Diabetes mellitus is additional risk factor which negatively affects the course of acute epididymitis, leading to testicular tissue destruction.

THE RESULTS OF COCCYGODYNIA SURGICAL TREATMENT IN ORTHOPEDICS OF KHOREZM REGIONAL MULTIDISCIPLINARY CENTER

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Objective. Application and analysis of the results of coccygodynia surgical treatment, developed in the clinic of Uzbek Research Institute of Traumatology and Orthopedics (UzRITO) in the Khorezm Regional Diversified Center.

Research problems: 1. To find the most effective method of treatment posttraumatic coccygodynia. 2. To consider a method of operative treatment and to analyse its result.

Material and methods. This scientific work is based on a study of 23 patients with post-traumatic coccygodynia, who had been treated promptly in the department of orthopedics of the Khorezm regional diversified Center for 2013-2014. Among the patients, the females are 18 and the male are 5 people. Our findings are corresponded with the literature, according to which in most cases coccygodynia affected mainly women. The X-ray picture of posttraumatic coccygodyniashowed that subluxations coccyx was largely prevailed. A common clinical symptom of post-traumatic coccygodynia was varying degrees of pain on palpation of the coccyx, which is enhanced by digital rectal examination. 4-6 cm incision is performed on 5-6 cm above the anus and 1-2 cm lateral line of intergluteal line, i.e. of the projection surface sheet thoracolumbar fascia back. The side surface of the coccyx and the lower part of the sacrum with a scalpel the muscles are crossed from their place of attachment to the coccyx. Carefully the side and ventral sacrococcygeal ligaments are cut off of the coccyx. Then, the coccyx is released and removed in part, that is the type of "dismantling rouleaux." Erector muscle of the anus is crosslinked with ligamentous apparatus earlier conducted bythread-taped andis fixed to the coccyx and sacrum. The wound is sutured in layers.

Results: the results of surgical treatment of patients with posttraumatic coccygodyniewere evaluated on a three-point system: good, satisfactory and unsatisfactory. 1 patient with a satisfactory result was a course of medical treatment.

Conclusions. Thus as a result of the researches conducted it is possible to conclude the following: The most effective treatment for post-traumatic coccygodynia is operational. The developed method of removal in the coccyx UzRITO gave better results, reduced the number of complications and provided primary wound healing.

This implies the following conclusions: 1. The most effective treatment for post-traumatic coccygodynia is operational: the removal of the coccyx. 2. When removing the coccyx using the method of clinic UzRITOthere was observed primary wound healing. Patients did not feel pains after surgery and they returned to their previous active life.

ABOUT THE POSSIBILITY OF INCREASING THE EFFICACY OF THERAPY PREMATURE EJACULATION

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Premature ejaculation is one of the most common andrological diseases. The ineffectiveness of the treatment of premature ejaculation often leads to family conflicts, acute violation of the general physical and psychological condition of the patients, as well as a disability, neurosis or depression. So the improvement of the treatment of patients with premature ejaculation is to be topical and working out problem.

The aim of the research was to study the efficacy of Fluoxetine in premature ejaculation.

Methods of the research. There were 15 patients suffering from premature ejaculation (primary type) on the treatment. Fluoxetine was applied in a dose of 20 mg per day in the morning mainly as an adjunct to basic urological therapy. Treatment was carried out for 30 days under clinical and laboratory control. In the case of effectiveness achievement treatment continued up to 60 days. All patients underwent

an electrocardiogram, ultrasonic diagnosis of liver, general and biochemical analysis of blood, microscopic examination of all portions of urine and secretion of prostate after massage of gland.

Results. The efficacy as a result of use Fluoxetine 20 mg 1 time a day for 30 days was 93.3%. 4 examined patients before the treatment could make 40-75 friction movements and after treatment - 80-140. 7 examined patients before the treatment could make 20-50 friction movements, and after treatment - 60-110. 1 examined patient before the treatment could make 0-3 friction movements and after treatment - 20-35, after the second course of treatment - up to 75 of the friction movements. 2 examined patients before the treatment could make 50-70 friction movements and after treatment - 120-170. 1 patient before the treatment could make 20-30 frictional motions and after treatment 40-50 friction movements.

Conclusion. Thus, Fluoxetine proved its efficacy in the treatment of patients with premature ejaculation. Besides, after conducted treatment, it noted a decrease of nervousness and excessive irritability of patients. Increased the number of friction movements. Improved sense of orgasm during ejaculation. Received facts are evidence of expedient of using the Fluoxetine in the treatment of premature ejaculation.

SELECTING RETROGRADE ENDOSCOPIC INTERVENTIONS IN PARAPAPILLARY DIVERTICULITIS IN PATIENTS WITH OBSTRUCTIVE JAUNDICE

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Objective: to improve the tactics of retrograde interventions in PD by studying the anatomical location of Papilla Vateri (PF).

Material and methods. Between 2013 and 2015, the endoscopic procedures were performed in 18 patients. The age of patients ranged from 28 to 85 years. 3 Male, 15 female. 72% of patients were elder than 60. At 13 patients there was jaundice, of which 5 had acute cholangitis. 81% of the patients had comorbidities, that determine the risk factor for surgical interventions. In order to determine the effectiveness of endoscopic interventions, and the development of techniques to facilitate their implementation, we divided all types of PF location and duodenum longitudinal fold relative to the PD into five types:

Type I. PF is located inside the diverticulum and the length of the longitudinal folds are small or absent

Type II. PF is disposed within diverticulum and the longitudinal fold has considerable length, located in a vertical direction at a fixed position at duodenoscopy.

Type III. PF is located at the neck of the diverticulum of duodenum and longitudinal folds can be traced entirely within and between the neck of a diverticulum or diverticula.

Type IV. PF is located at the neck of the diverticulum of duodenum and longitudinal folds has small length or not expressed.

Type V. PF and longitudinal folds located outside diverticulum and longitudinal fold does not go into the wall of a diverticulum.

The results. In 3 cases we diagnosed type I of PD. In this case, we performed staged balloon dilatation- at intervals of 3-4 days. In 1 patient with obstructive jaundice and cholangitis we produced nasobiliary drainage (NBD) with subsequent balloon dilation and removal of calculus. Type II of PD was diagnosed in 3 cases. All

patients had EPST with cutting string of less than 1 cm, which increases certainty of papillotomy. In 2 patients we performed additional balloon dilatation under the control of the conductor and lithoextraction. Type III of PD was diagnosed in 7 patients, at which was produced EPST and lithoextraction. In 3 patients we revealed type IV of PD. In 2 cases, the patients underwent EPST and balloon dilatation of PF and in 1 case because of the expressed jaundice and cholangitis we produced percutaneous biliary draining followed by balloon dilatation and lithoextraction. V type of PD was found in 2 patients. In all cases, we produced EPST by established earlier conductor with the removal of calculus from common bile duct. We couldn't perform EPST only at 1 patient with PD IV type. This result is comparable with the results of EPST, performed in the absence of PD. Short term complications were observed in 4 patients (2 - bleeding, 2 - pancreatitis). The analysis showed that acute pancreatitis was caused contrast substance in the main pancreatic duct, and atypical method of EPST. All complications except 1 patient with acute pancreatitis, which has been operated, were treated conservatively. Deaths, related with EPST, were not observed. The use of certain tactics and technique allows us successfully complete the intervention and avoid open surgery and serious complications.

ROLE OF PATHOLOGY OF NOSE IN THE ETIOLOGY AND TREATMENT OF DISEASE LACRIMAL PASSAGES

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The main reasons for the unsatisfactory outcome of the operations are inadequate surgical technique, imperforate fistula formed scar tissue, as well as adverse effects of rhinopathology. In this regard, we investigated the role rhinopathology in the development and progression of chronic dacryocystitis.

The aim of this work was to study the role of the nose in the treatment of dacryocystitis.

Materials and methods. In our study we included 30 patients with pathology of the lachrymal pathways, which are dominated by female patients - 18 (82.9%), males were 12 (17%). Age range of the patients was from 19 to 75 years. All patients were conducted clinical and laboratory studies, including inspection of ENT, endoscopy and X-ray examination. Chronic dacryocystitis was ascertained in 19, post-traumatic dacryocystitis in 3, chronic purulent dacryocystitis in 8 patients. Due to the anamnesis of our patients in 19 cases we found nasal septum deviation, hypertrophy of the inferior turbinate in 7, vasomotor rhinitis on 4 patients. Symptoms were evaluated by 3-point system. Dacryocystitic patients were divided into 2 groups. The first (primary) group consisted of 15 patients who underwent surgical intervention, appropriate intranasal pathologies, and the second group consisted also of 15 patients (comparison), who conducted conservative treatment of dacryocystitis by prescription to them antibiotic therapy and the appointment of an anti-inflammatory treatment. All patients before surgery was carried out a survey on the standard scheme: medical history, physical examination, Schirmer's test, color tests, rhinoscopy and sinus X-rays. Patency of the lachrymal pathways was determined by washing the lachrymal pathways.

Results and discussion. Efficiency of surgical interventions in a nose was esti-

mated by decrease in symptoms of a disease. At an assessment of outcomes of treatment it is noted that intra nasal surgical interventions promoted faster subsiding of inflammatory process (disappearance of a swelling in the field of the lachrymal sac, no injection of the sclera of the eyeball) and to passability restoration the lachrymal pathways. In rhinoendoscopy pre- and postoperative period were also satisfactory. In the main group the reduction of the inflammatory process occurs in an average of 2-4 days in the comparative group average of 4-5 days. Before operation at all patients of the main and control group tubular and nasal tests were negative. Reduction of terms of treatment in the main group 4-5 days, in control 6-7 days was noted. Decrease in recurrence of a dacryocystitis in the main group is also noted. In terms of supervision of 1-6 months, in control group 9 patients addressed with recurrence, in the main group it wasn't observed patients with recurrence.

Thus, carrying out surgical treatment of intranasal blocking lachrymal path can reduce treatment time, quick to stop inflammation, restore patency of lachrymal system, thereby improving the condition of patients.

ENDOVASCULAR TREATMENT OF CRITICAL ISCHEMIA OF LOWER EXTREMITIES

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Objective: to evaluate the effectiveness of endovascular treatment for multilevel defeat of arteries of lower extremities in patients with critical ischemia.

Material and methods: we studied the results of endovascular treatment of 32 patients (20 men and 12 women, aged 57.4 ± 5.1 years) with critical ischemia of the lower extremities for the period 2013-2015 timeframe. According to the pre-operational studies (USDG of arteries of the lower limbs, CT Angiography) 14 (43.7%) patients had multilevel defeat of arteries above and below the joint space of the knee, 5(15.7%) patients had lesions of arteries at only femoro-popliteal segment and 13(40.6%) patients with isolated stenoses and occlusions of the leg arteries.

To restore patency of arterial bed there was used balloon angioplasty, in case of its inefficiency – stenting of dilatated segments of arteries. When multilevel defeat we performed the restoration of arterial lumen at only proximal hemodynamically significant lesions. In 9 cases the effectiveness of the procedure has not been achieved in connection with the unsuccessful attempts of recanalization of long occlusions.

Results: the clinical success of endovascular treatment was reported for 23 patients. Of these, at two patients, due to suboptimal results of balloon angioplasty, stenting was held with self-expanded stents. As at 14 (60.9%) patients with recanalization only proximal vascular lesions, and 9 (39.1) patients with complete revascularization, already in the first day after surgery clinical improvement was noted: disappearance of pains at rest, in the subsequent demarcation of necroses, healing of ischemic wounds and ulcers. At one patient with occluded tibial artery on the first step recanalization of occlusion of the superficial femoral artery. Despite the stabilization of pyonecrotic process we observed lack of pronounced positive dynamics. Through 1 month to this patient was performed the second stage of recanalization of occlusion of tibial arteries, resulting in the intensification of reparative processes and wound healing. Limb amputation was avoided in all 23 patients. Complications

associated with the procedure, and deaths in the early postoperative period was not observed. All the patients were discharged in a satisfactory condition.

Conclusion: the use of endovascular treatment is effective in patients with critical ischemia of the lower extremities. Implementation of the first phase of endovascular treatment for most patients with multilevel lesions demonstrates the best immediate results, sufficient for compensation of reparative processes of limb and rescue it from amputation. Necessity for a second phase of endovascular treatment is minimal (7.1%). This approach allows you to reduce the volume and complexity of the operation and, consequently, reduces the risk of complications.

CLINICAL EFFICACY AND SAFETY OF RUSH IMMUNOTHERAPY IN PATIENTS WITH ALLERGIC RHINITIS

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Aim of this study was to evaluate the efficacy and safety of rush immunotherapy (RIT) for patients with persistent allergic rhinitis (AR).

Methods. In this study, a total number of thirty three (33) patients who suffered mite allergic rhinitis were included. These patients completed one year subcutaneous immunotherapy (SCIT). Using RIT, the patients underwent the incremental dose phase in a week instead of 15 weeks in a conventional treatment procedure. The symptom scores, visual analog scale (VAS), appropriate medication score, total blood serum IgE, dermatophagoides pteronyssinus specificity IgG4, mite allergy skin prick test (SPT), dermatophagoides farinae nasal provocation test (NPT) and the incidence of adverse reactions were used to evaluate the efficiency and safety of RIT.

Results. After one year SCIT treatment, the symptom score and VAS scores were significantly decreased, the corresponding medication usage was significantly reduced (8.91 ± 1.84 , 20.64 ± 6.99 vs. 4.97 ± 2.92 , 11.94 ± 7.21 , t value was 9.15, 7.11, both $P < 0.001$) and the cutaneous reactions to mite allergen were significantly decreased ($P < 0.001$) as well. However, dermatophagoides pteronyssinus-specific serum IgG4 increased significantly ($Z = -4.517$, $P < 0.001$). The concentration of dermatophagoides farinae nasal provocation test (NPT) was significantly increased. After the treatment, the number of patients who had positive reactions to high concentration nasal provocation test (NPT) increased ($\chi^2 = 1.93$, $P = 0.38$). During the treatment, all the patients experienced local reactions, and specifically there were four patients got general reactions.

Conclusion. RIT is safe and effective. It shortened the incremental dose phase remarkably. NPT is a good indicator for diagnosing allergic rhinitis and evaluating the efficacy of the treatment.

RECONSTRUCTION OF ANTERIOR URETHRAL STRICTURES USING DORSAL BUCCAL MUCOSAL GRAFTS

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Purpose. Urethral stricture is condition requiring a diverse array of reconstructive techniques to achieve optimum outcomes. While most cases are amenable to excision and primary anastomosis or augmentation urethroplasty, a challenging

subset of patients with long, complex strictures also contain an intrinsic focally obliterative segment. Such cases are often too long for a straightforward anastomotic procedure and too severe for a simple flap or graft. This report our initial experience with single-stage reconstruction of complex, focally severe strictures using a short, dorsal buccal mucosal graft.

Materials and Methods. A retrospective review of all urethral reconstruction procedures performed between 2011 and 2014 year. Individuals who underwent single-stage urethral reconstruction using overlapping dorsal and ventral buccal mucosal graft were identified. Stricture anatomy was delineated with retrograde and voiding cystourethrography, and cystoscopy was used to evaluate men with poor or equivocal radiographic studies. Suprapubic cystostomy tubes were placed preoperatively for men with urinary retention. Urethral catheters, when present, were removed at least 6 weeks preoperatively to allow for maturation of the stricture, thus enabling intraoperative identification of the diseased segment.

Results. Among 96 consecutive urethral reconstruction procedures performed during the 3-year study period, 36 (37,5%) included urethral plate incision and/or excision and overlapping dorsal and ventral buccal mucosal graft in a single stage. The mean age was $45,9 \pm 6,3$ years and mean stricture length was $4,5 \pm 1,7$ cm. At a mean follow up of $15,7 \pm 9,1$ months, 32 of 36 patients were voiding spontaneously with no need for further procedures (89% success rate). The mean Q max in the success group was $22,5 \pm 1,1$ mL/s. Three of these patients had a Q max of < 15 mL/s, but cystoscopy and/or urethrography showed no evidence of re-stenosis. Strictures recurred in four patients (11%), presenting at a median (range) $4,5 \pm 0,3$ months postoperatively. All four failures underwent revision urethroplasty (excision and primary anastomosis, penile skin flap plus dorsal buccal mucosal graft -two) without attempts at endoscopic treatment, three of which were successful. Early postoperative complications occurred in five patients (14%), including one urethrocutaneous fistula, two superficial wound infections, and two urinary tract infections, all of which resolved with conservative and/or medical management.

Conclusions. Reconstruction of complex anterior urethral strictures is safe and highly effective using the overlapping dorsal plus ventral buccal mucosal graft technique. The independently anchored and supported overlapping grafts offer a promising alternative to multi-stage reconstruction, while avoiding primarily tubularized grafts.

BRONCHIAL ARTERY EMBOLIZATION FOR HEMOPTYSIS: A RETROSPECTIVE STUDY

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Background. Hemoptysis is a significant clinical entity with high morbidity and potential mortality. Both medical management (in terms of resuscitation and bronchoscopic interventions) and surgery have severe limitations in these patients population. Bronchial artery embolization (BAE) represents the first-line treatment for hemoptysis. This article discusses clinical analysis, embolization approach, outcomes and complications of BAE for the treatment of hemoptysis.

Methods. A retrospective analysis of 176 cases, who underwent bronchial arteriography at the 2nd clinic of the Tashkent medical academy between 1992 and 2016. Several aspects of outcome were analyzed: Demographics, clinical presentation, ra-

diographic studies, results, complications and follow-up of BAE.

Results. 176 patients underwent bronchial arteriography, 150 of 176 patients (85.2%) performed BAE; there were 830 coils for 320 arteries embolized; the main responsible sources for bleeding were right bronchial artery (29.7%), left bronchial artery (21.6%), combined right and left bronchial trunk (18.4%), right intercostal arteries (13.3%); 61 patients (17.7%) had recurrent hemoptysis within 1 month after undergoing BAE, 38 patients (21.5%) had recurrent hemoptysis over 1 month after undergoing BAE; The common complications of BAE included subintimal dissection, arterial perforation by a guide wire, fever, chest pain, dyspnea, etc. The follow-up was completed in 160 patients, 18 patients had been dead, 4 patients still bleed, 16 patients had lost to follow-up.

Conclusions. The technique of BAE is a relatively safe and effective method for controlling hemoptysis. The complications of BAE are rare. Although the long-term outcome in some patients is not good, BAE may be the only life-saving treatment option in patients who are poor surgical candidates.

MONITOR OF THE DIFFERENT TYPES OF GASTRIC STUMP CANCER

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Objective. To assess the degree of occurrence of gastric stump cancer classification developed by MD Loptenym.

Material and methods. This inspection was analyzed in 22 patients who were treated during 2001-2015. the Republican Scientific Center of Oncology and the Tashkent City Oncology Clinic in the hospital. These are patients from 35 to 65 years with a mean age of 52 ± 2 years.

Result. In the course of the study revealed that patients with gastric stump cancer are divided into 3 groups. The first group included 13 patients with residual postoperative stomach cancer, which constitute 59.1%. The second group consists of 5 patients with recurrent gastric cancer, which make up 22.7%. The third group - 4 patients with primary or an initial swelling of the stomach, is 18.2%.

Conclusions. The study found that patients with cancer of the gastric stump with residual postoperative stomach cancer lead more than other types.

THE ROLE OF ENDOSCOPIC DIAGNOSTICS AND MICROSCOPY OF BILE IN DETERMINING THE OVERALL FREQUENCY OF PATHOLOGICAL CHANGES IN THE TERMINAL PART OF COMMON BILE DUCT AND MICROCHOLELITHIASIS AFTER CHOLECYSTOMY

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The diseases of pathology of hepatopancreatoduodenal zone, particularly of cholelithiasis (gall stones) and its complicated forms progress steadily. Increasing statistics for number of patients with cholelithiasis is a result of improved diagnosis of the pathology due to the implementation of new technologies and research

methods, meanwhile increase in frequency of metabolic disorders contributes to increase of number of patients.

Purpose of the study. To determine the overall frequency of changes in the field of major duodenal papilla and microcholelithiasis after cholecystectomy.

Materials and methods. Study was performed in the Scientific Center of Surgery of liver and biliary tract Ministry of Healthcare of Uzbekistan on the basis of Republic clinical hospital №1, 15 patients 1 month after cholecystectomy. 3 men (20%), 12 women (80%). The age of patients ranged from 31 to 70 years. The endoscopy under local anesthesia 10% lidocaine spray. Inspection was performed on the "short loop" of the endoscope. Bile was aspirated from the lumen of the intestine in an amount of 3.0 ml through a catheter, carried over a channel of the endoscope and then poured into a sterile tube.

After a macroscopic evaluation was carried out microscopy of a native preparation. We studied the presence of microliths, formed elements, epithelial calcium bilirubinate. We consider the results of ultrasound and medical history.

Results. When collecting history none of the patients complained. On duodenoscopy changes were found in 11 (73.3%) patients, including -papillitis in 4 (26.7%), rhythm disturbance of bile in 3 (20%) patients. Microscopic examination of the bile and the presence bilirubinate microcholelithiasis calcium detected in 13 (86.7%) cases. Microscopic changes in bile occurred in all patients with pathology in the terminal part of common bile duct revealed at duodenoscopy. In 2 (13.3%) patients with no change in the terminal part of common bile duct also detects the presence of microliths in the study of bile.

Conclusions. 1. The overall frequency of detection of changes in the area of major duodenal papilla after cholecystectomy was 73.3%

2. The overall incidence of microcholelithiasis after cholecystectomy was 86.7%.

3. Microcholelithiasis in 13.3% of cases does not lead to endoscopically diagnosed changes in the major duodenal papilla.

HEARING-SPEECH REHABILITATION OF CHILDREN WITH SENSORNEURAL HEARING LOSS

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The problem of hearing loss is now becoming increasingly important in the medical and social aspects. Despite of some progress achieved in otorhinolaryngology in recent years, a number of patients with hearing impairments increases due to sensor neural hearing loss. According to data of WHO 2014 more than around world 250 million people suffer from hearing impairment. Considered hearing loss greater than 40 dB for better hearing ear, and in Russia there are more than 13 million of people with social significant hearing impairment, including children and teenagers more than 1 million. Until now, the rehabilitation of hearing and speech in children with hearing impairment is one of the urgent problems in otorhinolaryngology.

The aim of the study is the rehabilitation of children with sensorneural hearing loss with the help of special correctional and developing computer systems.

The task of the study is to implement correctional and development of computer programs for the rehabilitation of children with hearing loss.

Material and methods. The study was conducted on the basis of the 2nd Clinic of the Tashkent Medical Academy. The study involved 27 children with bilateral sensor neural hearing loss of 3 degrees. All of them were using hearing aids on both ears. Patients were divided into two groups. 1 group received only drug treatment. In the second group besides medicaments therapy in a complex of rehabilitation actions was also used correctional developing computer program. Classes were held for 10 days within 30 minutes.

Results of the study. We studied the perception of sounds for to evaluate the effectiveness of the rehabilitation. In group 1, the results showed that after treatment, improvement of phonemic perception was noted in 47% of cases. In group 2, the results showed that the improvement of phonemic perception was noted in 73% of cases.

Thus, implementation of correctional and development of a computer program can improve the efficiency of audio-verbal rehabilitation of children with sensor neural hearing loss.

Introduction of correctional and developing computer program into rehabilitation of children with hearing loss will contribute to timely rehabilitation of children with hearing impairments and allow conducting classes of speech rehabilitation at home as well. The program can be recommended for using in classroom in specialized institutions for children with hearing impairments.

ASSESSING THE EXTRACORPOREAL IMMUNOFARMACOTHERAPY IMPACT TO THE QUALITY OF LIFE OF OVARIAN CANCER PATIENTS

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Ovarian cancer (OC) is by far is the most fatal of gynecological cancer tumors, with the structure of this pathology high proportion of locally advanced forms of the disease.

The purpose of the study. Study of methods of immunotherapy as a way to rehabilitate and improve the quality of life of patients with ovarian cancer in the combined treatment.

Material and methods. In the survey included 85 patients with ovarian cancer (OC) T2 -3N0-1M0 stage (II-III clinical stage), held in the examination and treatment of gynecological oncology departments of the Ministry of Health and the Cancer Research Center autohemotherapy Uzbekistan from 2009 to 2012. In line with the objectives of the study, patients were divided into the following groups: Group 1, which was used plasmapheres followed by extracorporeal immunofarmacoterapy (with the processing of cell suspension timalin) - 20 patients, group 2, where extracorporeal immunofarmacoterapiyu used without plasmapheres (blood processing timalin) - 25 patients, third control group (without immunocorrective) therapy - 40 patients. All patients with ovarian cancer a combined therapy in the adjuvant or neoadjuvant, including combination chemotherapy cisplatin 75 mg/m²+cyclophosphamide 1000 mg/m² for 4 days at 4-6 times the rate of 1 to 3 weeks and surgical treatment to the extent of radical surgery. Chemotherapy was carried out as in the adjuvant and neoadjuvant in. Immunofarmacoterapiya using extracorporeal methods carried out in the postoperative period.

Results. The study found that the quality of life of patients with ovarian cancer after this method's events was significantly higher than in the control group of patients without immunotherapy, which was reflected in the increase in both physical and mental components of health.

Sum of the physical health component of the third control group of patients with ovarian cancer at admission was $139,7 \pm 46,5$, and at discharge - $159,8 \pm 40,4$ ($P < 0,01$). In Group 2, the EOC, where patients were EIFT without plasmaphereses, the figure at the beginning of treatment was $139,1 \pm 35,3$, after immunotherapy - $248,7 \pm 39,4$ ($P < 0,01$). The highest rates of physical health component were observed in group 1 with ovarian cancer, which was used EIFT with plasmaphereses. Prior to treatment the rate was $140,2 \pm 32,6$, after immunotherapy - $261,6 \pm 33,7$ ($P < 0,01$).

Indicators of overall 5-year survival rate of patients with ovarian cancer after the treatment in combination with immunotherapy were as follows: in the 2nd group receiving EIFT without plasmaphereses - $71,5 \pm 6,7\%$ ($P = 0.036$) in group 1 patients with ovarian cancer, receiving a plasmaphereses EIFT - $76,5 \pm 6,3\%$ ($P = 0.043$) and third control group without immunotherapy - $62,5 \pm 6,1\%$.

Conclusions. The research led to the conclusion that the most effective in reducing the side effects of chemotherapy in treatment of patients with ovarian cancer stages II-III, as well as in the improvement of the subjective state of patients and their quality of life, has a scheme of immunotherapy, including intermittent plasmapheresis followed EIFT (extracorporeal immunofarmakoterapy), which reduces the main clinical manifestations of toxicity of chemotherapy, improves the subjective condition of patients and their quality of life. In addition, the use of techniques EIFT in the treatment of gynecological cancer diseases possible to increase the performance of three-and five-year overall and disease-free survival of patients.

DURATION OF THROMBOPROPHYLAXIS WITH LOW MOLECULAR WEIGHT HEPARIN FOR MAJOR ABDOMINAL SURGERY

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Background: abdominal surgery leads to a hypercoagulable state, indicating an increased risk for DVT. The activation of the coagulation system last for at least 14 days and unpublished data suggests that patients remain in a hypercoagulable state for at least one month after surgery. Dahl et al. reported that discontinuation of thromboprophylaxis one week after major abdominal surgery resulted in a second wave of coagulation and fibrinolysis activation. Administration of extended thromboprophylaxis with LMWH lowers the markers of coagulation. After major abdominal surgery a similar activated condition lasted until after discharge and was significantly more pronounced for patients with malignant compared to benign disease. Patients undergoing major abdominal or pelvic surgery are at increased risk of developing postoperative venous thromboembolic complications (VTE). The incidence of deep vein thrombosis (DVT) following abdominal surgery in the absence of thromboprophylaxis is 19 to 29% in high risk patients. Several methods to reduce VTE have been implemented clinically. Thromboprophylaxis with unfractionated or low-molecular weight heparin (LMWH) administered for the first postoper-

ative week in general surgical patients reduces the incidence of VTE.

Major abdominal surgery carries a high risk of venous thromboembolism, but the optimal duration of postoperative thromboprophylaxis is unknown.

Objective: to determine the optimal length of thromboprophylaxis after major abdominal surgery

Methods: we conducted a double-blind, multicenter trial in which patients undergoing planned major abdominal surgery received enoxaparin (40 mg subcutaneously) daily for 6 to 10 days and were then randomly assigned to receive either enoxaparin or placebo for another 21 days. Bilateral venography was performed between days 25 and 31, or sooner if symptoms of venous thromboembolism occurred. The primary end point with respect to efficacy was the incidence of venous thromboembolism between days 25 and 31. The primary safety end point was bleeding during the three-week period after randomization. The patients were followed for two months.

Results: the intention-to-treat analysis of efficacy included 102 patients. The rates of venous thromboembolism at the end of the double-blind phase were 12.0 percent in the placebo group and 4.8 percent in the enoxaparin group ($P>0.05$). This difference persisted at three months (13.8 percent vs. 5.5 percent, $P=0.01$). One patient in the enoxaparin group and three in the placebo group died within two months after surgery. There were no significant differences in the rates of bleeding or other complications during the double-blind or follow-up periods.

Conclusions: enoxaparin prophylaxis for four weeks after major abdominal surgery is safe and significantly reduces the incidence of venographically demonstrated thrombosis, as compared with enoxaparin prophylaxis for one week.

THE FREQUENCY AND SEVERITY OF HEPATIC ENCEPHALOPATHY IN REMOTE PERIOD AFTER PORTOSYSTEMIC SHUNT IN PATIENTS WITH CIRRHOSIS OF LIVER

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The aim of the study. The incidence of hepatic encephalopathy (HE) in patients with liver cirrhosis (LC) after portosystemic shunt (PSSh).

Materials and methods. Long-term results with a dynamic clinical and instrumental verification of severity of HE were followed up in 188 patients with LC after PSSh. The complex diagnosis of HE used machine «HEPATonorm™ - Analyzer» (company «MERZ», Germany), by which to determine the critical flicker frequency (CFF).

Results. According to the analysis at different times after PSSh from accruing liver failure died 67 (35.6%) patients: after distal splenorenal shunts (DSRS) - 35 (33.0%), and after the central PSSh - 32 (39.0%). Lethality on the background of relapse of bleeding was 8.5% (16 patients, 10 (9.4%) after the DSRS and 6 (7.3%) - after the central PSSh). Given the performed decompressive intervention study of remote results showed that in most cases there comes regression of esophageal and gastric varices (EVG). Regarding the frequency and severity of HE in postshunt period, the selective decompression differed less severe manifestations of this complication. Thus, the clinical phenomenon of HE after DSRS in time for a 6-month

observation were detected in 8.6% (6) patients, after the central PSSh in 9.3% (4). Latent form of HE was diagnosed in 27.1% and 27.9%, respectively. In general, in these periods HE was absent in 45 (64.3%) patients after DSRS and 27 (62%) after the central PSSh. In the later periods there was an increase the frequency of clinical HE in patients. In a 6-month period of observation the average CFF after DSRS was $40,6\pm 0,09$ Hz, and after the central PSSh - $40,2\pm 0,1$ Hz, ($P < 0.001$). By one year of observation index improved slightly, reaching $41,2\pm 0,11$ Hz, and $40,9\pm 0,11$ Hz, ($P < 0.001$), respectively. Later CFF values decreased, and against the previous rate in all periods received a significant reduction ($P < 0.05-0.001$) in both groups, the mean values between CFF in terms of more than 1 year is not particularly varied and were not significant ($P > 0.05$). In over 5 years of follow-figure was $38,3\pm 0,13$ Hz after DSRS and $38,5\pm 0,12$ Hz after central PSSh.

Conclusions. In the late period after PSSh frequency of hemorrhagic complications was higher in the DSRS, which causes a selective type of decompression, but lethality against progressive liver failure was higher in patients after central PSSh. However, it was of fundamental importance only in the period of 1 year follow-up. In the future, the overwhelming majority of cases the cause of fatalities was increasing liver failure, and with virtually the same frequency after selective and central options of PSSh. In planning surgery of PSSh, with an assessment of the threat of bleeding from EVG, many important should be given to the severity of HE. One of the objective criteria for assessing the presence and severity of HE is to determine CFF by the «HEPATonorm™ - Analyzer». The device allows to identify a latent form of HE, and also depending on the received original value CFF (before or more than 38 Hz) to determine the risk of the alleged interference and thus the need of conservative therapy to correct this complication of LC.

PROGNOSTIC EVALUATION OF SEVERITY OF LIVER CIRRHOSIS BY MELD SCORE IN PLANNING PORTOSYSTEMIC SHUNTING

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The aim of the study. To prognoses evaluation of severity of liver cirrhosis by MELD (Model for End-Stage Liv-er Disease)score in planning portosystemic shunting.

Materials and methods. To assess the severity and prognosis of liver cirrhosis patient survival after portosystemic shunt (PSSh) system used MELD, which is widely used to determine the order on the waiting list for liver transplantation. Analyzed figures from 32 patients operated on at 2011 and traced for a year after PSSh. The mean age was $30,97\pm 3,12$ years.

Results. In planning PSSh mean value MELD score was $10,19\pm 0,24$ points, while liver transplantation is performed according to the literature with a value of MELD score 15-20. According to conventional guidelines, reevaluation points on a MELD scale for solving the question of optimal timing of the implementation of liver transplantation was necessary 1 per year in 62.5% of patients, and no less than 1 time in 3 months in 37.5%.

Implementation of PSSh in the immediate postoperative period did not result in a significant deterioration of performance in the scale of MELD ($10,19\pm 0,24$ vs $10,94\pm 0,23$ points). During the first year of observation, this value has deteriorated

to $11,79 \pm 0,32$ points ($P < 0,05$), ascertained that the progression of the primary disease process and cause a reduction in one-year survival rate of up to 90.6%. The value of MELD score above 15 on these dates only detected in 15.6% of patients. Stable condition is ascertained in 21 of 32 patients (65.6%) and in 3 cases observed moderate activity cirrhotic process. Progressive liver failure with a high degree of activity (increased levels of bilirubin, increased transaminases, symptomatic hepatic encephalopathy) in the period after 3 and 6 months after surgery was detected in 2 (6.3%) patients. In the 2 cases of observation there has been a bleeding, in one case from EGV when shunt thrombosis occurred, in another case of the stomach erosions in portal gastropathy. Ascites observed in 4 (12.5%) patients, which was associated with the violation of the protein synthetic function of the liver. By increasing hepatic failure after 6 months of PSSh died 1 (3.1%) patient.

Conclusion. The high frequency of bleeding from EGV, in conditions of compensatory reserve of the liver, allows leave surgical interventions for the prevention of hemorrhagic syndrome actual. PSSh remain the method of choice, and with one hand with no possibility for a liver transplant is the only best way to correct PH, on the other hand on the compensatory flow of LC, will reduce the need for radical surgery or delay their implementation.

CLINICAL APPLICATIONS OF COMPUTER TOMOGRAPHY IN DIAGNOSIS OF MALIGNANT TUMORS OF THE NASAL CAVITY AND THE MAXILLARY SINUS

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Introduction. The frequency of malignant tumors of the nose and maxillary sinus are 1 to 4% of all malignant neoplasms. Diagnosis of tumors of this localization is far from perfect and outcomes remain unsatisfactory. More than 90% of these patients are directed to the treatment of 3-4 stages. However, the rate of diagnostic errors by using clinical and radiographic methods of investigation to clarify the boundaries of tumors of the nasal cavity and maxillary sinuses do not decrease reaching 34.8%, while underestimating the spread of tumors found in 31.6%, whereas overdiagnosis in 3.2% of cases

Purpose. To determine the clinical significance of CT in the diagnosis and treatment planning malignancies nose and maxillary sinuses.

Material and Methods. We studied 15 patients with this tumor localization. The control group consisted of 18 patients with inflammation diseases of maxillofacial region. Computer tomography was used in combination with the clinical, radiological and morphological studies. Malignant tumors of the nasal cavity and maxillary sinuses were 15 patients (5 men and 10 women) aged 15 to 65 years. Primary localization of a malignant tumor in the nasal cavity was in 4, maxillary sinus in 8, ethmoidal sinus in 1, in alveolar process of the upper jaw and palate have a solid in 1. 1 patient was failed, because of tumor spread. Before entering the clinic of special treatment for a malignant tumor was performed in 11 of 15 patients, surgery was performed in 4 patients. The incidence of neoplastic lesions consistent with stage II in 4, stage III in 4, stage IV in 6 patients. All patients were subjected to clinical examination including anterior and posterior rhinoscopy, palpation and zones of regional metastasis in the neck. X-ray study consisted of a survey picture of the facial skeleton, X-rays directly, semi-axial and lateral projections, as well as in direct projection tomography. In case of necessity, inside the mouth images and pictures on the right

and left oblique projections, lateral tomograms.

Results. When comparing the results of computer tomography data clinical and radiological examination additional diagnostic information obtained in 9 (60%) of 15 patients. In 2 patients with malignant tumors of the nose and maxillary sinuses more informative appeared X-ray examination, and 4 patients data of different methods of investigation coincided. CT can only clearly see the spread of the tumor to determine the ethmoidal labyrinth group of affected cells. CT is able to accurately detected soft tissue component of the tumor, which occupies the entire maxillary sinus. In the propagation of the tumor in the pterygopalatine and infratemporal fossa in 2 patients in the CT scan revealed the destruction of the back and outer walls of the maxillary sinus and the output of soft tissue component of the tumor beyond. Tumor growth in the infratemporal and middle cranial fossa radiologically, as a rule, are not defined, and the judge it was only possible with the help of computer tomography. Reliability of CT scans in 8 patients was confirmed during surgery, and 1 of them made exenteration of orbit. Thus, using a computer tomography found that clinical relapse tumor has a limited distribution that could not be found in conventional radiography.

Conclusion. Computed tomography is a valuable method in the complex diagnosis of malignant tumors of the nasal cavity and maxillary sinuses, provides additional information on the distribution of cancer. The clinical significance of additional information on the spread of tumors of the upper jaw and nasal cavity is reduced to a choice of the most rational treatment plan. Computed tomography is an important house of preoperative diagnosis of malignant tumors of the nasal cavity of the maxillary sinuses. In 90% of cases observed a complete coincidence with the operating results of imaging findings.

STABILITIES AND MORBIDITIES OF LE FORT I OSTEOTOMY IN USING BIORESORBABLE PLATING SYSTEM

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Aims. 1- To determine morbidities and stability on Le Fort I osteotomy with the use of internal fixation of different materials. **2-** To compare bioresorbable with titanium mini-plates and screws in Le Fort I maxillary osteotomies for evaluation of clinical morbidities and stability.

Materials and methods. Le Fort I osteotomy operation performed on the maxillofacial department of TMA II clinic the period of January 2010 to December 2015. There were 15 women and 23 men patients with the facial fracture bone and fixed up them all both fixation bioresorbable and mini-plates with screws. Simultaneously, identified for the stability and morbidity analysis, respectively. 38 Patients requiring Le Fort I osteotomies from February 2012 to July 2015 were randomly assigned to 2 groups. One group received bioresorbable mini-plate and the other received titanium plate fixation. Stability of the maxilla was determined by serial cephalometric analysis at 2 and 6 weeks, 3, 6 and 12 months post-operatively. Subjective and objective assessment of clinical morbidities and neurosensory functions of the infraorbital nerves were evaluated prospectively.

Results. From the performing Le Fort osteotomies, surgical advancement and impaction were found to be stable procedures, whereas down graft was unpredict-

able. Metal mini-plates provided better stability when compared to wire fixation. Stability data for bioresorbable plate fixation were inadequate to draw any conclusion. The osteotomy complications were 10. The two most common complications in Le Fort I osteotomy were sensory disturbance (30%) and bleeding (22%). Palpability was the commonest morbidity associated with titanium mini-plates whereas broken screws during fixation were associated with bioresorbable systems. There were no differences in intra-operative and post-operative clinical complications between the two fixation materials, although bioresorbable fixation took longer than titanium fixation in Le Fort I osteotomies. Maxillae with bioresorbable fixation were significantly more mobile at the second post-operative week. Bioresorbable plates were initially more easily palpable, but the palpability decreased with time. Titanium plates became significantly palpable at 1 year follow-up period. There was no difference on the neurosensory disturbance in both groups. Maxillae with bioresorbable plate fixation showed significantly more upward displacement from the second to sixth post-operative week. The horizontal and angular relapses were comparable in the 2 groups.

Conclusion. Titanium mini-plate fixation is the gold standard for internal fixation for Le Fort I osteotomy. Complications in Le Fort I osteotomy were not common so as the morbidities related to fixation materials. Maxillae with bioresorbable plate fixation were more mobile and less stable in the vertical plane than those with metal mini-plate fixation initially. However, there was no obvious difference in the long term stability and morbidities between the bioresorbable and titanium plate fixation in Le Fort I osteotomy. Following Le Fort I osteotomies, maxillae with bioresorbable plate fixation will be more mobile and less stable in the vertical plane during the first 6 post-operative weeks. Bioresorbable plates are more palpable at the early post-operative period whereas titanium plates become more palpable in the long term. There is no increase in morbidities with bioresorbable fixation than titanium fixation in Le Fort I osteotomy.

SONOGRAPHY AND MAMMOGRAPHY IN THE DIAGNOSIS OF FIBROCYSTIC BREAST DISEASE

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Actuality. One of the most common manifestations dishormonal disorders in women is fibrocystic breast disease. The incidence of this disease varies from 30 to 50% among of all incidence of breast pathology. Accurate and timely diagnosis of fibro - cystic disease is one of the most challenging problems in modern radiation diagnosis, despite the use and implementation of new technologies and ultrasound mammography. Mammography and sonography made significant changes in the diagnosis of breast pathology. However, diagnostic mammography and sonography opportunities in solving this problem is far from exhausted and are for further study, which determined the relevance of this work.

Purpose of work. To study the efficacy of mammography and sonography possibilities in the diagnosis of fibrocystic breast disease.

Materials and methods. The research was performed on devices Mindray DC and Siemens Mammotom. Research is involve 80 patients. It was observed a group of patients from 70 patients with fibrocystic mastopathy and 10 healthy, applied for

routine inspection of the breast at the age of 35 to 60 years or older.

Results. In a comparative perspective we studied the sensitivity of mammography and sonography in the detection of fibrocystic breast disease. When performing mammograms from 70 women surveyed fibrocystic breast disease was diagnosed in 51, which was (72.8+3.8%). When the ultrasound sonographic examination revealed benign in 67 women (95.7+2.6%). The sensitivity of sonography was higher by 23% in diffuse form of fibrocystic breast disease. Identified on ultrasound cysts do not exceed 20 mm in diameter, their sizes ranged from 10 to 35 mm, and only in one case the cyst has reached 120 mm.

Conclusion: ultrasound is more sensitive in identifying benign breast tumors compared with mammography.

THE INFLUENCE OF DORMICUM AND KETAMINE TO THE AUTONOMIC NERVOUS SYSTEM IN PATIENTS WITH CORONARY HEART DISEASE WITH RECONSTRUCTIVE SURGERY ON CAROTID ARTERIES

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The purpose of the study. To assess the effects of ketamine and dormicum to the autonomic nervous system (ANS) in patients with coronary heart disease (CHD) and different types of autonomic response.

Materials and methods. The study included patients with ischemic heart disease (n=30) who underwent reconstructive surgery on carotid arteries. The median age was $61 \pm 7,0$ years. On the eve of the operation carried out active orthostatic test (AOT) and Matas sample to determine the type of vegetative response. Patients were divided into groups: those with a predominance of the activity of the parasympathetic division of the vegetative nervous system (vago-tonics, n=15) and the sympathetic division (sympathicotonics, n=15). During the active orthostatic test and induction of anesthesia was performed spectral analysis of heart rate variability. For induction of anesthesia used dormicum dose 0.08-0.12 mg/kg, followed by administration of ketamine at a dose of 0.5-0.8 mg/kg.

The results and its discussion. It was revealed that sympatholytic activity of dormicum at sympathicotonics. However dormicum reduced parasympathetic activity at vago-tonics, which clinically manifested by increasing of heart rate to 28-30 strokes more than the original pulse, and mild hypertension. Which contributed with improving of the cerebral perfusion pressure during the compression of the carotid arteries. An effect of ketamine was expressing by the activation of the sympathetic division of the vegetative nervous system.

Conclusions. 1. Dormicum decreases the sympathetic activity at patients with sympathicotonic type of vegetative response. Ketamine increases the sympathetic activity at patients with sympathicotonic type of vegetative response. 2. Dormicum and ketamine reduces parasympathetic activity at patients with vago-tonic type of vegetative response.

CONTINUOUS VERSUS INTERMITTENT ENTERAL FEEDING OF COMATOSE PATIENTS FOLLOWING SEVERE TRAUMATIC BRAIN INJURY

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Severe traumatic brain injury (TBI), defined as head trauma associated with a Glasgow Coma Scale (GCS) score of 3 to 8. Patients with severe TBI are usually intubated and mechanically ventilated; also, these patients need appropriate nutritive support. TBI patients are usually in hypermetabolic, hypercatabolic and hyperglycemic state, with altered G.I. functions. There is evidence suggesting that malnutrition increases mortality rate in TBI patients. Studies documented the superiority of enteral feeding over parenteral nutrition (PN). Use of PN should be limited to contraindications of enteral feeding, as it is associated with complications and an increased mortality. The potential advantages of enteral feeding include stimulation of all gastro-intestinal tract functions, preservation of the immunological gut barrier function and intestinal mucosal integrity, and reduction of infections and septic complications. There are intermittent and continuous enteral feeding protocols each having own advantages and disadvantages

Objectives: to compare continuous and intermittent enteral feeding in comatose patients following severe traumatic brain injury.

Materials and Methods: 68 patients with severe traumatic brain injury were allocated into two groups. In the 1st group patients received intermittent and in the 2nd group continuous enteral feeding. Daily energy expenditure was calculated for patients with isolated head injury as 25–30 kcal/kg and for patients with multiple injuries as 35–50 kcal/kg according to severity and type of co-injuries. Daily energy expenditures were calculated individually by the same expert and all patients received the exact nutritional mixture. During the 14 days of our trial patients' trofologic status, time spent for enteral feeding, prevalence of nosocomial pneumonia and mortality rates were registered and compared in both groups.

Results: on the 14th day weight loss among patients of the 1st group was $2.5 \pm 1.2\%$ and in the 2nd group $5.6 \pm 2.2\%$. During continuous enteral feeding nurses spent 18.6% less time (8 ± 2 min) than in intermittent group. Nosocomial pneumonia occurrence in intermittent group was 41.2% and 35.3% in continuous group. But in intermittent group patients the onset of pneumonia was on average 2 days faster than in continuous group patients. Mortality in intermittent and continuous groups was 38.2% and 31.2% respectively.

Conclusions: trofologic status was similar in both groups. Nosocomial pneumonia prevalence was very similar in both groups, but in intermittent feeding pneumonia started on average two days earlier. Mortality rate was lower in continuous group. Taking into account lower mortality rates and the slower onset of nosocomial pneumonia we recommend continuous enteral feeding of comatose patients following severe TBI.

EFFECT OF ABDOMINAL HERNIA REPAIR ON THE DYNAMIC OF INTRAABDOMINAL PRESSURE AND RESPIRATORY FUNCTION

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Objective. Study of intra-abdominal pressure levels (IAP) and the external respiration function (UAFS) deprived of hernia and their dynamics depending on plastic methods of hernial gate.

Material and methods. The work accounted for 78 patients with postoperative hernia. The average age of the patients were 51 year. The rate of patients were dominated by women - 60%.

Results. Homeostasis distortion of hernia depends on the duration of the infringing. This trend is reflected, and estimating the intra-abdominal pressure. After 6 h from the moment the abridgement of level IAP exceed the reference values by more than 3 times (25.0 1.82 mmHg). Through 24 h of onset, this figure increased more than 4 times and with progression of the disease continued to increase, reaching 37.2 1.5 mm Hg. Install that the USFS is determined by the size of herniorrhaphy and expressed at a rate of more than 10 sm herniorrhaphy. The most significant decline marked by lung capacity (78%), tidal volume (47.2%), minutes of the lungs (31.5%). Study of IAP in the postoperative period showed that for strangulated hernia with bowel resection IAG persists for weeks with the maximum rise in 1-2 days of the postoperative period (4.6 times the norm). Improvement of IAP occurs when deprived of hernia without resection of the bowel, but level Wen it is significantly less than in patients who completed the eyebolt \rightarrow bowel resection (1.6 times). In addition, the level of the agency after surgery depends on the sizes of hernial gate. So, when more than 10 sm aponeurosis of the defect within the first 24 hours after surgery is higher in IAP level 1.6 times than the defect of less than 10 sm. When this normalization of IAP patients with defect of GRA \rightarrow patient hernia gate to 10 sm to 7 days of arrest, and when the defect more than 10 sm to only 10 days. The results of monitoring respiratory function are similar to changes of IAP and the most pronounced when defect herniorrhaphy over 10 sm. So lung capacity displayed at 20.5%, OVF-24.4% to-13.3% ($p < 0.05$) at increasing respiratory rate to 29 in 1 min. The identified deviations seems to be level when performing herniotomy with no \rightarrow stretch plastics. In the light of the foregoing, such kind of operations manual completed 38 patients. Studies have shown that unsatretch endoprosthesis with disadvantaged contributes in early postoperative period general reduction of IAG, compared with such traditional methods in 1.8 times. Thus, one of the methods to improve the results of treatment of postoperative ventral hernias is unstretch hernioplasty, which allows to reduce the level of the Agency and to minimize the frequency of complications associated with the distortion of the external respiration function.

Conclusion. Strangulated hernia occupied fourth place in the structure of urgent surgical diseases. The indicate of lethality and relapses hernias remained high level. Research shows that one of the main roles in the pathogenesis of homeostasis of distortion and possible causes of relapse deprived of postoperative hernia plays increased intra-abdominal pressure, which leads to a deterioration of the external respiration function. These changes can reverse by executing unstretch plastics of the abdominal wall.

THE ROLE OF COMPLEX THERAPY IN OCCURANCE OF POSTOPERATIVE SCLEROSIS OF THE BLADDER NECK

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Treatment of bladder neck sclerosis is an important task of modern urology due to the high prevalence of these diseases especially in elderly people. This issue requires operative procedure to get best result and prognosis. The number of patients with sclerosis of the bladder neck. V.V. Bazayev, A.P. Morozov (1993) note that obstructive pulmonary complications after transurethral resection is from 1.1% to 24.8%.

Purpose. Transurethral resection (TUR) is one of the most common used operation in the benign hyperplastic prosthetic gland disorder. This method has a lot of advantages for both physician and patient such as less invasive, convenient, better outcome and cost effective. We should think and attend after operation rehabilitation pathway in these patients to get better outcome.

Materials and methods. Research was carried out in 60 patients in males aged between 45-65 who have suffered from benign hyperplasia prosthetic gland at the Republic Specialized Center of Urology during 2014-2015. All patients were performed same operation which was transurethral resection because of benign hyperplastic prosthetic gland. We divided operated patients into 2 groups: 1st group patients (30) were applied conventional therapy and 2nd group patients (30) were administrated additionally physiotherapy such as electrophoresis with novocaine, vinpocetine intravenously and aloe extract intramuscularly. Research was based on prospective analyze.

Results. The result of investigation showed that in the 1st group patients rate of complication such as urinary retention after TUR operation were higher than 2nd group (30% and 17%). Furthermore, other complications (bleeding, erectile dysfunction, urinary dysfunction) also less occurred in the 2nd group patients because of above mentioned therapy. Recommended additional procedures roles were depend on improving blood circulation in the operation region by the better oxygen supply and nutrition destiny which leads to normal tissues recovering in the operated zone.

Conclusion. Benign hyperplastic prosthetic gland disease prevalence rate is high among males after 40 years caused by increased enzyme activation (5 alpha reductase). Above estimated therapy strongly recommended to all patients after performing TUR operation in order to improving long term outcomes of this lower urinary tract issue.

PECULIARITY RENAL RESECTION OPERATION IN RENAL CELL CARCINOMA

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Goal and objective. To indicate the role and relevance of renal resection operation in artificial hypothermic condition and to reduce postoperative recurrence.

Materials and methods. During the period 2012-2015 years performed 44 renal resection at the stage of T1a-b. In all patients during the preoperational period carried out standard medical examinations including: ultrasound imaging, multispiral computer tomography (MSCT), excretory excretion, urography, clinical and biochemical analysis of blood and urine.

From 44 patients in 7 patients detected bilaterally renal cancer. From them in 3

cases performed nephrectomy and renal resection and in 3 cases performed bilateral renal resection and in only one case performed renal resection of sole kidney from the lower pole with the size of 12 cm.

All operations carried out in artificial hypothermic condition by using ice with the approximately mobilization and occlusion of renal artery from 30 minute till 2 hours.

By the time of overlapping renal artery during the 10 minute conducted infusion therapy of 15% 200 mannitol. The edge of resection were from the cancer 0.5 cm and limited with sound tissue.

The result of study. By applying above mentioned technology the amount of blood loosing consisted from 100 to 500 millilitre, so it enabled to sharply reduce fatal hemorrhage and complication of renal ischemia.

During the period observation by a specialized oncology clinic, from 44 patients in 12 (27%) patients during the 3 years observation recurrences and metastasis were not detected and in 24 patients during the 2 years observation recurrence detected only in 2% patients.

Conclusion. Our research indicated that, when the size of tumor small or bilaterally renal tumors or when tumor in sole kidney, the role of organ saving operation is incomparable. In order to achieve this result it is vitally important to conduct this operation in artificial hypothermic condition. In run-time observation period, in these patients short-term and long-term results are considerable good compare with nephrectomy.

SURGICAL OUTCOME OF SPONTANEOUS INTRACEREBRAL HEMATOMA THROUGH KEYHOLE CRANIECTOMY

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The goal and objectives. To improve the results of surgery for intracerebral hematomas by introducing to clinical practice the minimally invasive surgery.

Materials and methods: Twenty-two patients with spontaneous intracerebral hematoma of different location were treated surgically by using keyhole craniectomy technique, small craniotomy of 2-2.5 cm diameter. The burr hole widened into craniectomy measuring 2 – 2.5 cm in diameter, over relatively silent area of the cortex and near to the hematoma as possible. Surgical outcome assessed by Glasgow Outcome Score (GOS). Post-operative CT scan was done in all cases.

Results. Good recovery was achieved in 2 cases (10%), moderate disability in 8 cases (42%), 5 patients remain in vegetative state. Good evacuation of hematoma was seen in 15 patients except 6 cases deteriorated by post-operative CT scan.

Summary and conclusions. Intracerebral hematomas secondary to hypertension are found in various locations such as a basal ganglia, brainstem, cerebellum and brain hemispheres. Keyhole craniectomy is less invasive method requiring less operating time and less blood loss. Associated morbidities of craniectomy such as prolonged operative time & more blood loss can be avoided by the keyhole technique.

The edge effect resulting in compression of the brain and the cortical veins along the edges of craniectomy is one of the disadvantages of this procedure.

Surgical evacuation of SICHD through keyhole technique is minimally invasive, safe and can achieve desired result. Patient with a GCS > 9 prior to surgery demonstrate a better outcome with this minimally invasive method.

THE RESULTS OF SURGICAL TREATMENT FOR HIGH-DIFFERENTIATED THYROID CANCER

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Relevance: the Incidence of thyroid cancer (thyroid cancer) in an endemic area of alimentary iodine deficiency occurs relatively more common in regions with iodine sufficiency, since our Republic is in endemic zone, this category requires special attention.

Materials and methods. We have analyzed the results of surgical treatment for thyroid cancer in Tashkent City Oncology Center in Department of head and neck for 2010 - 2013. During the work there were studied 58 patients with thyroid cancer. The age of patients ranged from 18 to 74 years (mean of 48.5 ± 5). Patients female - 45 (77,5%) and 13 male (22.5 per cent). Patients operations were done in a volume of semitrajectory (left, right, depending on the localization process). As criteria of selection was: the verified diagnosis of well-differentiated forms of thyroid cancer, no distant metastases and severe comorbidities.

Results. By Studying the results obtained, we note the following, 58 patients completed the following types of surgery: right semitrajectory the isthmus in 23(39,6%); Right-sided Subtotal semitrajectory with lymph node dissection of cervical lymph nodes in 12(20,7%); left semitrajectory the isthmus in 16(27.6 per cent); Left-sided Subtotal semitrajectory with lymph node dissection of cervical lymph nodes in 6(10,3%); left-sided Subtotal semitrajectory with lymph node dissection paratracheal lymph nodes 1(1.7%).

Morphological examination of the material taken by fine needle aspiration biopsy (TAPB) and in the study of the operational material showed, 44(75,9%) patients of papillary form, while 14(24.1%) follicular form.

Postoperative complications and lethal outcomes were not observed. Tumor recurrence was observed in five patients.

Conclusions. In surgical treatment of thyroid cancer is feasible, the implementation of semitrajectory or Subtotal semitrajectory with simultaneous lymph node dissection in the volume of cervical, paratracheal lymph nodes, which significantly reduces the chances of recurrence.

LAPAROSCOPY IN ACUTE APPENDICITIS IN DIFFERENT TERMS OF PREGNANCY

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Introduction. An actual problem of urgent medicine today are questions of diagnostic and treatment of acute appendicitis in pregnant women. Recently pregnancy was absolute contraindication for laparoscopic interventions mainly with insufficient ideas about effects of carbon dioxide and increased intraabdominal pressure on the developing fetus and woman's organism. At the present time safety of these factors is proved and laparoscope is becoming more foreground in treatment of abdominal pathology during pregnancy. Big experience of planned endovideosurgical interventions, it's advantages at traditional operations and good results of treatment

became backgrounds for implementations new technologies into urgent surgery in different terms of gestation. Though does not exist unified opinion about technical features realization of laparoscopy in different terms of pregnancy.

Aim. To determine technical conditions for safe realization of laparoscopic appendectomy during pregnancy.

Materials and methods. Research group was 75 women who undergone laparoscopic appendectomy. Intervention was made with using complex «Olympus» OTV-SC. General anesthesia was applied. Intraabdominal pressure level was 10-12 mmHg.

Results. In I and II trimesters first trocar 10 mm inserted after insufflation CO₂ by Veress needle under umbilicus. Places for second and third trocars were in left lower quadrant or mesogastrium and in vermiform appendix projection. From end of II and in III trimesters used open method of laparoscopy by Hasson and first trocar inserted in epigastrium in median line or lower and more right from sternum. In III trimester uterus sizes required cautions for formation additional ports in abdominal wall and limited possibilities of holding manipulations in lower and medium quadrants of abdomen. This render influence to technic of realization of appendectomy. In view of enlarged uterus trocars placed closer to right upper quadrant. Tools insertion realized under visual control. Postoperative period in all pregnant women with acute appendicitis who undergone laparoscopy was smooth, without complications, pain syndrome. Complications from abdominal wall and abdomen were absent. All patients were discharged to 4 – 5 day from surgical department or sent to obstetrical department. Laparoscopic appendectomy during pregnancy is safe for woman and fetus due to low invasive. Results of deliveries are: in 68 (90,6%) pregnancy finished with physiological delivery by natural way in term from 37 to 41 weeks. Newborns were with mark by Apgar from 7 to 9 points and with weight from 2750 to 3900. Fetal distress was absent in all cases. Two patients (2,7%) undergone operation by cesarean section by obstetrical indications. Pregnancy is continues for now in 5 (6,7%) woman, pathology of fetus is absent by sonography.

Conclusion. Technical features of laparoscopic appendectomy in pregnant are optimal with conditions of following rules of technical implementation surgery and careful attitude to mother's organism and fetus. Laparoscopic interventions as safe method of surgical treatment of acute appendicitis in pregnant decreases quantity of postoperative complications and has not perceptible negative influence to pregnancy, delivery and newborns condition.

EFFECTIVENESS OF DOCETAXEL IN TREATMENT PATIENTS WITH UNRESECTABLE STOMACH CANCER

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The goal of the study was to examine the effectiveness of docetaxel in patients with unresectable stomach cancer.

Materials and methods. 93 patients with unresectable stomach cancer was included in study. All the patients were randomized into 3 groups according on the treatment regimen.

Results. The first group include patients who had chemotherapy by scheme PP (cisplatin 100 mg/m² in a day, 5-Fluorouracil 1000 mg/m² 1-5 hours), patients in

the second group took combined chemotherapy by scheme (Docetaxel 75 mg/m² in a day 1+Cisplatin 75 mg/m² in a day 1), and last group (n=32) include combined scheme TPP (Docetaxel 75 mg/m² day 1+Cisplatin 75 mg/m² of 1- Day+5-Fluorouracil 750 mg/m² per day 1-5). Treatment efficacy was evaluated on the following criteria: objective effect, the median duration of remission. Objective effect was in the study groups appropriately 22.6%, 36.7% and 56.3%. The median duration of remission in these groups was 4.2 months. 6.0 months. 7.9 months, respectively.

Conclusion: including docetaxel in the treatment of patients with unresectable stomach cancer has more advantages than other schemes. This gives grounds to recommend a combination with docetaxel for use in clinical practice in the treatment of this disease.

OPERATIVE TREATMENT OF PATIENTS WITH UNILATERAL IMPALPABLE TESTES

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Objective. Undescended testis (UDT) is one of the most common congenital abnormalities of the genitourinary system in young boys. Approximately 1-2% of boys at the age of 1 year have a undescended testis, the disorder being unilateral in about 90% of cases and bilateral in about 10%, depending on the clinical series. About 20% of undescended testis are nonpalpable. The testis can be located in the abdomen in some boys, but it might have been pushed into the upper inguinal canal: this disorder is termed 'peeping testis'. In about half of the cases of nonpalpable testis, a testis is located in the abdominal cavity; the remainder are atrophic, either secondary to an antenatal torsion in utero or agenesis.

Materials and Methods. All patients with cryptorchidism who underwent their first orchiopexy during the time period 2010 to 2014 were included in the study. Out of the 110 operated undescended testes, 94 (90%) had an anatomically successful final result. A total of five patients had not been followed up by the time of data collection and the results of their surgery remain unknown.

Results. A total of 97 patients with 110 undescended testes were operate. Out of these, 51 testes (48%) were palpable before surgery. The cryptorchidism was bilateral in 25 patients (26%). Out of the 110 undescended testes, 94 (90%) testes were successfully brought down into the scrotum at first surgery. In two cases (1, 9%), the testicle was found to be missing at the operation. One perioperative complication occurred, where the vas deferens was accidentally cut during the procedure. Postoperative complications occurred in two patients. One of them searched medical treatment four days after the surgery due to a wound infection. The infection was successfully treated and no further complications followed. Another patient experienced severe pain in his right groin six weeks after surgery and had to be reoperated acutely. The reoperation was successful and the patient did not have any further complications. A total of 11 patients (10%) had other medical conditions or anomalies in addition to their cryptorchidism, where the most common was phimosis followed by hypospadias. The first surgery was anatomically successful in nine (82%) of these patients and two patients had a successful result after one reoperation. The poorest results were seen when the first operation was performed at the age of five years, where the surgery was successful in 57% of the cases.

Conclusions. The recommendations that boys with cryptorchidism should be

operated between the ages of five to ten years are not followed. These findings suggest that this is a factor of potential improvement and it is desirable that action is taken to improve adherence to current guidelines.

PROPHYLAXIS OF VENOUS THROMBOEMBOLISM IN FRACTURES OF LONG BONES OF THE LOWER EXTREMITIES

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Abstract. Deep vein thrombosis (DVT) of the lower extremities and thromboembolic complications (TC) is found in the practice of doctors of different specialties as a complication of the underlying disease or first manifested on the background of the external well-being. One of the most dangerous, immediately life-threatening complications of DVT of the lower extremities is a pulmonary embolism (PE). Prevention and adequate treatment of DVT of the lower extremities are a topical problem of traumatology and orthopedics, including patients with long bone fractures [Bernakeevich AI. 2003]. Complex prophylaxis latter was mainly aimed at accelerating the venous blood flow (nonspecific prophylaxis) and hemostasis normalization (specific prophylaxis).

Aim of the study. To compare the efficacy of nonspecific and specific medical prophylaxis of DVT of the lower extremities and thromboembolic complications (TC).

Materials and methods. The study is based on analysis of the results of complex examination and treatment of 51 patients (32 men and 19 women) with closed fractures of the long bones of the lower limb between the ages of 18 and 65 admitted to the 2nd surgical intensive care unit of Clinic II of TMA. Depending on the methods of prevention of DVT of the lower extremities and a feasibility study, the patients were divided into 2 groups. In group 1 (n=25) non-specific prevention was carried out, it included early mobilization of patients, medical physical examinations (physical therapy), foot-binding, the use of elastic medical stockings, to increase intravenous fluid infusions. In group 2 (n=26) specific drug prevention with Clexane (enoxaparine) 0,4 ml-40 mg once daily subcutaneously was used. The criteria for the effectiveness of preventive measures were: 1) absence of phlebitis and thrombotic complications, confirmed by clinical and laboratory data as well as diagnostic tool data; 2) the absence of complications proper preventive measures or early post-traumatic intra and postoperative bleeding, infectious complications, instability of osteosynthesis and others.

Results. When using a non-specific prevention of DVT of the lower extremities and a feasibility study without complications were treated 22 (88%) patients 25 recommended. Phlebothrombosis developed in 3 patients (12%), PE and lethality are not registered. In the subgroup of Clexane results were obtained for the prevention of DVT and a thromboembolic complications (TC). The frequency of venous thrombosis hip and thigh was 7.7% (2 of 26 patients). PE is not registered. In our observation at 5.0% of patients treated with Clexane, hemorrhagic complications in the form of moderately severe bruising in the area of operation or paraphragmental area was marked. None of the patients had intraoperative and postoperative bleeding, which may require removal of sutures, wound revision and other hemostatic events.

Conclusions. The use of specific therapy with the use of low molecular weight heparin Clexane (enoxaparine) is the most effective method of preventing DVT of the lower extremities and a thromboembolic complications (TC) for fractures of the long bones.

PREVENTION OF POSTOPERATIVE DEEP VENOUS THROMBOSIS OF LOWER EXTREMITIES

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Aims: to improve the results of the prevention and treatment of postoperative deep venous thrombosis of lower extremities by exploring the etiology and pathogenesis, differential treatment and improving existing methods of combating this disease. A new method for the surgical treatment of deep vein thrombosis and to assess its effectiveness. To evaluate the effectiveness and the degree of safety of unfractionated heparin in a fixed (15000 IU per day) and individually selected doses of dextran products and low molecular weight heparin for the prevention of postoperative deep vein thrombosis in patients with acute surgical abdominal pathology

Materials and methods. The study was conducted on the basis of the Surgical Intensive Care, and Surgical Intensive Care 1 2 2 clinical TMA. The subjects were divided into two groups depending on the anticoagulant used. Inspection and monitoring of patients was conducted with the use of laboratory analysis and identification of patients with potential risk of DVT, which were included in the study. Re-examination was carried out for 2 hours and 5 patients with subsequent follow-up examination after discharge, given that the clinical signs of DVT occur through the 1-40 (on average - $12,8 \pm 5,4$) days after the surgery produced.

Summary and Results. On the basis of these studies found that not operated equally at risk of thrombotic, and, consequently, embolic complications. Depending on the patient's age, duration of surgery and predisposing conditions (particularly the presence of chronic venous insufficiency of the lower extremities, or - DVT and / or pulmonary embolism in history), four groups of patients: low (I), medium (II), high (III) and very high (IV) the risk of thrombotic and embolic complications

Conclusions: **1.** The frequency of deep vein thrombosis of the lower extremities in patients undergoing intervention on the organs of the abdomen, pelvis and retroperitoneal space without the use of specific prevention, averaging 33.6%. **2.** Deep vein thrombosis of the lower limbs occurs against a background of pre- and postoperative hypercoagulable shift in the hemostatic system, and reduce antithrombin fibrinolytic activity of blood. The depth and frequency of hemostatic disorders are correlated with selected risk groups. **3.** The use of unfractionated heparin in a fixed dose (15 000 units per day for 7-10 days) in patients with 2-4 risk groups who underwent surgery on the abdominal organs for acute surgical pathology, reduces the incidence of deep vein thrombosis of the lower extremities in 4 1 times, and postoperative mortality from pulmonary embolism - 7 times. In patients with very high risk of thrombotic complications more effectively the use of heparin in individually selected dose. **4.** Use of low molecular weight heparin reduces the number of side effects of drug prophylaxis of deep vein thrombosis. Antithrombin III, the application of low molecular weight heparin is reduced to a lesser extent than the appointment unfractionated heparin.

ENDOSCOPIC NOSEBILIAR DRAINAGE IN COMPLICATED FORMS OF CHOLELITHIASIS

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Objective. One of the methods of treatment of obstructive jaundice and cholangitis is nosebiliar drainage, consisting in endoscopic installed in the common bile duct above the area of the outer drainage obstruction. In the literature, there is still no consensus on the indications for nosebiliar drainage (NBD) after EPST with obstructive jaundice of benign etiology.

Material and methods. NBD was performed in all cases, it is impossible to eliminate the danger or re-obstruction of common bile duct. Number of patients examined NBD performed in 23 patients with obstructive jaundice and purulent cholangitis. Men were 8 -15 women. The average age of patients was 65 years.

NBD in our research was used not only for therapeutic purposes for aspiration of bile and rehabilitation of the biliary tract with symptoms of suppurative cholangitis, but also to prevent re-obturation flow left after stumbling EPST. However, a well-known method is not always NBD prevents re-obturation hepaticocholedochus concrement, and in such situations, NBD does not provide adequate decompression of the biliary tract. This is due to the high viscosity of bile drained, insufficient diameter and a large length of the catheter to overcome that high hydrostatic pressure is required. In order to reliably prevent re-obturation hepaticocholedochus be permanently stone spiral catheter end was developed after EPST us in the form of "hourglass".

We have proposed a new way nosebiliar drainage was done in 23 patients and received a patent for the invention. The criterion for adequate drainage function we considered the normalization of clinical and biochemical parameters and radiological monitoring data, which is repeated every 2-3 days. The best is the passage of bile into the duodenum by drainage. If for nosebiliar catheter flowing too much bile, we returned for its nosejejunal probe to normalize electrolyte balance and digestion.

PERSONALIZED ADJUVANT CHEMOTHERAPY IN THE COMBINED TREATMENT OF NON-SMALL CELL LUNG CANCER

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Results of surgical treatment of III stage non-small cell lung cancer (NSCLC) remain unsatisfactory, 5 year survival rate is only 19-24%, and used chemotherapy does not provide a significant increase in survival (Trahtenberg A.H., 2012; Jumov E.L., 2014). The sensitivity of tumor cells to separate chemotherapeutic drugs is determined by monoresistance genes. Lung cancer is characterized by monoresistance genes such as ABCC5, RRM1, ERCC1, TOP1, TOP2a, TUBB3 and TYMS. The expression of these biomarkers in lung tumor tissue is important to consider for personalizing drug therapy (Wei C.H., 2013; Lan, J., 2014).

The purpose of research - to study the effectiveness of the combined treatment of NSCLC with neoadjuvant chemotherapy vinorelbine / carboplatin, radical surgery

and personalized adjuvant chemotherapy.

Material and methods. The results of treatment of 58 patients with stage III non-small cell lung cancer, treated in the thoracoabdominal department Tomsk Cancer Research Institute were submitted.

Patients were divided into two groups. The study group consisted of 22 patients who underwent combined treatment with an individualized approach to adjuvant chemotherapy. The control group consisted of 36 patients who underwent combined treatment without determining the sensitivity of tumors to chemotherapy drugs and without personalize treatment.

Patients in both groups were carried out 2 courses of preoperative chemotherapy vinorelbine \ carboplatin and perform radical surgery. Patients of the main group were carried out 3 postoperative chemotherapy course based on a combination of two of anticancer drugs (based on gene expression ABCC5, RRM1, ERCC1, BRCA1, TOP1, TOP2a, TUBB3 and TYMS): vinorelbine; carboplatin; gemcitabine; irinotecan; doxorubicin and paclitaxel. Patients of the control group, postoperative chemotherapy were carried out vinorelbine \ carboplatin without determining the expression levels of monoresistance genes.

Results of the study. Courses chemotherapy both groups tolerated satisfactorily with observed complications of I-II degree, differences in study groups have not been identified. Postoperative complications were comparable in both groups and the differences were not statistically significant ($p > 0,05$). We tracked patient outcomes for one year. The main group of disease progression was observed in 2 ($9,1 \pm 1,9\%$) cases, patients in the control group - in 13 ($36,1 \pm 2,4\%$) cases. Thus, in patients with personalized postoperative observed 27% increase in the one-year relapse-free period ($\chi^2 = 3,22$; $p = 0.073$).

Conclusions. The proposed combined treatment does not cause serious complications and satisfactorily tolerated by patients with stage III NSCLC. Preliminary data show that the efficiency of the combined treatment carried out by a personalized approach to the appointment of adjuvant chemotherapy. It continues the selection of patients to the main group.

THE ROLE OF AUTO-OSTEOPLASTY IN TREATMENT OF PSEUDARTHROSIS ON LONG BONE

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False joint usually occurs after trauma or surgery, which mostly affects adults. According to literature (Arora R., Lutz M., Zimmermann R., Krappinger D., 2010, Donati O. F., Zane M., Nagy L., 2011), treatment of pseudoarthrosis on long bone, one of the actual problems in traumatology and orthopedics, leads to disability in 30 % of cases. Reasons of pseudoarthrosis are incorrect selection of osteosynthesis methods and operation tactics; early stopping of immobilization; hereditary factors; lack of individual approach etc. (Kudiyashev A.L., Gubochkin N.G., 2008, Capo J. T., Orillaza N.S. Jr., Slade J.F., 2009).

Objective of investigation is to improve results of long bone pseudoarthrosis treatment with the help of different reconstructive-reductive operation methodologies.

During the material and method of investigation, over the period of 2010 to 2014, we studied the results of 20 patients' treatment. These patients were operated in the department of traumatology and orthopedic 2nd clinic of Tashkent Med-

ical Academy. 13 (65%) patients of them were performed an operation by osseous autoplast, taken from anterior surfaces proximal metaphyseal of tibial bone. 7 (35%) patients were operated without osseous autoplast. Herewith, the following results were obtained: among 20 patients, osseous autoplasty, taken from anterior surfaces proximal metaphyseal of tibial bone, along with osteosynthesis was used for 13 patients that was observed 100% consolidation; only osteosynthesis without osseous autoplast was used for 7 patients. However, consolidations of bone tissue did not happen for 3 patients out of 7 patients. Osteo-autoplasty with its quality maintains the leading position among other osteoplastic materials, which explains the lack of incompatibility of interstitial cells.

The success of the operation depends on the quality of the precision accuracy in taking autograft and its mutual adaptation of recipient. Variety of methods and apparatus, used to improve the quality of surgical interventions in the long bones of the limbs, are preferred in providing optimal, mechanical and biological conditions of reparative osteogenesis.

During the treatment of patients with pseudoarthrosis on long bone with auto-osteoplasty transplant taken from proximal metaphysis of tibial bone i.e., a red bone marrow is existed within metaphyseal area. The transplants are stacked intramedullary and extra medullary of the long bone. Together with this, contained elements of bone marrow, which is possibly consisted of stem cells, fibroblasts, osteoblasts and biological active substance, stimulate regeneration of bone tissue. Meaning of stem cells properties are considered one of the most important factors in the process of regeneration. The following stem cells appear in embryonic period that can be turned into any tissue of organs. Moreover, these cells optimize and improve reparative regeneration.

More opportunities in receiving positive results and reducing the disability among the patients are created through the methods mentioned above.

SUPPLEMENTARY MOTOR AREA ACTIVATION IN PATIENTS WITH FRONTAL LOBE GLIOMAS

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Objective. Some patients who undergo surgical resection of portions of the supplementary motor area (SMA) have severe postoperative motor and language deficits, whereas others have no deficits. We tested the hypothesis that in some patients with lesions affecting the SMA, the contralateral SMA exhibits some of the activation normally associated with the ipsilateral SMA.

Materials and Methods. Functional MR imaging studies in seven healthy volunteers and 19 patients with frontal lobe tumors or arteriovenous malformations were reviewed retrospectively. The hemisphere in which the SMA activation predominated was tabulated for right and left motor tasks. The relative hemispheric dominance in the SMA for the right and left motor tasks was compared in the healthy and patient groups and with the location of the lesion in the patient group.

Results. None of the control subjects performing a right hand motor task activated predominantly the right SMA. Fifty percent of the patients with lesions overlapping the left SMA performing the right motor task activated predominantly the right SMA. Fifty-seven percent of control subjects performing the left hand motor task activated the left

SMA predominantly. One hundred percent of patients with lesions overlapping the right frontal SMA performing the left motor task activated the left SMA predominantly. Differences between patients and controls were statistically significant.

Conclusion A lesion that contacts or overlaps the SMA is associated with an increased functional MR imaging response within the contralateral SMA. The supplementary motor area (SMA) is thought to play a key role in initiation and control of motor and speech functions (1, 2) Injury to the SMA during surgical excision of medial frontal lobe lesions may also result in severe motor or speech deficits (3–5). These deficits are transient and most patients fully recover from SMA injuries. The closer the lesion to the SMA, the greater is the risk of postoperative deficit from surgical resection (6). Some patients in whom the SMA is surgically resected do not demonstrate postoperative deficits. One possible explanation is that when tumors or vascular malformations affect the SMA, the contralateral SMA assumes some of its normal function.

VALUE CONCENTRATIONS OF THE COENZYME Q10 AND ANTIOXIDANT STATUS OF BREAST CANCER

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Objectives. An increasing amount of experimental and epidemiological evidence implicates the involvement of oxygen derived radicals in the pathogenesis of cancer development. Oxygen derived radicals are able to cause damage to membranes, mitochondria, and macromolecules including proteins, lipids and DNA. Accumulation of DNA damages has been suggested to contribute to carcinogenesis. It would, therefore, be advantageous to pinpoint the effects of oxygen derived radicals in cancer development.

Materials and Methods. In the present study, we investigated the relationship between oxidative stress and breast cancer development in tissue level. Breast cancer is the most common malignant disease in Western and Eastern women. Twenty-one breast cancer patients, who underwent radical mastectomy and diagnosed with infiltrative ductal carcinoma, were used in the study. We determined coenzyme Q10 (Q) concentrations, antioxidant enzyme activities (mitochondrial and total superoxide dismutase (SOD), glutathione peroxidase (GSH-Px), catalase), and malondialdehyde (MDA) levels in tumor and surrounding tumor-free tissues.

Results: in tumor tissues significantly decreased as compared to the surrounding normal tissues ($p < 0.001$). Higher MDA levels were observed in tumor tissues than noncancerous tissues ($p < 0.001$). The activities of MnSOD, total SOD, GSH-Px and catalase in tumor tissues significantly increased ($p < 0.001$) compared to the controls.

Conclusion. These findings may support that reactive oxygen species increased in malignant cells, and may cause overexpression of antioxidant enzymes and the consumption of coenzyme Q10. Increased antioxidant enzyme activities may be related with the susceptibility of cells to carcinogenic agents and the response of tumor cells to the chemotherapeutic agents. Administration of coenzyme Q10 by nutrition may induce the protective effect of coenzyme Q10 on breast tissue.

FEATURES LAPAROSCOPIC HERNIA REPAIR IN EMERGENCY SURGERY

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In recent years in the treatment of inguinal hernias are increasingly used laparoscopic techniques. However, the possibility of endosurgical methods in emergency surgery remains understudied the practical side of surgery.

In this connection, the aim of our study was to determine the adequacy of the treatment endovideosurgery strangulated inguinal hernias.

Material and methods. In the department of emergency surgery 2-clinic of TMA from 2010 to 2015, it has accumulated enough experience of laparoscopic treatment of inguinal hernias - we performed 152 laparoscopic hernioplasty in 108 patients in a planned manner, and in strangulated hernia. Laparoscopic hernia repair performed 59 patients (38 men and 19 women) with strangulated inguinal hernias. The age of patients ranged from 18 to 62 years. When selecting patients had certain criteria: So, at the beginning of the infringement more than 3 hours; presence of comorbidities is a contraindication to general anesthesia; scarring on the ground floor of the abdomen were contraindications for laparoscopic hernia repair performance. The first trocar was introduced for the optics of the navel, through which the abdominal cavity insufflating carbon dioxide, examined the abdominal cavity. Then enter the two trocar in the right and left iliac region in the midclavicular lines. After reduction of hernia contents carefully examined and evaluated their viability. Also, be sure to inspect the hernial ring. At the same time for all patients was determined by swelling of tissues in the deep inguinal ring and expansion of testicular veins due to compression of them in the hernial ring. Hernia repair performed by the usual method - transabdominal preperitoneal (TAPP) hernia repair using polypropylene mesh which was fixed endoherniostapler.

Results and Discussion: The average time of laparoscopic surgery for strangulated inguinal hernia was $58,2 \pm 4,5$ minutes. In identifying the hernia defect from the opposite side after reduction strangulated bodies perform bilateral endoscopic hernia repair, the average duration of which was $35,3 \pm 4,7$ minutes. In most cases ($n = 33$) there was a spontaneous reduction of strangulated organ to the abdomen at the induction of anesthesia, the rest ($n = 26$) was determined visually strangulated organ and the possibility of endoscopic reduction. After that atraumatic clamps to carry out "soft" traction and oscillation strangulated body was recovered from the hernia sac under visual control. With respect to the infringement of a long segment of intestine or strands of the greater omentum was performed alternating grip and traction of the hernia contents in the direction of the inguinal canal towards the abdomen. With difficulty reposition Assistant exercised "producing pressure," the contents of the hernia sac from the scrotum. Laparoscopy allowed all patients to determine the disadvantaged organs, including the cases of spontaneous reduction. Lessons from infringing ring bodies were swollen, dark-cherry color, often with petechiae. The contents of the hernia sac in 37 (62.7%) cases were the hinges and wall of the small intestine, a strand of omentum (32.3%). In 17 (28.8%) cases in the inguinal canal at the same time to undermine the greater omentum and bowel loop.

To speed up the recovery of functions in the bowel loops 7 (11.8%) cases, through one of the trocars was performed novocaine blockade of the root of the mesentery endoscopic needle. In all cases infringement bodies found viable. In 9 cases when viewed from the front of the abdominal wall inside detected neobliterirovannye inguinal ring with the contralateral side, previously not to give clinical manifestations. In all cases, made TAPP. Intraoperative and postoperative complications were observed. In one case reduction strangulated hernia proved technically impossible, and therefore resorted to conversion. After surgery, the patient is discharged home from the hospital on the 4th day. Inguinal hernia recurrences were observed.

Thus, laparoscopy, enjoying all the benefits of minimally invasive surgery is feasible and justified in the treatment of strangulated inguinal hernia, as it provides a good visualization of internal organs and inguinal regions, in most cases, allows a reduction infringe bodies to evaluate their viability, and to identify and remedy the defect imperforate deep inguinal ring with the contralateral side.

MODERN VIEW OF ECONOMICAL AMPUTATIONS ON DIABETIC FOOT IN PATIENTS WITH DIABETES

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The syndrome of diabetic foot (SDF) in patients with diabetes concerns one of the heaviest complications in a structure of various complications of diabetes. According to literature, complication develops in average 5-15% of cases and occupies 3rd -4th place among other purulent pathologies of soft tissue (G.R. Galstyan, 2005; P.Cavanagh, 2002).

Importance of a considered problem caused by steady growth of SDF in the general structure of a diabetes and high weight damages of soft tissues of lower limbs. In this connection we have laid down the following goal.

Purpose. To develop, optimise an algorithm of diagnostics and purposeful conservative treatment, to choose a saving operative intervention in patients with purulent-necrotic forms of SDF.

Materials and research methods. A research material was the data of results of treatment - 185 (100%) patients in total with a diabetes mellitus (DM) complicated by diabetic foot (DF) who were treated at the №1st Tashkent City Clinical Hospital between 2011 - 2014 years. 109 (59%) of them were men and 76 (41%) - were women. Age of patients varied from 45 to 78 years. From total in 158 (85,4%) of cases patients underwent operation: men - 91 (57,59%), women-67 (42,4%) and rest of have been treated conservatively.

All patients with SDF volume of examinations and treatment has been carried out under the standard scheme with the obligatory accounting of a dominated pathology.

During treatment we made advance tactics of treatment of the soft tissues with DF which was based on two indicators – patients condition severity and heaviness of damage of soft tissue. In this situation the basic moment was stabilization of damages to the early period of a diabetes.

On admission severity of patients condition with ulcerative purulo - necrotic complications and it's relapse was a major factor for a choice of adequate conservative therapy and perform early economical operation. In this connection, in clinic we have

developed tactics of early purposeful conservative therapy with the subsequent surgical treatment based on estimation ulcerative purulo - necrotic complications of DF. Conservative therapy includes medicamentous therapy depending on form of DF: a) neuroischemic form – compensation of ischemia, antibiotic therapy, cytokines disbalance correction, antioxidant therapy; b) neuropathic form - antibiotic therapy, cytokines disbalance correction, antioxidant therapy, neurotrophic therapy.

Advantages of our advanced economical surgery from traditional (amputation by method Pirogov, Saim) depending on a stage of organic affection and indication for amputation are different, one of them is myoplastic amputation at the level of upper third of shin since at this kind of amputation blood supply of stump remains as adequate, muscular tissue perfusion goes up, raises stump functionality.

Results of research. Thus, the purposeful conservative therapy with consecutive economical operation for lower extremities in patients with SDF gives a chance to preserve anatomic functionality: blood supply of amputation stump with enhance of muscular tissue perfusion, and also its further prosthetics.

Conclusion. To summarize, minimally invasiveness of a method to soft tissue allows patients to achieve early rehabilitation. Organ preserving operations allow mobilization of patient on 10-14 day after operation which significantly reduced risk of various hypostatic complications.

THE PLACE OF SPECIFIC TUMOR MARKERS IN MONITORING THE TREATMENT OF TUMORS OF THE REPRODUCTIVE SYSTEM

Sheraliyeva S.J., Atakhanova N.E., Kakhkharov A.J.

Tashkent medical academy

Objective. Study the role of specific markers of tumor, in monitoring the treatment of malignant tumors of the reproductive system (TRS).

Material and Methods. The tumor markers were studied in 84 patients with (TRS): 37 (45%) - breast cancer, 47 (56%) - ovarian cancer in the stage T1-3N0-1 M0, who has treated at Tashkent Oncology Clinic. The level of the oncomarkers such CA-125, CA 15-3, CEA and AFP were studied before and after combined treatment. Depending on the stage of the disease, all patients were performed: neoadjuvant chemotherapy+radical surgery+adjuvant chemotherapy.

Results: the results of analysis showed that in the beginning part of the therapeutic measures in patients with breast cancer had increased levels of CA 15-3 in 32 (87.5%) patients, CEA in 19 (51%) and the AFP in 13 (35%). In addition, the greatest degree of increase was in tumor marker - CA 15-3, and average of $97 \pm 0,4 \text{ Ed/ml}$. In contrast, AFP and CEA in breast cancer was initially increased to an average of 70% and 53% respectively of the allowable level.

All patients (100%) with ovarian cancer have high level of CA-125 before the treatment period, which is seven times more from norm: $27,9 \pm 0,9 \text{ Ed/mL}$ AFP in 35 (75%) patients and $65 \pm 0,4 \text{ ng/ml}$ of CEA in 42 (88.5%) $38 \pm 0,5 \text{ Ed/ml}$.

After combined specific therapy, the level of all tumor marker was decreased in compared to baseline. Thus, in breast cancer the level of CA 15-3 was in normal degree ($25 \pm 0,2 \text{ Ed/ml}$) while in ovarian cancer this rate decreased to $44 \pm 0,4 \text{ Ed/ml}$ in the study group. This rates are similar to indicators such AFP and CEA.

Therefore, conducted analysis shows the dependence of expression of CA 15-3, CA-125 and CEA in TRS. Determine the level of CA 15-3, and CA-125 is specificity is appropriate for monitoring therapeutic interventions in this patients.

IMPORTANCE OF SPECIFIC TUMOR MARKERS IN MONITORING OF TREATMENT AND DIAGNOSIS OF DIFFERENT STAGES OF BREAST CANCER

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Actuality. Tumor markers play significant role in early diagnostics and evaluation of efficiency of breast cancer treatment. Tumor markers are used to detect, diagnose and manage some types of cancer. Although an elevated level of a tumor marker may suggest the presence of cancer, this is not enough to diagnose cancer. Tumor markers may also be measured periodically during cancer therapy. Decreasing of the marker level or returning to the marker's normal level may indicate that the cancer is responding to treatment, whereas no change or increasing may indicate that the cancer is not responding. Tumor markers may also be useful after treatment ending to check of recurrence.

The purpose of the research. Assessment of tumor markers in monitoring of breast cancer after complex and combine treatment. To study the role of tumor markers in different stages of breast cancer.

Materials and methods. Retrospective analysis of 45 patients with breast cancer, who were treated in National scientific cancer center and Tashkent City Oncology center in breast cancer unit on the period from September 2010 to August 2015 was undergone. 20 (44,4%) patients were at the age of 19-45, 19(42,3%) patients at the age of 46-60 and 6 (13,2%) patients above the age of 60. The average age of patients was $48,5 \pm 0,2$. All patients with breast cancer were divided by the age, classification of TNM, tumor localization, stages scheme of treatment and analysis of tumor markers (CEA, CA 125 ва CA 15-3) before and after treatment.

Results of the research. The median level of tumor markers of 8 (17,8%) patients in stage I-IIA stage before treatment was CA 15-3 $56 \pm 0,5$ ED/ml; CEA $16 \pm 0,3$ ng/ml; CA 125 $49,8 \pm 0,6$ ED/ml and after treatment: CA 15-3 $21 \pm 0,7$ ED/ml; CEA $6,8 \pm 0,5$ ng/ml; CA 125 $31 \pm 0,2$ ED/ml. The median level of tumor markers of 13 (28,9%) patients in stage IIB stage before treatment: CA 15-3 $79 \pm 0,5$ ED/ml; CEA $19 \pm 0,9$ ng/ml; CA 125 $48,4 \pm 0,5$ ED/ml and after treatment: CA 15-3 $30 \pm 0,3$ ED/ml; CEA $8,0 \pm 0,7$ ng/ml; CA 125 $28 \pm 0,5$ ED/ml. The median level of tumor markers of 17 (37,8%) patients in stage III stage before treatment: CA 15-3 $170 \pm 0,7$ ED/ml; CEA $65 \pm 0,3$ ng/ml; CA 125 $107,8 \pm 0,3$ ED/ml and after treatment: CA 15-3 $79,5 \pm 0,5$ ED/ml; CEA $38 \pm 0,6$ ng/ml; CA 125 $46 \pm 0,4$ ED/ml. The median level of tumor markers of 7(15,5%) patients in stage IV stage before treatment: CA 15-3 $332 \pm 0,4$ ED/ml; CEA $179 \pm 0,7$ ng/ml; CA 125 $157,5 \pm 0,3$ ED/ml and after treatment: CA 15-3 $220 \pm 0,7$ ED/ml; CEA $151 \pm 0,3$ ng/ml; CA 125 $158 \pm 0,5$ ED/ml.

Summary. In II stage the level of tumor markers was changed after the treatment. In III and IV stage the level of tumor markers was high, there not changes after the treatment. We can conclude that tumor markers are useful in monitoring of breast cancer treatment only in II stage.

THE PLACE OF SPECIFIC TUMOR MARKERS IN MONITORING THE TREATMENT OF TUMORS OF THE REPRODUCTIVE SYSTEM

Sheraliyeva S.J., Atakhanova N.E., Kakhkharov A.J.

Tashkent medical academy

Objective. Study the role of specific markers of tumor, in monitoring the treatment of malignant tumors of the reproductive system (TRS).

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Results: the results of analysis showed that in the beginning part of the therapeutic measures in patients with breast cancer had increased levels of CA 15-3 in 32 (87.5%) patients, CEA in 19 (51%) and the AFP in 13 (35%). In addition, the greatest degree of increase was in tumor marker - CA 15-3, and average of $97 \pm 0,4 \text{ Ed/ml}$. In contrast, AFP and CEA in breast cancer was initially increased to an average of 70% and 53% respectively of the allowable level.

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Therefore, conducted analysis shows the dependence of expression of CA 15-3, CA-125 and CEA in TRS. Determine the level of CA 15-3, and CA-125 is specificity is appropriate for monitoring therapeutic interventions in this patients.

FEATURES OF CRANIOCEREBRAL HYPOTHERMIA IN PATIENTS WITH ACUTE CEREBROVASCULAR INSUFFICIENCY

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Stroke is a life-threatening event in which part of the brain stops functioning properly, because it either does not receive blood and oxygen or it is damaged by bleeding from a ruptured blood vessel. Interventions to reduce temperature may protect brain tissue from damage during stroke. Increased body temperatures are common in patients with acute stroke and are associated with poor outcome. In animal models of focal cerebral ischaemia, temperature-lowering therapy reduces infarct volume. In patients with acute stroke, lowering temperature may therefore improve outcome.

Research objectives. To determine the effect of cranio-cerebral hypothermia (CCH) for patients with acute stroke and its' influence on mortality and long-term functional outcome complications.

Materials and methods. The study was conducted in the Intensive Care Units (ICU) of II clinics of TMA. 50 patients were observed from April 2013 to September 2015. 50 patients with acute stroke were divided into a normothermia control

group (n=25) and a CCH group (n=25), whose brain temperature was maintained at 33-35 degrees C for 3 days using a combination of head and neck cooling. In most cases, the victims were unconscious. All the victims of the admissions office were transferred to the intensive care unit as soon as possible. In the ICU they were provided with central venous catheterization, tracheal intubation for adequate ventilation and oxygenation, hemodynamic monitoring, biochemical research, parallel to all procedures started CCH. Indication for hypothermia included the following symptoms: coma, increased muscle tone, breathing rhythm disturbance, marked tachycardia (120-130 beats/min), hemodynamic instability and high temperature. Hypothermia continued from 24 hours to 5 days and stopped when the general condition of patients was improved performance of vital body functions (breathing, hemodynamic parameters, body temperature) were stabilized.

Main results. We present here the results of a study in which noninvasive selective brain cooling (SBC) was achieved using a head cap and neckband. Revealed the positive effect of hypothermia on neurological outcome (43% versus 28% in the control group) and mortality (32% versus 66%, respectively). At 24, 48 and 72h after stroke, the mean intracranial pressure (ICP) values of the patients who underwent CCH were lower than those of the normothermia controls (19.14+/-2.33, 19.72+/-1.73 and 17.29+/-2.07 mmHg, versus 23.41+/-2.51, 20.97+/-1.86, and 20.13+/-1.87 mmHg, respectively, $P<0.01$). There was a significant difference in the neurological recovery of the two groups at the 6-month follow-up after stroke. Good neurological outcome (Glasgow Outcome Scale score of 4 to 5) rates 6 months after stroke were 68.9% for the CCH group, and 46.7% for the control group ($P<0.05$). The noninvasive CCH described here is a safe method of administering therapeutic hypothermia, which can reduce ICP and improve prognosis without severe complications in patients with severe stroke. Hypothermia treatment was associated with a slight increase in the odds of pneumonia ($p=0.02$) but there was a reduction in pneumonia for trials with good allocation concealment ($p=0.052$) although in both cases the results are not statistically significant.

Conclusions. Selective brain cooling may offer the best strategy for achieving hypothermic neuroprotection. Hypothermia may be effective in reducing death and unfavourable outcomes for patients with stroke, but significant benefit was found in low quality. We found definite advantage of hypothermia over normothermia in the incidence of clinical events associated with a reduced stroke complication.

RETROSPECTIVE ANALYSIS OF THE VARICOCELECTOMY EFFICACY IN PATIENTS WITH PRIMARY AND SECONDARY INFERTILITY

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Objectives. Retrospective and comparative evaluation of the efficacy of the varicocelectomy in patients with primary and secondary infertility by means of the estimation of the main semen parameters.

Materials and methods. We studied 1517 cases of varicocele's surgical treatment (inguinal ligation of spermatic cord veins) that were performed in the period of 2010-2014 years, of which 379 (25%) were performed on infertility. 332 (87,6%) patients suffered with primary infertility and 47 (12,4%) ones with secondary infertility.

Medical histories of 36 males suffering with infertility were selected for detailed study. The patients were divided into 2 groups. 29 (80,6%) males with primary in-

fertility and 7 (19,4%) males with secondary infertility, all of them operated on varicocele, were included into the first group and the second group respectively. Both groups had the patients with non-obstructive azoospermia.

Results. The performed analysis revealed that the mean age of patients in the first group was lower ($26,3\pm 0,4$ and $29,7\pm 1,5$ respectively) and the mean duration of the infertility was significantly shorter ($25,8\pm 5,2$ months and $60,0\pm 12,0$ months respectively) than those of in the second group ($p<0,05$). It was also determined that the mean figures of the sperm concentration had increased in both groups in 3 month after surgical treatment: by 42,5% ($p>0,05$) in the first group and by 81% ($p>0,05$) in the second one. Furthermore, unlike in patients of the first group (-21%), in patients of the second group significant increase of amount of progressively moving sperm (86%) was identified ($P<0,05$).

Conclusions. The mean age of the patients with primary infertility and varicocele was lower and the mean duration of the infertility was significantly shorter than those of in patients with secondary infertility and varicocele. Varicocelectomy resulted in increase, in patients with primary infertility, of the post-surgical moderate (in 3 months) sperm concentration without impacting on motility. Whereas, in patients with secondary infertility varicocelectomy resulted in not only increase of sperm concentration, but also increase of its motility. Sperm motility in patients with secondary infertility increased more significantly than that in patients with primary infertility. Moreover, there was the direct and strong correlation between the initial and post-surgical semen parameters, i.e. the higher were initial semen parameters the better were the efficacy of the surgical treatment.

ROENTGENENDOBIILIARY OPERATIONS IN SCARRY STRICTURES OF ANHEPATIC BILE DUCTS

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Topicality of the problem. The frequency of intraoperative lesions of anhepatic bile ducts ranges within 0,2 - 3 % from total number of operations on organs of abdominal cavity, but recurrence of strictures of bile ducts and external biliary fistula after reconstructive intervention make up 10-12%. Lethality in these complications reaches from 8 to 40% (S.G.Shapovalyants and coauth., 2005; Cameron J.W., 2001).

Roentgenendobiliary surgery is insufficient explored possibilities of the new direction of bile duct surgery. Therefore the problem of further improvement of diagnostic methods and surgical treatment of iatrogenic injuries of hepaticocholedoch is still considered nagging and actual problem.

Material and methods of research. There were 317 patients with iatrogenic injuries of hepaticocholedoch (men -142, women - 175) at the department of surgery of liver and bile ducts of RCCS named after academician V.Vakhidov from 2000 to 2013. In complex diagnostics were included: ultrasonic of liver and bile ducts - 317, endoscopic retrograde pancreatocholangiography (ERPChG) - 71, percutaneous transhepatic cholangiography (PTChG) - 35, magnetic-resonance tomography (MRT) - 12, fistulography - 106, bacteriological investigations of bile -13. ERPChG takes the leading position, allowing to establish its localization, extension, degree of

suprastenotic ectasia of biliary ducts in diagnostics of iatrogenic traumas and cicatricial strictures. We performed more than 70 transduodenal interventions including - 11 stenterings, the results were given below.

Results and their discussion. We performed 11 endoscopic transduodenal stenterings of stenotic areas of anhepatic biliary ducts after primary surgical operations. The strictures of hepaticocholechod were revealed in all cases. In 5 cases the stricture located in confluence zone and it had critical character, included in progressing of mechanical jaundice. In this group of patients the direct fraction of bilirubin made up from 200 to 300 mcmole/l. The initial signs of hepatic insufficiency as appearance of encephalopathy, decrease of albumin level lower than 30 g/l, decrease of prothrombin index lower than 82% was observed. We estimated the patients' states as second class by scheme of Child -Pyu. In 2 cases the obstacle located in confluence of bile - duct with cystic duct. All patients of this group were examined by diagnostic methods and adequate operations were performed in time. In 4 cases obstacle of bile outflow located in distal part of choledoch. The content of direct bilirubin in these patients was from 300 to 390mcm/l. They were taken to our hospital before the development of hepatic insufficiency. In our observations by endoscopic methods including bougienage of stenotic segment with biopsy forceps in closed and opened versions in combination with local surgical diathermy of ruminal segment could restore the permeability of lumen of hepaticocholedoch and to carry out stenterings of stenotic segment which lead to recovery and discharge from the hospital of patient after 6-8 days.

Permanent receiving of deoxycholic acid preparations was prescribed with the aim of prevention of incrustation of drain. It is necessary to note that complication which is connected with stenterings of external bile - ducts was not observed. In different terms (from 6 to 10 months) stents were extracted at duodenoscopy.

Conclusions. Thus, with the development of endoscopic and X-ray television techniques appeared the possibility of implementation of recanalization of strictures of bile - ducts with using of framed drainages and stents. The method of biliary stentering in which the patient do not expose the risk of general anesthetic and further complications which were connected with them, there is no need for laparotomy. The method is reliable and long guarantor of return of patient to healthy and qualitative life.

THE ROLE OF THE "LAGODEN" IN TREATMENT OF EPISTAXIS IN DURING SURGERY OF CHRONIC POLYPOID RHINOSINUSITIS

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Chronic polypoid rhinosinusitis (CPRS) is a major problem in modern medicine, because reduces the quality of life of patients due to the deterioration or complete blockage of nasal breathing, impaired sense of smell, headaches and chronic hypoxia condition. CPRS represent a common benign disease affecting 4% of the general population. CPRS is a disease with unknown etiology, characterized by a persistent symptomatic inflammation of the nasal and sinonasal mucosa. After surgical procedure in the nose and paranasal sinuses in chronic polypoid rhinosinusitis (CPRS) epistaxis is a common complication and reduced the effectiveness of treatment.

The purpose of this research is study the effectiveness of “Lagoden” during surgical treatment of chronic polypoid rhinosinusitis.

Materials and methods. We studied 142 patients with CPRS who hospitalized and assigned to surgical treatment in the ENT department of 3rd clinic of Tashkent Medical Academy in the period from 2009 to 2013. All patients were performed endoscopic surgery, the corresponding prevalence of polypoid process whereby tamponade was done with 0,5% solution of “Lagoden”.

The results of treatment showed that it helped reduce bleeding in open tissues, good outcome visualization were observed in 135 patients (95,1%), satisfactory result was observed in 7 (5%). At the same time, the duration of surgery was reduced by 10% and decreased postoperative bleeding by 90%.

So, using the “Lagoden” promotes good visualization of the operating area, a quick stop nasal bleeding, low probability of postoperative nasal bleeding and accumulation of a blood clot in the sinuses promotes swelling of soft tissues and also this is a low socio-economic costs.

ENDOVASCULAR TREATMENT OF ARTERIAL HYPERTENSION OF ADRENAL GENESIS

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Objective. Deterioration of the clinical course of an arterial hypertension in the majority of patients with essential arterial hypertension caused by hyperfunction of adrenal glands, therefore roentgenendovascular destruction of adrenal glands will allow receiving hypotensive effect.

Materials and methods. In this work the analysis of treatment results of 135 patients operated during the last 5 years in 2-clinic Tashkent Medical Academy with arterial hypertension is reviewed. All patients underwent ultrasonic scanning of the kidneys, adrenal glands, duplex scanning of an abdominal aorta and renal arteries, CT of the adrenal glands and abdominal aortography and hormonal status assessed. As a result, had been excluded parenchymatous kidney diseases and renovascular hypertension. Average age of patients was 40.3 years. In all patients long hypotensive therapy was inefficient. Average figures of blood pressure made up: systolic - 198 ± 10.9 and diastolic 112 ± 9.3 . All patients underwent roentgenendovascular destruction of adrenal glands.

Results. In 134 (99,2%) patients observed normal postoperative period, 1 patient in the postoperative period was diagnosed retroperitoneal hemorrhage as a result of tear of the central vein of the left adrenal gland, whom were carried out conservative therapy and patient discharged in a satisfactory condition.

In 101 (74.8%) patients the blood pressure was normalized, 34 (25.2%) patients it has considerably decreased and became controllable with drug treatment. During five years follow up, recurrence of arterial hypertension was observed in 30 (22%) patients, 1 (0.74%) had hemorrhagic stroke and 8 (5.9%) patients had been developed chronic renal insufficiency. In other patients' hypotensive effect preserved.

Conclusion. Our results have shown that during five years follow up in 96 (71.1%) patients were positive results after roentgenendovascular destruction of adrenal glands. Thus, application of the roentgenendovascular interventions in patients with severe and malignant hypertension is well-grounded.

EARLY DIAGNOSIS AND COURSE OF CERVICAL CANCER AMONG HIV-INFECTED AND UNINFECTED WOMEN

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Objective. Early diagnosis of cervical cancer in HIV infected women.

Material and methods. The study included 92 patients, who underwent inpatient treatment in Tashkent Oncology Clinic, Republican HIV Centre in the period from 2007-2014. Conducted research based on the indicators of the level of CD 4+, PAP smears (a test for Papanicolau) and colposcopy in 52 HIV-positive patients (aged 25-64 years) are at different stages of the disease. Among them at the 1st clinical stage were 3 patients in the 2nd clinical stage–5, 3rd clinical stage–20 and clinical stage 4–24. HIV-1 was diagnosed using the methods of ELISA and immunoblotting. Stage of disease was determined by the content of the absolute number of CD-4 lymphocytes, clinical manifestations and data of colposcopy and cytological examination. As control group we selected 40 HIV - negative patients suffering from cervical cancer.

Results. We have analyzed 92 patients, 40 HIV – negative and 52 HIV-positive women at different clinical stages of the disease. According to colposcopy and PAP-test, it was found that the frequency of cervical intraepithelial neoplasia (CIN) depends on the clinical stage of HIV infection. Thus, in patients with 1 clinical stage with CD4+ more than 500 mcL not registered a single case of CIN 2 clinical stage with CD4+ 300-500 mcL accounted for 5 patients, 2 of which detected viral warts and dysplasia of 1-2 PTS, but only 1 of them detected CIN (20%), clinical stage 3 patients with CD4+ 250-300 mcL 14 of them had suffered from cervical cancer (70%), and 4 clinical stages with the level of DM 4+ 150 mcL 22 patients had cervical cancer what is 91.6%. Whereas in the control group the rate was only 5 % (2 patients suffered from cervical cancer). It has also been noticed that among 52 HIV-positive women, those women are 3-4 on the clinical stage of HIV infection with a CD4+ <200/mcL 5 times more likely to develop cervical cancer compared with women with CD4+ above 500/mcL (70-90% vs. 20%).

Conclusion. We have identified that the level of immunosuppression in HIV-positive patients predicts the frequency and severity of the cervical cancer. Women with low CD4+ cells (CD4 cell count <200/mcL) have the highest risk of HPV infection. Suggest as a preventative measure to all women suffering from HIV (or another immunosuppressive condition) screening cytological examination of the cervix detection of cancer cells (test on Papanicolau) 2 times a year from the moment of HIV infection and a colposcopy and determining the level of CD4+. These methods are simple, not expensive and affordable and should be done for each HIV-infected woman, regardless of stage of HIV.

CLINICAL AND ANTHROPOMETRIC EVALUATION OF VARIOUS OPTIONS DEFORMATION OF ANTERIOR ABDOMINAL WALL

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The number of patients with deformities of the anterior abdominal wall, caused by sagging of the skin in this area, saggy belly, diastasis recti and various disfiguring scars requiring surgical treatment, to date, continues to grow. These changes of the

anterior abdominal wall, as usual, are combined and have the same pathogenesis.

A prospective-retrospective analysis of 104 patients with different variants of the anterior abdominal wall strain, operated from 2002 to 2010, the staff of the department of general and pediatric surgery at the clinic of the Tashkent Medical Academy. Depending on the origin of the etiological causes deformation of the anterior abdominal wall, all patients were divided into 3 groups. The first group included 39 (37.5%) patients with postnatal abdominoptosis the cause of which was the deformation of the anterior abdominal wall as a result of undergoing pregnancy and childbirth. The second group consisted of 31 (29.8%) patients, the cause of the anterior abdominal wall strain which were effects associated with local adiposity. This group included patients with non-progressive obesity grade II and III, that is, received dietary and drug treatment and lost a significant amount of body weight as a result of receiving the "fat-burning" biologically active additives. The third group consisted of 34 (32.7%) patients with postoperative scar deformation of the anterior abdominal wall.

The deformation of the anterior abdominal wall in patients with postoperative and postnatal abdominoptosis in most cases accompanied by I-III degree of obesity. At the same time, patients with nutritional abdominoptosis occurred an inverse pattern.

Evaluation of clinical and anthropometric data in patients with different variants of the deformation of the anterior abdominal wall allowed us to determine that the most crucial ones are the BMI on a par with the degree of weight loss (for alimentary abdominoptosis), thickness and mobility of skinfold thickness of subcutaneous fat tissue, anatomical and topographical area deposition of subcutaneous fat tissue, belly shape, body type, presence and condition of the prevalence of stretch marks (for abdominoptosis postpartum), the state of the umbilical ring, the state of musculo-aponeurotic system and the presence of scar in the anterior abdominal wall (for postoperative abdominoptosis).

Characterization and preliminary analysis assess the degree of deformation of the anterior abdominal wall in patients with different variants abdominoptosis possible to determine the vector of the strategic directions in the choice of methods for surgical correction. At the same time, we believe that the choice of surgical intervention, depending on the degree of ptosis anterior abdominal wall can not be justified due to the high probability of subjective criteria. To improve the objective evaluation of the anterior abdominal wall strain requires an integrated approach in the assessment of all areas of the stomach tissue, based not only on clinical and anthropometric, but also on the tool: ultrasound and transcutaneous partial pressure of oxygen study skin.

In conclusion, it should be noted that the estimate offered figures on the basis of determining the clinical and anthropometric data and the degree of deformation of the anterior abdominal wall, in our opinion, will help increase the accuracy of its diagnosis, selection of optimal variant of surgical correction, thus enhancing the aesthetic and functional effectiveness of the results operations.

LAPAROSCOPIC TOTAL EXTRAPERITONEAL HERNIA REPAIR (TEP) IN THE TREATMENT OF INGUINAL HERNIA

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Introduction. The paper presents the experience of laparoscopic total extraperitoneal hernia repair (TEP) in 87 patients with a diagnosis of inguinal hernia during the period from 2014 to 2015. The purpose of research is the evaluation of the use

and definition of the place of TEP in the treatment of inguinal hernias.

Methods. TEP was used for the period 2014-2015 in 87 patients. Gender structure: 82 men (94.25%), women - 5 (5.75%). The average age of the patients was 39.77 ± 11.78 years. The primary unilateral hernia was observed in 73 (83.90%) cases, recurrent inguinal hernia was observed in 5 (5.75%) cases, bilateral in 8 (9.20%) cases, and 1 (1.15%) patient had primary hernia associated with recurrent contralateral hernia. Surgical intervention was performed under general anesthesia in the Trendelenburg position. Trocars were installed in typical locations. Polypropylene mesh size was 10x15 cm. Fixation of mesh was done with spiral herniostapler in 2 or 3 points. The criterion for evaluation of surgical intervention was the frequency and structure of the observed complications and the severity of pain.

Results. Median follow up was 6 months (range 1-12 months). Mean operative time was 73.17 ± 22.18 min (range 45-120 min). The average period of hospitalization was 4.15 ± 0.99 bed-days. The average level of pain (evaluated by numerical pain rating scale NRS 11 from 0 to 10) was 3.12 ± 1.03 on the 1st day after the operation, with its decrease to 1.31 ± 0.89 on the 3d postoperative day. There were observed 3 cases of seromas in the bed of the former hernial sac. In all cases, the developed complications were solved by percutaneous puncture under ultrasound guidance. Transient dysuria was observed in 3 patients due to the intraoperative bladder catheterization. Reported complications did not require surgical correction.

Conclusion. Laparoscopic hernia repair is technically difficult procedure and requires a long training period. However, when there is sufficient experience, this operation may be a good alternative to traditional methods of hernia repair. The unquestionable advantages of this method are the minimum pain, the possibility of early activity of the patient, a short period of disability, better cosmetic results, a low incidence of wound complications and also absence of recurrence

THE POSSIBILITY OF DRUG CORRECTION OF THE DYSFUNCTION OF THE LOWER URINARY TRACT IN PATIENTS WITH PARKINSON'S DISEASE

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Introduction. It is well known that Parkinson's disease clinic consists of a triad of core symptoms - a tremor, muscle rigidity and hypokinesia. Along with this, a large proportion of clinical semiotics of disease take also autonomic disorders including dysfunction of the lower urinary tract ie. lower urinary tract symptoms(LUTS). According to various authors LUTS occur in 37 - 90% of patients with Parkinson's disease. They have mainly observed neurogenic form of detrusor overactivity - overactive bladder (OAB), characterized by urgency and frequent urination, as well as the imperative urinary incontinence and nocturia, which significantly affect and worsen the quality of life of patients.

The aim of the study was to examine the efficacy and safety of medication with trospium chloride (Spazmex) and tamsulosin (Omnic) in men with Parkinson's disease and OAB and to identify possibilities of its elimination by the use of these medications and their effects on quality of life.

Materials and methods. We examined the 32 men with Parkinson's disease, suf-

fering from OAB symptoms The average age of patients was 71+12 year. The main neuro-logical diagnosis was made by neurological examination, including an echo-encephalography, electroencephalography, magnetic resonance and computed tomography, magnetic resonance angiography of the brain and neurophysiological research.

In urological examination evaluated subjective clinical OAB-symptoms, as well as the dynamics of LUTS. Intensity of LUTS evaluated on a scale of IPSS, symptom assessment scale of OAB (Homma, 2003) and bladder diary. All patients underwent urine and blood analysis, prostate specific antigen, ultrasonography (US) of the urogenital system (kidneys, bladder, and prostate) and uroflowmetry with determination of residual urine. Estimated average effective bladder capacity (AEBC). To all men along with neurological treatments was given tiroprium chloride (TC) at a dose of 15-45 mg/day, 3 times a day and tamsulosin (T) in a dose of 0.4 mg, once a day within one month. The evaluation of quality of life of all patients before and after treatment estimated by using questionnaire KNQ (King's Health Questionnaire) with comparison of sum of mean scores.

Results. Upon receiving the TC at 15 mg/day with T for 10 days the patients noted an improvement in the form of: reducing urinary frequency by 20%, the number of urgency frequency by 31% and increasing AEBC to 18%. Considering absence of side effects, the TC dosage was increased to 45 mg/day. Results were evaluated for the next three weeks: the frequency of urination decreased by 35%, the number of urgent desires by 45% and CEMP increased by 25%. Side effects such as headache, have been observed in 2 (6.3%) patients, constipation in 3 (9.4%) patients and dry mouth in 6 (18.8%) patients. The therapy TC with T improved the emotional state of men, decreased anxiety (6.1 ± 4.6 vs 3.3 ± 2.9 ; (mean \pm SD) $p < 0.05$) and irritability (18.5 ± 6.8 vs 11.1 ± 7.8 (mean \pm SD); $p < 0.05$) and sleep quality improved (7.1 ± 4.5 vs 16.3 ± 6.5 (mean \pm SD); $p < 0.05$) before and after treatment respectively.

Conclusion. Trospium chloride (spazmex) in a therapeutic dose of 45 mg/day in combination with tamsulosin (Omnic) 0.4 mg/day is easily tolerable and highly effective medicine in the treatment of Neurogenic Detrusor Overactivity for patients suffering from Parkinson's disease. By this treatment occurs not only the reduction of symptoms of OAB, but also improvement the quality of life.

CONTINUOUS SEDATION WITH KETAMINE DOES NOT CHANGE INTRACRANIAL PRESSURE IN CRITICAL PATIENTS WITH TRAUMATIC BRAIN INJURY

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Background. It has traditionally been avoided in the management of patients with traumatic brain injury owing to concerns that it may increase intracranial pressure (ICP). Conversely, it has been argued that in comparison to most widely used sedative agents ketamine does not decrease blood pressure and therefore may preserve cerebral perfusion pressure. In particular, it has been argued that this haemodynamic stability enables ketamine to be used as a safe induction agent in patients with TBI. Concerns regarding the potential for ketamine to raise ICP stem

from small case control series several decades ago in patients with abnormal CSF flow dynamics. However, this rise in ICP only occurred in those patients with abnormal CSF pathways. In the remaining patients there was an overall rise in MAP, an increase in cerebral blood flow, and improved cerebral perfusion pressure.

Objective. To study the effect of ketamine on intracranial pressure

Methods. 45 patients with severe TBI, who required mechanical ventilation for at least three days, were admitted deeply sedated from the operation or the emergency rooms. All patients were continuously sedated with ketamine infusion at rate 0.5-1mg/kg/hour. ICP was measured daily using lumbar tonometry method. Cases of increased ICP were recorded for three days.

Results. Mean ICP on admittance was 14.2 ± 2.4 mm.hg. During the sedation with ketamine cases of severe increase in ICP were not observed. Mean ICP on the second day was 13.6 ± 2.7 and 14.1 ± 1.9 on the third day ($p < 0.05$). Mean blood pressure of patients were stable all three days of our trial which is beneficial for cerebral perfusion pressure.

Conclusions. The results of this study suggest that ketamine does not increase ICP. Ketamine provides good maintenance of hemodynamic status. Clinical application of ketamine should not be discouraged on the basis of ICP-related concerns which stemmed from studies. Conversely, we strongly recommend widely use of ketamine in comatose patients due to its beneficial effects on cerebral blood flow.

MOKSIKUM IN THE TREATMENT OF COMPLICATED URINARY TRACT INFECTIONS

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Introduction. Despite the widespread use of antimicrobial agents, urinary tract infection is still often associated with serious complications and lead to a deterioration in the quality of life. Antimicrobial resistance among pathogens of urinary tract infections are rare, and most can be cured after a short course of antimicrobial therapy. The spectrum of pathogens of urinary tract infections in recent years has not changed. Most of E.Coli cause less enterococci (Chlamydia trachomatis, Ureaplasma urealyticum). The aim of our study was research efficacy and safety of the drug "Moksikum" of pharmaceutical companies Dr.Sertus, in complicated urinary tract infections.

Materials and methods. The drug "Moksikum" is the generic moxifloxacin containing moxifloxacin hydrochloride equivalent to 400 mg moxifloxacin. The study group receiving the drug "Moksikum", initially included 20 patients of both sexes (10 men and 10 women) aged 18 to 60 years ($39 \pm 3,2$) with complicated urinary tract infection (UTI). They received 1 tab x 1 time per day for seven days.

To evaluate the effectiveness of the drug investigated as subjective symptoms (dysuria, imperative, fever, pain in the lumbar region), as well as objective data of clinical and other laboratory studies (dynamic monitoring indicators leukocyturia and bacteriuria, body temperature, blood test indicators). The severity of disease and ill-health as a result of changes in the state of the therapeutic effect of the preparation were assessed by the Clinical Global Impression (CGI Scale). Research carried out on the basis of the stationary department of the Republican Specialized Center of Urology.

Results. Therapeutic effect of the drug will reach an average of 3.5 (two to six) days. The tolerability of the drug in patients was generally assessed as satisfactory. In assess-

ing the severity of health problems as a result of the disease and the therapeutic effect of the drug on the Clinical Global Impressions (CGI Scale) it was found that 80% (16 patients), taking "Moksikum" initially it was rated as moderate, severe - from 2 patients (10 %) and light - in 2 patients (10%). In evaluating the therapeutic effect of the drug on a scale CGI, it was found that 80% of patients (16 persons), taking "Moksikum" come pronounced effect, complete or almost complete elimination of symptoms; In 10% of patients (2 persons) come a moderate effect is clearly an improvement, partial elimination of symptoms; In 10% of patients (2 people) with out any change.

Conclusion. From the above data it can be concluded that, the drug "Moksikum" of pharmaceutical companies Dr.Sertus, is an effective antibacterial drugs for the treatment of complicated urinary tract infections.

THE EFFECT OF HYPERTONIC SALINE AND MANNITOL SOLUTIONS ON INTRACRANIAL PRESSURE IN PATIENTS WITH TRAUMATIC BRAIN INJURY

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In acute phase of severe traumatic brain injury (TBI) increased intracranial pressure (ICP) prevalence is as high as 50%. Increased ICP is the main reason for further brain edema causing high disability and mortality. The main line treatment in management of traumatic brain injury is using hyperosmolar solutions as mannitol and hypertonic saline solutions.

Objective: to determine the efficacy of mannitol and 7.5% solution of sodium chloride in management of brain edema and increased ICP following severe TBI

Materials and Methods: our clinical trial was carried out in the 2nd clinic of Tashkent Medical Academy. 53 patients with severe TBI were included, their mean age was 43 ± 1.3 years and mean Glasgow Coma Score upon admittance was 6.5 ± 2 points. All patients received standardized intensive therapy. We allocated patients into two groups randomly: in the 1st group (n=26) treatment of intracranial hypertension performed using 7.5% solution of sodium chloride (200ml intravenous infusions every 12 hours) and in the 2nd group (n=27) elevated intracranial pressure was managed with 15% mannitol infusion (1g/kg intravenously every 24 hours). Duration of intracranial pressure management was decided with close monitoring of plasma osmolarity and intracranial pressure itself. Measurement of intracranial pressure was performed with lumbar puncture tonometry method.

Results: in mannitol group ICP was 29.5% lower after 30 minutes and 13.4% lower after 120 minutes following the mannitol infusion. Mild tachycardia was registered 120 minutes after the mannitol infusion and systemic blood pressure shifts were insignificant. In hypertonic saline group ICP was 45.9% and 35.8% lower after 30 and 120 minutes respectively following the infusion of 200ml – 7.5% sodium chloride. Obtained results clearly demonstrate more powerful ICP lowering capability of hypertonic saline than 15% mannitol infusion. Hypertonic saline was 16.4% and 22.4% better at 30 and 120 minutes respectively.

Conclusions: both 15% mannitol and 7.5% saline infusions can be used as an effective method for ICP lowering, but the usage of hypertonic saline solutions results in more profound and prolonged lowering of ICP which leads to greater increase cerebral perfusion pressure.

NEW WAY OF INTRAOPERATIVE HEMOSTASIS ON PRESACRAL VENOUS PLEXUS: IN VIVO STUDY AND CLINICAL TRIAL

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Purpose and objectives. The goal of this study was to develop a prospectively applicable method for intraoperative hemostasis on presacral venous plexus. This plexus is affected during presacral surgery in 1-1,5% of cases, herewith the difficulty of hemostasis consists in fact that cut veins of plexus contract and go deep into sacral holes. First objective of our study was to estimate hemostatic effect of the nickel-titanium (TiNi) porous plate on bleeding from presacral venous plexus. Secondly, we aimed at developing practical guidelines to apply for the application of this method during pelviosacral surgery. Third part was to conduct a clinical trial for new method application in practice.

Material and method. For the experiment we used porous plates of TiNi with 0,8-1,2 sq.sm. area. The choice of alloy was based on its special properties: adhesion, biofluid wettability, porosity-permeable structure and biocompatibility. As a model of presacral venous bleeding, we artificially traumatized tail vein of 35 rats (200-250 g). Then we implanted porous plates on presacral venous plexus by pinning to the sacral vertebrae. Material for the study was taken after 10 minutes of hemostasis, after 1 day, 1 week, 1 month, 2 months, 3 months and 4 months. Then we conducted an electronic and light-optical microscopy of both ventral surfaces of the plate and its stroma, to determine occupancy by connective tissue.

Results and discussion. Electronic and light-optical microscopy allowed us to see in detail the development of connective tissue in the stroma and all over the implant since the moment of saturation with blood elements (first hours), the formation of loose cobweb strands (1 day), up to complete fusion of the implant with the surrounding connective tissue (1 week - 4 months), and the lack of the rejection implant. According to the results of this study we developed practical guidelines for the application of this method in pelviosacral surgery and clinical trial (n=3). We obtained successful hemostasis on presacral venous plexus in all cases.

Conclusion. 1. The porous plate self-locked at the site of bleeding with the formation of a clot after being pinned for 3 minutes. 2. The optimal size of the implant is 1.5-2 times larger than the bleeding. 3. Morphological study allows us to trace the formation of a blood clot, its maturation directly into the pores of the plate and to establish the biological, biophysical and biomechanical compatibility of the plate with body tissues. 4. The implant of porous TiNi system is permeable, thus it allows fluid, tissue and erythrocytes penetrate into the pores. The alloy undergoes deformation in accordance with the behavior of body tissue. It is important in the concave and uneven surfaces of the sacrum. 5. This method not only prevents blood loss, but also makes it possible to carry out the operation in full volume in the "dry" field. 6. The method can be applied in the clinic for patients with locally advanced rectal cancer and extraorgan retroperitoneal tumors.

NEUROPROTECTIVE EFFECT OF CITICOLINE TO PREVENT POSTOPERATIVE COGNITIVE DYSFUNCTION AFTER CHOLECYSTECTOMY UNDER GENERAL ANESTHESIA

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Background and Goal of Study. Cognitive dysfunction can occur after cholecystectomy under general anesthesia. In a series of clinical studies it could be shown, that the perioperative administration of Citicoline had favorable effects on delirious symptoms. Therefore, the aim of this prospective, double-blind study was to assess a possible positive influence of perioperative Citicoline administration on cognitive dysfunction after cholecystectomy.

Materials and methods. After approval of the regional ethics committee, informed consent was obtained by 48 patients undergoing cholecystectomy. They were randomized into a Citicoline-group (n = 25) (1000 mg i.v. during the surgery, 1000 mg i.v. × 2 daily on postoperative days 1 to 3) and a placebo-group (n = 23). All patients underwent cognitive testing with a validated battery of neuropsychological tests the day before, 1 week and 3 months after surgery in order to assess cognitive dysfunction. Possible learning-effects were taken into consideration by a healthy control-group (n = 20). From the neuropsychological tests a combined Z-score was calculated, indicating cognitive dysfunction.

Results and discussions. Postoperatively, patients in both groups developed cognitive dysfunction. The most significant changes occurred in the first day after surgery. There were differences regarding demographic data, duration of general anesthesia, ventricular fibrillation and MAP < 50 mmHg. Patients in the Citicoline-group had a significant trend towards a decreased rate of cognitive dysfunction 3 months postoperatively compared to the placebo group. A possible explanation for these results could be the improved cerebral performance due to Citicoline during the intraoperative phase of insufficient brain-perfusion.

Conclusion. Citicoline is suitable to prevent perioperative cognitive dysfunction after cholecystectomy. Our results even suggest a positive effect of use of citicoline regarding cognitive dysfunction 3 months postoperatively in the verum group.

SURGICAL STRESS AND COGNITIVE FUNCTION IN MAJOR SPINAL SURGERY: ARE THEY CONNECTED?

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Aims. Evaluate the influence of epidural anesthesia on endocrine-metabolic, immune responses and cognitive function in patients during the postoperative period after major spinal surgery.

Method. In a randomized, prospective trial 82 patients were divided into two equal groups: Group E (n=48) had continuous epidural analgesia and sevoflurane anesthe-

sia during surgery and continuous epidural analgesia with bupivacaine and fentanyl after surgery (PCEA); Group G (n=34) had general anesthesia with sevoflurane and fentanyl and systemic administration of opioids after surgery. Circulating cytokines, C-reactive protein (CRP), cortisol, glucose and cell-surface receptor expression of immune cells were measured. Visual Analog Scale (VAS) for pain assessment, Montreal Cognitive Assessment (MoCA) and Mini-Mental State Examination (MMSE) were used. Nonparametric statistical methods and linear regression were used.

Results. Postoperative pain was significantly lower in Group E, than in Group G. In patients receiving PCEA postoperative B cells have increased, and NK-cells have reduced by postoperative day 3. All circulating cytokines, CRP and cortisol were significantly less in Group E. Thus, epidural anesthesia is important in modulating immune system response in patients. Epidural anesthesia may reduce postoperative stress responses and thereby influence immune functions. The decrease in the total score at the end of testing after surgery was significantly lower in group E indicating a lower risk of early POCD. The total score had strongly correlation with the concentrations of peripheral inflammatory markers.

Conclusion. Epidural anesthesia is an important factor limiting the surgical stress response, as well as the modulation of adaptive immunity and the postoperative cognitive dysfunction.

INFUSION OF ANTIBIOTIC THERAPY IN THE PREVENTION OF POSTOPERATIVE COMPLICATIONS IN ENT ONCOLOGY

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The goal: to optimize the results of the treatment and prevention of postoperative complications in patients undergoing interventions on the larynx and pharynx through the prudent use of antimicrobials in the early postoperative period.

Materials and Methods: the analysis of 20 cases of postoperative course in cancer patients undergoing different types of interventions on the upper respiratory tract, namely: resection of the larynx, laryngectomy, advanced larynx surgery, pharyngotomy. We consider the presence of the examined patients both gram-positive and gram-negative microflora and its high sensitivity to the antibiotic fluoroquinolone, in connection with which the base was used antibiotic infusion therapy in the following mode: tsiprinol 200 mg 100,0 / Cap 2 times a day + metronidazole 500 mg 100.0 w / cap 3 times a day, gatimak 400 mg 3 times a day / Cap plus metronidazole 500 mg 3 times a day / Cap (administration of drugs began during surgery). The peculiarities of the wounds in the postoperative period.

Results. The mean duration of infusion of antibiotic therapy was 5 days, with a convenient mode of drug administration. If you use an infusion of antibiotic therapy is marked shortening of hospital stay due to a significant reduction of postoperative complications in the form of festering wounds, the formation of pharyngitis, laryngitis, neck-tracheal fistula.

Discussion: in recent years, expanded indications for surgery for malignant tumors of upper respiratory tract, volumes, changing tactics, approaches to the treatment of this disease. When irrational use of antimicrobial drugs, increasing resistance of

pathogens, respectively - increases the duration of the treatment, the possibility of postoperative complications. The introduction of new schemes infusion of antibiotic therapy achieves maximum drug concentration in the recovery area, which makes it possible to reduce the duration of treatment (antibiotic therapy) up to 5 days.

Conclusions. The improvement in the results of the treatment and prevention of complications in practical onkootolaringologii associated with the introduction of new principles of antibiotic therapy, taking into account the characteristics of the underlying disease. The resulting efficiency of these schemes allows to recommend it for widespread use in surgery otolaryngology.

OUTCOMES OF TREATMENT OF KIDNEY CANCER WITH TUMOR THROMBUS IN THE RENAL AND VENA CAVA INFERIOR

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The purpose of the study. Improved outcomes Renal Cell Carcinoma tumor thrombus.

Materials and methods. Treatment of kidney cancer complicated by tumor thrombosis in the great vessels is one of the difficult problems in oncurology. In urology department of National Cancer research Center Ministry of Health for 2013 - 2014 years were operated 12 patients with renal cell carcinoma complicated by tumor thrombus in the renal vein and vena cava inferior. Of these, 5 were men (41.6%), women - 7 (58.3%). The age of patients ranged from 28 to 69 years. In 4 (33.3%) patients the process was localized in right kidney and in 8 (66.6%) – in the left kidney. In 3 (25.0%) patients tumor thrombus was found in the renal vein, and in the remaining 9 (75.0%) patients - the thrombus was localized in the continuation of the vena cava inferior. The dimensions of the tumor thrombus in the renal vein were from 12x14 to 50x20 mm. The overall dimensions of the thrombus in the vena cava

Results. Duration of surgery varied from 135 min to 480 min and an average of up to 236 min. Blood loss constituted 200 ml to 900 ml and the average - 358 ml. Histological examination of surgical material in all cases revealed renal cell carcinoma, light cell type. In two cases were diagnosed metastases in regional lymph nodes. In the immediate postoperative period in 1 (8.3%) patient was observed cardiopulmonary failure, which has disappeared after the treatments. Subsequently, all patients received prophylactic immunotherapy interferon (Altevir) 6 million. Units. №10 in a day for 2 - 3 courses.

The duration of follow-up was between 5 and 22 months and an average of 5.5 months. During further observation in 1 (8.3%) patient occurred liver metastases, and in the iliac lymph nodes after 8 months after surgery, and in 1 (8.3%) patients was found in liver metastasis after 11 months.

Conclusion. Renal cell carcinoma with tumor thrombosis of the vena cava inferior is the most difficult form among oncurological pathologies. Improvement of surgical technique and conduction of additional anticancer therapy can improve outcomes and increase the life expectancy of patients.

KETOROLAC HAS NO PREEMPTIVE ANALGESIC EFFECT IN KNEE ARTHROSCOPY

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Postoperative pain remains to be one of the unsolved problems of modern anesthesiology. Postoperative pain is an acute pain. In addition to human sufferings associated with pain, there is now convincing evidence that unrelieved postoperative pain may result in harmful physiological and psychological effects which may cause significant morbidity and even mortality. Preempting pain is essential for managing postoperative pain. Initiating an analgesic regimen before the onset of the noxious stimulus to prevent central as well as peripheral sensitization and limit the subsequent pain experience is called preemptive analgesia. The value of preemptive analgesia for treating postoperative pain has been studied by several investigators; however, inconsistencies in the overall design of these studies has created questions about the significance of the results.

Objective. to study the efficacy of ketorolac as preemptive analgesic during knee arthroscopy.

Materials and Methods. 73 patients undergoing elective knee arthroscopy were divided into two (ketorolac and control) groups. Total dose of postoperative morphine, opioid related short term side effects and the intensity of postoperative pain were registered in both groups. Pain intensity was measured using a 100mm visual analogue scale.

Results. In ketorolac group average morphine use was 7.2 ± 1.1 mg per a patient and in group B 9.7 ± 1.2 mg per a patient, reduction in morphine consumption was not clinically significant. Preemptive use of ketorolac does not improve pain control and lower the pain intensity. Pain scores were very similar in both groups. Average pain scores after two hours of operation were 22 in group A and 24 in group B. 57 and 52, 45 and 49, 55 and 57, 30 and 29, 25 and 27 after 4, 8, 12, 24 and 48 hours following operation respectively. Short term side effects of opioids were equally present in both groups (Table 1). Sedation and breathing depressions were not observed in our trial. There were 9 cases of urinary retention (5 in ketorolac and 4 in control groups, $p < 0.05$) 7 incidents of postoperative nausea and vomiting (3 in ketorolac and 4 control groups, $p < 0.05$).

Conclusions. Ketorolac has no preemptive analgesic effect in knee arthroscopy. Although preemptive use of ketorolac decreases postoperative morphine consumption, but opioid related side effects remained similar in both groups.

FEATURES OF VIDEOLARYNGOSCOPY IN PATIENTS WITH VARIOUS FORMS OF CHRONIC LARYNGITIS

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Currently, the problem of chronic laryngitis is becoming important, since in recent years clearly showed a tendency to increase of morbidity.

The aim was to study of data of videolaryngoscopy in patients with various forms of chronic laryngitis.

Materials and methods. The material of this study consisted of 30 patients diagnosed with "chronic laryngitis," which were examined in the ENT outpatient clinics of II and III of the Tashkent Medical Academy. The age of patients was 18 to 60 years,

20 patients were male, 10 - female. Among the surveyed, 16 patients were identified hypertrophic form of chronic laryngitis, 9 patients atrophic form and in 5 patients catarrhal form. Inclusion criteria were chronic laryngitis duration of 5 years with a history of frequency of exacerbations of laryngitis for the last year (at least two), the availability of the complaints at the time of inspection (9 points or more), more than 10 points according videolaryngoscopy. At the first examination, the patient was performed transnasal videolaryngoscopy. It uses the following rating scale paintings videolaryngoscopic exacerbation of chronic laryngitis (from 0 to 3 point). 10 or more points according to videolaryngoscopy served as criteria. Statistical analysis was performed using Microsoft Excel program in 2013.

Results of the study. The main complaints of patients with hypertrophic chronic laryngitis, chronic atrophic laryngitis and chronic catarrhal laryngitis are hoarseness, cough, sputum, sore throat, and there was a fever and dysphagia. Assessment of vocal function performed by visual analogue scale. The results showed that the most pronounced changes were observed on patient's voice with hyperplastic form in 16%, with atrophic disease in 9%, in catarrhal form in 5%.

Chronic catarrhal laryngitis compared with hypertrophic and atrophic forms, dominates redness of the mucous membrane of the larynx and vocal cords, the presence of secretions in the throat. In atrophic form of chronic laryngitis predominant presence of crusts in the lumen of the larynx. In hypertrophic form there is an inflammation and rounded medial edge of the vocal folds.

In some cases (28%) of the vocal folds looked immobile, marked decrease in the amplitude of oscillations decrease in mucosal wave during catarrhal chronic laryngitis and chronic laryngitis hyperplastic to complete absence in most cases of chronic atrophic laryngitis. In all forms of the disease in half of the cases (50%) the movement of the vocal folds was uneven in frequency and amplitude.

Conclusion. 1. In the form of catarrhal chronic laryngitis prevails sluggish chronic inflammation, which is manifested by hyperemia and puffiness of the mucous membrane of the larynx. 2. The most pronounced changes were observed in patients with voice hyperplastic and atrophic forms of the disease in 16% and 9%, respectively, compared with 5% in the catarrhal form. Every second patient with chronic laryngitis suffers from changes of vocal timbre and amplitude, which need appropriate treatment.

THE ROLE OF ACTIVE DECOMPRESSION OF INTESTINE IN ACUTE INTESTINE OBSTRUCTION COMPLICATED BY DIFFUSE PERITONITIS

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Purpose of the research. Improvement of the results of surgical management of patients with acute intestinal obstruction by complicated diffuse peritonitis.

Material and methods of the research. We had analyzed the results of treatment of 38 patients of acute intestinal obstruction (AIO) non-tumor etiology, by complicated peritonitis and developed the syndrome of intestinal insufficiency (SII), who were hospitalized in the 2nd Clinic of the Tashkent Medical Academy for the period 2014-2015. Men accounted for 23 (60.51%) patients, women - 15 (39.49%). The age of patients ranged from 25 to 60. All patients underwent surgery on an emergency basis, after unsuccessful conservative therapy.

The indications for the establishment of nasointestinal tube were sharply swol-

len bowel loops, absence of peristalsis, high toxicity and SII. To do this, intraoperative transnasal installed double-lumen silicone tube developed in the clinic. Simultaneously with the installation of the probe made active decompression of intestine (DI). After completing the main phase of the operation strengthened the probe to the nasal septum and left for DI in the early postoperative period. Postoperatively, all patients received antibiotic therapy against the background of complex treatment with stimulation and decompression of intestine.

The residence time of nasointestinal tube is from 3 to 5 days. On liquidation of the SII was judged as the restoration of motor activity and absorptive functions, as well as a progressive decrease in discharge from the intestines.

In 33 (86.84%) cases of postoperative complications were observed. In 2 (5.26%) patients had postoperative pneumonia. In 1 (2.63%) had postoperative wound festering. Fatal outcome was 2 (5.26%) cases, in 1 case the cause of death was acute myocardial infarction, in the second case the patient was died from progressing peritonitis. In 20 (52.63%) cases transnasal tube was removed on 3 day after surgery, 13 (34.21%) patients on 4 day, 4 (10.52%) for 5 day. The indication for removal nasointestinal tube to restore motor-evacuation function and absorptive function of the intestine, which was confirmed by the objective examination nad disappearance of endotoxemia and restoration of the main indicators of homeostasis.

Results. Using nasointestinal intubation for active DI adequately emptying of the digestive tract, thereby lowering the intraluminal pressure of the intestine, helping to improve microcirculation and earlier recovery of his motor and absorptive functions.

Conclusion. Active DI at the AIO having developed SII promotes earlier restoration of motor activity and intestinal absorption, as well as a significant effect on the elimination of the SII. Application nasointestinal intubation positive effect on the reduction of total mortality among patients with AIO complicated by peritonitis.

COMPUTED TOMOGRAPHY IN THE DIAGNOSIS OF CHRONIC BRAIN ISCHEMIA

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Objective. To determine the diagnostic criteria of chronic brain ischemia according to computed tomography.

Materials and methods. In 3rd clinic TMA was performed CT study of 50 patients aged from 40 to 65 (35 - men, 15 people - women). The median age was $50 \pm 8,3$ years. The study was conducted on SIEMENS Somatom Emotion (Germany).

Results. Isolated forms of chronic ischemia of brain produced according to the classification Schmidt E.V. Analysis of brain CT performed on the following criteria: external hydrocephalus - expansion of subarachnoidal spaces convex more than 3 mm; internal hydrocephalus (III ventricle enlargement); multiple hypodensive paraventricular change - «leukoaraiosis»; isolated ischemic foci. Signs of external hydrocephalus was diagnosed in 86.9% of patients. The phenomenon of internal hydrocephalus were common to all patients with chronic ischemia of brain. They grow as worsening chronic ischemia of brain: an increase in the size of the III ventricle with chronic ischemia of brain I degree was observed in 45.8% of patients with chronic ischemia of brain II degree at 60.2%, with the III degree - 80%. The inci-

dence of single hypodense foci in patients with the chronic ischemia of brain composition of 60%. «Leukoaraiosis» is not found in patients with initial manifestations of cerebrovascular insufficiency and chronic ischemia of brain I degree.

Conclusions. Measurement of the subarachnoidal space, convex and the size of III ventricle is a necessary procedure in CT examination of patients with chronic ischemia of brain. Progression of internal hydrocephalus - a more reliable criterion for the existence and dynamics of chronic cerebral ischemia of brain than trying to visualize the ischemic lesion.

OUR EXPERIENCE IN PERFORMING CHOLECYSTECTOMY BY MINI ACCESS

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The aim of our research is to improve the results of surgical treatment of patients with calculus cholecystitis by defining the role of mini ChEC.

Methods of investigations and materials. We made 107 mini ChEC access over the past 15 years. Indications for mini ChEC were: 1. Basically, the implementation of the initial period L ChEC in our regions was refused by the negative attitude of surgeons, the number of patients for making LChEC (45 patients, 42,06%), 2. Asthenic lean patients (28 patients, 26,17%) Preference of operating surgeons mini ChEC than LChEC and other reasons (technical problems, a temporary inability to carry LChEC etc.) observed in 34 patients, (31,18%).

The age of patients from 21 up to 62 years old, on average, 40-45, 15 men , 92 women . History of disease from 1.5 years to 12 years, an average 5-6 years.

Results. Among 107 operated patients, the post operation period was smooth and without any difficulties with 97 (90,65%) patients and they were discharged in 2-4 days, the following postoperative complications were noted with 10 (9,35) patients:

1. Secretion from control drainage up to 100-150 ml of serous fluid was observed with 2 (1,87%) patients.

2. The body temperature was increased up to 38 C in 3 (2,8%) patients after 2-4 days of surgery.

3. Suppuration of surgical wounds was observed in one patient, which required the through drainage of the subcutaneous tissue through both edges of the wound without removal of sutures and prolonged washing wounds (within 7 days).

4. 2 (1,87%) patients had hyperthermia up to 38.2 C for no apparent reason, which is normalized on 4-5 days and discharged in satisfactory condition .

Discussion of Results. Among surgeons were and still remain supporters of mini ChEC that prompted us to be in touch with this problem. Having some experience in this field, which gives us the opportunity to express our opinion that in certain cases, you can remove the GB by mini access without any serious complications and fatal outcome. But, still, this method is not without complications in the postoperative period inherent to traditional methods ChEC.

Conclusion.ChEC, in some cases can be performed by mini access, but not without complications inherent to traditional open ChEC.

APPLICATIONS OF INTERFERON INDUCERS ON LARYNGEAL PAPILOMATOSIS IN CHILDREN.

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Purpose. To study the etiological factors, clinical and immunological features of laryngeal papillomatosis in children and reduce the frequency of recurrence through the appointment of interferon inducers.

Material and methods. 24 children were examined at the age from 7 months to 15 years. The observation period ranged from 3 months to 10 years. The control group included 29 children of similar age and sex. The isolated form of papillomatosis with the defeat of one of anatomic field was observed in 24.4% of children, widespread form - in 45.7% and obliterating form was observed in 29.9% of pediatric patients. Serum levels of IL-6 and IFN-alpha were examined by ELISA. The use of surgery alone does not solve the problem of therapy, as well as the most pathogenetically justified is the use of interferon (IFN). Effective cure is Amiksin - interferon inducer. The drug causes the body's own endogenous IFN, which has antiviral, anti-proliferative and immunomodulatory effects.

Results. We studied the serum concentration of IL-6 and interferon - alpha (IFN-alpha). Comparative analysis of IL-6 in children within groups revealed a significant difference in the values of the control group ($p < 0.05$). Moreover, in children with frequently relapsing-papillomatosis showed a significant increase in the value of IL-6 in 3 or more times.

Conclusion. Our data highlight the importance of the diagnostic value of IL-6 in the progression of laryngeal papillomatosis, and Amiksin as the drug of choice in the treatment of recurrent laryngeal papillomatosis in children.

THE USAGE OF TRANSURETHRAL URETEROLITHOTRIPSY IN CHILDREN WITH URETERAL STONES

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Purpose. The Stone Kidney Disease is one of the most widespread disease in the Middle Asia including the children also. The stones can be localized in the different parts of the urinary tract, however, the ureteral position of stone cause to the significant kidney damage. Moreover, the ureteral stones carrying out with renal colic which leads to suffering young patients. The low-invasive treatment modalities (by endoscop) of stone management use extensively in adults. In the last decade the applying of transurethral ureterolithotripsy has been started in pediatric patients. Nevertheless, maybe appear difficulties while using this method for eliminating stone which localized in ureter in children according to the ones diameter

Materials and methods. In the period from January 2012 to December 2014, 78 pediatric patients were observed with ureteral stone. The average age of children $12,6 \pm 0,9$ (range of 8-16years). 54 (69,2) of them were boys and the number of girls was 24 (30,8%). The duration of disease was $6,7 \pm 0,5$ month. The reason of visit was renal col-

ic in 89% case, in another 11% case ureterohydronephrosis was detected accidentally while survey of the pathology of other organs. For all patients prosecuted survey and intravenous urography in order to identify the level of ureteral stone. In the absence of shadows according to a routine program performed multispiral computed tomography.

Results. The average size of stones amounted to $0,9 \pm 0,8$ cm (range of 0,6 to 1,6 cm). Stones were located in the distal ureter in 12 (15,4%) children, in the middle section 44 (56,4%) patients and in proximal section 22 (28,2%) patients. Relocation of stone to kidney and percutaneous nephrolithotripsy executed in 45 (57,6%) children, younger than 10 years. Transurethral ureterolithotripsy (in situ) applied for 24 (30,7%) patients because of relocation problem and the diameter of ureter was fit for tubus entrance. Ureterolithotomy was performed in 9 (11, 7%) cases, owe to fixed stone to ureteral mucous and size of stone also was more than 1,2 cm. The age of patients in this group was less than 10 year and the size of ureter outlet did not allow to perform endoscopic procedure (ureterolithotripsy in situ). There were not complications requiring additional interventions. Intraoperative perforation of ureter during lithotripsy identified in 2(2,5%) cases, in this patients the ureteral JJ stent has been removed 20 days after surgery. Exacerbation of urinary tract infection was observed in 12 (1% .3%) cases without signs of urosepsis and increased antibiotic therapy allowed to stop pyelonephritis.

Conclusions. Thus, managing of ureteral stones by transurethral ureterolithotripsy (minimally invasive technique) is a safe and effective way to get rid of the pediatric patients from supravvesical obstruction caused by stone. When ureteral stones in children up to 10 years it is advisable to move it to the kidney and performing percutaneous nephrolithotripsy. When the ureter is perforated ureteral stent should be removed not earlier than 20 days.

INFECTIOUS DISEASE, EPIDEMIOLOGY AND MICROBIOLOGY

PATIENT CASE REPORT WITH FASCIOLIASIS

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Introduction. Fascioliasis is a parasitic disease, characterized by a chronic course with a primary lesion of the liver and bile tract. The causative agents of fascioliasis are trematodes – Fasciola hepatica and Fasciola gigantica. It is estimated that 17 million people are infected world wide and 91 million are at risk of infection. F. hepatica is endemic on all continents but is of particular public health importance in the Islamic Republic of Iran, Egypt, Philippines, some Asian countries and Western Europe (e.g. France, Portugal, and Spain). Children are affected more than adults, with higher prevalence rates, more severe infections, and more reported liver or biliary complications. The main source of infection is the consumption of raw vegetables contaminated with metacercariae, such as watercress, salads, and contaminated water from irrigation channels (Keiser J, et al. 2009).

Case report. A 6 years old child lives with parents in Fergana region. In August 2014 they went to surgical Department of the Institute of Pediatrics. The primary diagnosis

was cyst of the common bile duct. Patient complained of intermittent jaundice, weight loss, pain in abdomen and in right hypochondrium, loss of appetite, fatigue.

Medical history: according to his mother child became ill 3 years ago, the disease began with appearance of jaundice and pain in the region of the liver, periodically increased body temperature. The child with her parents lives in a private home, family members are all healthy, watered the garden with the common channel, periodically consume greens, vegetables, fruit (sometimes not washed). Child adheres to personal hygiene partly.

From 17.08.12 to 30.08.12 patient was treated at the children's infectious diseases hospital with a diagnosis of acute viral hepatitis. During the examination, the specific marker of viral hepatitis – anti HAV IgM, HBsAg, anti-HCV were not detected. After that child was treated from 11.09.12 to 14.09.12 at the regional children hospital with a diagnosis of acute respiratory syndrome. In 28.09.12 MRI of the abdominal cavity was done. MRI showed hepatomegaly, tumor of the common hepatic and common bile ducts, signs of biliary hypertension. After that consultation of oncologist was recommended. From 02.10.12 up to 08.10.12 patient was treated at the regional Oncology hospital. At hospital CT scan was performed: pathological formation in the projection of head of pancreas, obstruction of the biliary tract, biliary hypertension. Blood for tumor markers: tumor gastrointestinal antigen (CA 19-9) – 35.69 (N to 34 u/ML); liver alpha-fetoprotein (AFP) – 1.24 (N up to 7 NG/ML). In August 2012 patient was sent to the Republic oncology research center. But the parents of child refused to go to this bycenter. Child was treated with herbs of a doctor at th place of residence for several months. In December 2013 the second MRI of abdominal cavity was performed. MRI showed signs corresponding to type II (congenital diverticulum) and IVA - type cysts of the bile ducts (extra - and intrahepatic). After that consulting of abdominal surgeon was recommended. In June 2014 the patient was hospitalized at the regional children hospital. Diagnosis: a cyst of the biliary tract. The operation was not performed because of severe anemia in the patient. In 2 months child and her parents came to the Institute of Pediatrics. Tashkent. Laboratory examination: blood count: RBC – 3.6; Hb – 92 g/l; WBC – 4.6; eosinophiles – 22%, ESR 3 mm/h. Total bilirubin 17.1 mmol/l; ALT - 15 u/l, AST - 19.8 u/l. Triple coproscopy: eggs of parasites and protozoan cysts were not detected. The level of common IgE is 1969.3 IU/l. MRI: signs of multiple cyst- like formations permeate to intra- and extra-hepatic ducts. The operation was performed to remove the cysts. During the operation parasites of the leaf shape were found in number of 38 exemplars. Material was sent to the parasitological laboratory of the Research Institute of Epidemiology, Microbiology and Infectious Diseases. After examination of material fascioliasis was diagnosed.

After clarifying of the diagnosis antiparasitic treatment was administrated. Praziquantel was prescribed at the dose of 75 mg/ kg of patient, in three separate doses after meals for one day.

After operation and treatment the child's condition has improved, pain disappeared, appetite restored. In 1 month the level of total serum IgE decreased up to the 313.6 IU/l.

Conclusion. This clinical case demonstrates the importance of alertness of General Practitioners and specialists (surgeons, oncologists, infectious disease physicians) against fascioliasis in the Republic of Uzbekistan.

FIGHTING AGAINST VISCERAL LEISHMANIASIS IN NAMANGAN REGION

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Leishmaniasis is a parasitic disease with a wide range of clinical manifestations depending on the interaction between different *Leishmania* species and immune host responses. Most infections being asymptomatic, three main clinical syndromes are recognized, namely, visceral, cutaneous, and mucocutaneous. Visceral leishmaniasis (VL) is the most severe form with an annual incidence of about 500 000 cases and a respective mortality of 80 000 [T.V. Piscopo, 2006]. With 90% of cases occurring in five countries, namely Bangladesh, NE India, Nepal, Sudan, and NE Brazil, the disease could be mistakenly considered rare in Europe [B.L. Herwaldt, 1999]. Nevertheless, the Mediterranean littoral constitutes an endemic area, with *Leishmania infantum* as the causative agent. Factors such as immigration and global warming may further contribute to disease propagation. Moreover, the increase in the number of immunocompromised patients has resulted in an increased incidence of VL [E. Rosenthal et al., 2000].

VL is characterized by fever, cachexia, hepatosplenomegaly (predominantly splenomegaly), pancytopenia, and hypergammaglobulinemia. Lung involvement is considered rare, especially in immunocompetent patients. This infection is transmitted by mosquitoes of the genus *Phlebotomus*.

In 1965 rural foci of infection in Namangan region were destroyed. But, since 1987 in Pap district of Namangan region registration of "Mediterranean" form of visceral leishmaniasis has been initiated. The disease occurred mainly in the villages of Chodak, Chorkesar, Yangiobod, Oltinkon, Yangier, Honobod and Gulistan. Epidemiological situation in these areas is exacerbated.

The main reason is the existence of natural foci of infection in the mountainous areas, which are situated at 900-1100 meters above sea level, and favourable conditions for the development of the mosquito *Phlebotomus* spp., besides deterioration of epidemiological situation is connected with increase of number of dogs, which are the main source of infection. During 1987-2013, in the Pap region 126 patients with visceral leishmaniasis were registered. In the period from 1987 to 2000 - 20 patients, from 2001 to 2006 - 10 patients, from 2007 to 2013 - 96 patients were registered. Distribution of patients according to the villages: in village Chodak 37 patients, in Chorkesar - 26, in Yangiabad - 28, in Oltinkom - 17, in Yangier - 9, in Honobod - 5, and in village Gulistan - 4 patients. All patients were aged from 0 to 6 years, including from 0 to 1 year - 40% of patients, from 1 to 2 years - 36%, from 2 to 3 years - 6%, 3-4 years - 4%, 4-5 years - 4% and 5-6 years - 10% of patients. Taking into account the incubation period the disease was mainly recorded in the period from November till May.

To prevent deterioration of the epidemiological situation in these areas the following activities were carried out: early diagnosis of disease, specific therapy with drug "Glucantim", controlling the homeless and sick dogs and measures for reducing the number of mosquitoes. For stabilization of the epidemiological situation in at risk areas on the disease, it is recommended sanitary measures for prevention of mosquitoes breeding and laboratory observations of dogs in districts at risk, dispensary observation of patients, to raise the level of knowledge of health workers through seminars and training courses, in addition it is necessary regular deratization against rodents.

THE ROLE OF LACTOBACILLI IN WOMEN WITH TORCH INFECTIONS

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According to various authors, the vagina of healthy women is dominated by facultative anaerobic species of lactobacillus capable of producing hydrogen peroxide (V.V. Muravyova, 1987; Larsen B., 1993; Muhamedov I.M. with Soave., 2007). Due to such properties of lactic acid bacteria as the ability to produce hydrogen peroxide in the vagina to create an acidic environment in view of the high concentration of lactic acid to compete with other microorganisms for adherence to epithelial cells of the vagina, and the immune system of host, providing vaginal colonization resistance of biotope (V.N Prilepskaya et al.1999).

The purpose of this research is the study of quantitative and qualitative indicators microecology genital tract TORCH infected women of childbearing age, when these studies will focus on the biological characteristics of lactic acid bacteria.

Materials and methods. The study was examined 25 women of childbearing age. Of these, 10 clinically healthy women, 15 women infected with TORCH. For this purpose, the fence wire material sterile Folkmann spoon from the material obtained in the laboratory is preparing a series of serial dilutions. In the aftermath of the appropriate dilutions produced crop on highly selective differential diagnostic medium. When conducting microbiological research focused on the cultures of lactic acid bacteria. Identification of isolated microorganisms to the genus and species was carried out on the basis of morphological, tinctorial, cultural and biological properties, in accordance with the determinant of microorganisms Berg (2001).

In the study of female genital tract lactoflora features of species composition and biological characteristics found that the species composition of lactic acid bacteria in the study groups was represented by 4 species of lactobacilli (*L.fermentum*, *L.acidophilus*, *L.casei*, *L.rhamnosus*) has not changed much compared to healthy group, but significantly decreased the number of lactobacilli. In the vaginal tract of these women begin to dominate the pathogenic and pathogenic microorganisms that have a negative impact on women's health and can lead to the development of vaginal dysbiosis and bacterial vaginosis.

The study of quantitative and qualitative indicators of the genital tract of women showed significant differences with the group clinically healthy women. The vaginal discharge of women with TORCH infection most commonly sown fungi of the genus *Candida*, *E. coli* (lactose negative), *S.epidermidis*, *S.aureus* has been a sharp decrease in the number of lactobacilli and bifidobacteria to 50%, with a predominance of pathogenic and opportunistic microorganisms of the family Enterobacteriaceae, or enterococcus in association with anaerobic coccus.

absolute number of neutrophils.

HELMINTHIASIS AND PREGNANCY

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Widespread deworming the population, especially in childhood, it has reduced the relevance of helminthic invasion, but it has not ceased to exist, causing patho-

logical symptoms in pregnant women (nausea, vomiting, change in appetite), is regarded as a manifestation of complications of pregnancy or any extra genital diseases. This is due to lack of diagnostic vigilance against helminths in pregnancy, negative attitudes of doctors to deworming as a probable cause of miscarriage or the use of drugs with possible toxic effects on the fetus. Arsenal funds deworming significantly updated, and among them there are indeed drugs are contraindicated during pregnancy, but there are those that do not interfere with the normal development of the pregnancy and the fetus.

Exclusion of helminthiasis in a survey of pregnant women, or the elimination of it to avoid diagnostic and therapeutic errors anemia, early toxicosis of pregnant women and other diseases. In our region the most commonly diagnosed intestinal damage *Ascaris*, pinworms, less broad tapeworm, pork tapeworm. A study of the clinical course of helminthiasis in pregnant women identified a number of common features characteristic of helminths infestation is independent of their type. Often there simtomokompleks similar to early pregnancy toxemia. At 1/3 Bolney experience nausea, vomiting, and 1/4 from Bolivia epigastric region, independent of meals, from 1/6 salivation, in some patients, syncope, pain in the heart. Almost half of the patients suffering from worm infections, hypotension observed throughout pregnancy, it is due to the influence of the waste products of worms on the central nervous system and the autonomic nervous system of the pregnant woman. Very often, hypotension observed in ascariasis. Each trimester, infested gelmentami in early pregnancy is detected hypochromic anemia, which is progressing in the 2 and 3 trimesters. Attempts liquidation of anemia without deworming are unsuccessful. Gelmenty often increase the permeability of blood vessels, are the cause of albuminuria and cause irritation of the urinary tract epithelium, clinically cystitis and pyelonephritis.

Women suffering from helminthiasis is often a threat prerivaniya pregnancy prematurity, samoproizvolny abortion in early pregnancy. Some observed habitual miscarriage without clear reasons. Worm infestation affects the blood coagulation system by changing the enzymatic function of the liver, with associated poslerodom observed in the period of bleeding every 6th puerperal, unowned explanation obstetric pathology. In 1/3 of pregnant women with helminths found violations of carbohydrate metabolism. After deworming normalizes carbohydrate metabolism. Gelmentov waste products may have harmful effects on the fetus, which manifests itself in violation of its sometimes-asphyxiation. Products of metabolism of parasites peradayutsya mother's milk to the child, causing dyspepsia are not amenable to treatment, but quickly disappearing after deworming mother. All authors studying helminth infections in pregnant women, they are unanimous in their opinion that degelmentizatsiya necessary at any stage of pregnancy, as it significantly improves the outcomes of pregnancy and childbirth. All pregnant women in antenatal clinics should examine fecal egg worms.

OPTIMIZATION OF TREATMENT OF PSORIASIS WITH REGARD CLINICAL, BIOCHEMICAL AND IMMUNOLOGICAL DISORDERS

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Psoriasis - one of the most common polyetiological dermatoses with a dominant role in the pathogenesis of genetic factors. There is a clear link between the

common, psoriasis resistant to therapy, and the components of the metabolic syndrome, lipid, carbohydrate metabolism, changes in the immune status and the spontaneous cytokine production, and therefore it is advisable to use in the treatment of immune-modulating drugs and metabolism-stabilizing effect.

Objective. To study the clinical, biochemical and immunological parameters in 51 patients with the psoriasis, aged 18-60 years. The structure of the clinical forms of psoriasis had vulgar form in 35 patients, palmoplantar psoriasis in 9 patients, psoriatic arthritis in 5 patients and - erythroderma in 2 patients. The severity of psoriasis was evaluated by the index PASI.

There was a statistically significant reduction in the total population of T-lymphocytes, B-lymphocytes hyperproduction, Ig-A, M, G and proinflammatory cytokines TNF-alpha, IL-2, IL-8; increased ALT, AST, hypercholesterolemia, dyslipidemia, more pronounced in the medium-heavy and heavy psoriasis. The sensitivity to the immune preparations, taking into account the results obtained in the treatment of complex used glutoxim.

Glutoxim hexapeptide (bis - (gamma-L- glutamyl) -L-cysteinyl-bis-glycine disodium salt) is a new generation of synthetic immunomodulator. 3% solution was administered in 5.0 of glutoxim/ m daily for 10 days.

In the treatment were found: the positive dynamics of skin process, the reduction of the index PASI, the normalization of the general condition, a significant recovery of biochemical and immunological parameters. The results allow us to recommend glutoxim in the complex treatment of psoriasis, including common and complicated forms of the disease.

THE RESISTANCE OF BACTERIAL CONJUNCTIVITIS AGENTS TO ANTIBACTERIAL PREPARATIONS AND THE BASES OF RATIONAL ANTIBIOTIC THERAPY IN THESE DISEASES

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According to the latest literature the resistance of acute bacterial conjunctivitis agents has been increasing to modern antibiotics and it requires to reveal the degree of sensitivity of agents to antibiotics and to determine the etiologic agent of disease before the choosing of preparation in the treatment of patient.

The purpose of research. To study the etiologic structure of bacterial conjunctivitis comparatively, to reveal the degree of resistance of inoculated agents to antibiotics and to propose the effective antibiotics for optimal therapy.

Materials and methods of research. Children with confirmed diagnosis of acute bacterial conjunctivitis (0-14 years old) and up to than (18-75) patients (n=62) were studied, for comparative analysis healthy people (n=21) were examined. During research we used bacteriologic, bacterioscopic, methods of analysis and for the aim of generalizing the results statistic methods were applied.

Results. It became clear from received results that 19 strains were inoculated in total, all of them appeared as monoculture. There were no association of microorganisms. The leading place occupied among agents related to S.epidermidis (31,6%, n=6). The next place was S.haemolyticus, its 5 strains (26,3%) were inoculated as agent. Candida spp. (10,5%, n=2) and Proteus spp. (5,3%, n=1) is common as etio-

logic factor, we think that it means the decreasing of immune system activity of the child because causative agent of bacterial conjunctivitis of acute microorganisms is low in healthy children in norm.

Conclusion. It was determined the higher sensitivity of inoculated *S.epidermidis* to studied antibiotics such as cephalosolin (S=100%), ciprofloxacin (S=95,2%), cephtriaxon (S=95,2%), cephoperazon (S=90,5%) and amoxiclav (S=76,2%). The resistance degree of *S.epidermidis* strains (R) was lower than *S.aureus* strains, for example in tetracycline this parameter was R=71,4% , in gentamicine - R=66,7% , levomycetin - R=66,7% , doxacillin - R=57,1% , ampiclox - R=57,1% , erythromycin - R=52,4% , canamicin - R=52,4%.

EVALUATION OF THE EFFECTIVENESS OF THE DRUG PHOSPHOGLIVE IN TREATMENT OF ROSACEA

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Actually of research effectiveness methods of therapy rosacea, determined with high outweigh of disease in the structure of dermatoses; the absence of clear concept of the pathogenesis. Decrease in antitoxic function of the liver, an imbalance of bile acids, increase in total lipids, triglycerides, reduction of phospholipids in serum and membrane of erythrocytes promote to use hepatoprotectors.

We studied clinical and biochemical parameters of patients in the treatment of rosacea by using drug Phosphoglive, it is hepatoprotector which comprises a phospholipid (phosphotidilcholine) of plant origin and sodium salt of glycyrrhizic acid from licorice root. Were observed 48 patients aged 35-60 (men 20, women 28) with papules-pustular rosacea. With a standard clinical laboratory evaluation *D. folliculorum* was discovered in 37 patients, in 28 patients was found out *H.pylori*, among microflora of pus prevailed *Staph. Aureus*. In the midst of associated diseases were more common gastritis(27), ulcer of stomach(4),biliary dyskinesia (34), steatosis grade of 1-2 (37), chronic cholecystitis (29), hypertonic disease (4), NDS(12), chronic pyelonephritis (27), VZOMT (12), menopause (7). Increased liver enzymes determined in 32 patients, increased grade of cholesterol observed in 24 patients, dyslipidemia in 36 patients. Data of results indicate the presence of membrane destructive processes in liver cells, vessels, keratinocytes in patients with rosacea. To stabilize metabolic process in complex treatment were prescribed Phosphoglive 2 capsules three times a day for a month. Phosphoglive promote normalization lipid comprises of serum and positive dynamics of skin process in patients with rosacea.

IDENTIFYING PATIENTS WITH CHRONIC HEPATITIS B (CHB) AT HIGH RISK OF TYPE 2 DIABETES MELLITUS

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Objective. The presence of diabetes mellitus (DM) is associated with increased liver morbidity and mortality risk in patients with chronic hepatitis B (CHB). Aim of

this study was to identify factors associated with type 2 diabetes mellitus (T2DM) in CHB patients.

Materials and methods. A cross-sectional study with pair-matched controls was conducted, 84 CHB patients were screened for study subjects, among whom 18 patients with T2DM were enrolled as cases and 18 sex- and age-matched non-DM patients as controls. Demographic, anthropometric, lifestyle, clinical, and laboratory data were obtained from each subject.

Results. In the univariate model, thirteen variables showed marked differences between the DM group and non-DM group. Patients with longer duration of CHB (≥ 15 years) and alcoholic steatosis showed the highest likelihood of T2DM (odds ratio = 5.39 and 4.95; 95% confidence intervals 2.76-10.53 and 1.65-14.91). In the multivariate adjusted analysis, three CHB-related factors, namely high viral load, long duration of illness, and presence of cirrhosis, contributed to substantially increase the likelihood of T2DM, in addition to the other five risk factors including family history of DM, low education level, elevated triglycerides (TG), gamma-glutamyl transferase (GGT) levels, and presence of alcoholic steatosis.

Conclusion. Our findings suggest that high viral load, long duration of CHB, presence of cirrhosis, alcoholic steatosis and several other factors may be potential risk factors for development of T2DM in CHB patients. It is of vital importance to monitor glucose in high-risk CHB patients and aggressively intervene on modifiable risk factors.

INCREASED RISK OF CIRRHOSIS AND ITS DECOMPENSATION IN CHRONIC HEPATITIS C (CHC) PATIENTS WITH NEW-ONSET DIABETES

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Objective. To examine effects of diabetes on cirrhosis, its decompensation, and their time relationship in chronic hepatitis C (CHC) patients.

Materials and methods. We conducted a nation-wide cohort study by using the Uzbekistan Healthcare system Database, which is comprised of data from $>95\%$ of the entire population. Among having randomly sampled 1 million enrollees, 6,251 adult CHC patients were identified from 2003 to 2013. Diabetes was defined as new onset in CHC patients who were given the diagnosis in the years 2006-2009, but not in 2004-2005.

Results. The cohorts of CHC with new-onset diabetes ($n=424$) and nondiabetes ($n = 1,708$) were followed up from inception point in diabetes and from year 2006 in the nondiabetes cohort until development of cirrhosis or its decompensation, December 2009. Our survival analysis showed a significantly higher cumulative incidence of cirrhosis (relative risk [RR]=1.53; 95% confidence interval [CI]=1.11-2.11; log-rank test; $P<0.001$) and decompensated cirrhosis (RR=2.01; 95% CI=1.07-3.79; log-rank test; $P<0.001$) among patients with new-onset diabetes, as compared to those without. After adjustment for age, gender, CHC treatment, diabetes treatment, hepatocellular carcinoma, comorbidity index, hypertension, hyperlipidemia, and obesity by Cox's proportional hazard model, diabetes was still an independent predictor for cirrhosis (hazard ratio [HR]=2.505; 95% CI=1.609-3.897; $P<0.001$) and

its decompensation (HR=3.560; 95% CI=1.526-8.307; P=0.003).

Conclusion. CHC patients who develop diabetes are at an increased risk of liver cirrhosis and its decompensation over time.

THE EPIDEMIOLOGY AND PROPHYLAXIS OF ECHINOCOCCOSIS DISEASE

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Echinococcosis is world wide diases. According to the statistics, this disease is more common in Southern countries among people and animals. Echinococcosis is one of the serious diseases, it damages especially the organs of liver and lung. Annually more than 1,5 thousand operations on echinococcosis are performed. Morbidity rate of the patients with this disease is equal to 4-9 in surgical departments. Severe forms of echinococcosis reaches to 25-40 %. The agent of echinococcosis damages liver and lung - 80%, in less cases it damages the other organs. The death rate makes up 2-5%, postoperative complications 20-30%.

The distribution of morbidity with this disease is different in all territories of the country, it was more registered in districts where the people are busy with cattle-breeding.

The analysis of echinococcosis morbidity in the Republic of Uzbekistan during 2002-2013 showed that the rate of morbidity to 100 thousand population was about 3,5 - 6,0. The average of the morbidity was the most common in Bukhara, Kashkadarya, Fergana and Surkhandarya regions, in Samarkand, Namangan regions was middle, in Sirdarya, the least indexes was in Navoi and Andijan regions.

It was determined that the patients with echinococcosis in rural areas - 67,14%, 32,86% - in urban areas.

We revealed any significance of the sex in distribution of this disease, the illness was common between two sexes.

It is very important the life style and sanitary culture of the population in conducting of preventive measures against echinococcosis.

To follow the personal hygienic measures carefully. To increase regularly in the field of parasitology. To determine the patients with helminthiasis and echinococcosis actively in public examinations and to treat these patients completely. To detect the patients among risk group population who plays the main role in invasive distribution.

It is necessary to carry out the following preventive measures:

1. To examine the servant and domestic dogs to echinococcosis. To treat the animals with echinococcosis, to eliminate, stray dog;
2. To increase the veterinary – sanitary control under slaughtering of cattles, to eliminate the inner organs which was detected echinococcosis corpuscles;
3. Not to feed the dogs with meat products such as liver, lung which had echinococcosis. To wash carefully the hands after having been with dogs;
4. To reveal the source of disease and to conduct the epidemiologic examinations of echinococcosis cases in revealed people.

In conclusion, to be free completely from this disease is a global problem in national economy on the basis of prophylactic measures of all live farming, it is a fighting for the human health and also to increase the economics of cattle breeding.

THE RESULTS OF EXPRESS ANTIGEN TEST IN THE PATIENTS WITH ANTIBODIES AGAINST HELICOBACTER PYLORI

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There are numerous examination methods in the diagnostics of the illness, created by *Helicobacter pylori*. These methods are classified into invaziv and non-invaziv. At present in the gastroduodenal pathology patients defining *H.pylori* with non-invaziv methods are keeping their actuality. Defining antibodies in the serum in all cases cannot give exact information about character of the *H.pylori* pathologies. In other words, it cannot differentiate gastroduodenit, gastric and duodenum ulcer and other pathologies. On the other hand, for a long time *H.pylori* will be able as a commensal microorganism in the organism, as well as after antihelicobacter cure antibodies can stay in the blood serum for a long time. Therefore, have been offered methods which can liquidate shown insufficiency of the antibodies tests – allowing to appoint *H.pylori* antigens in the different materials.

The aim of the investigation. *H.pylori* antigens have been investigated in the samples of feaces, taken from patients with antibodies against *H.pylori* in the serum.

Material and methods. In the research have been examined twenty-two patients with different gastrointestinal complaints aged from 20 to 66 turned to the Clinical Microbiology Laboratory of the Azerbaijan Medical University. Serum antibodies against *H.pylori* has been studied standard immunoassay analysis (IFA) and expressway. In the feaces samples *H.pylori* antigens have been determined expressway. For the rapid antibodies test has been used rapid GMtest (GM R-HPY Ab - 1C) production of the Holland but in the feaces defining *H.pylori* antigens GMtest (GM R-HPY Ag - 1C).

The results of the investigation. In the result through the IFA serum antibodies against *H.pylori* on 15 of 22 patients (68.1 %), by the rapid antibody test were found on 13 patients (59.1 %). At the same time through IFA against *H.pylori* antibodies found out on 13 patients of 15 rapid antibody test had positive results. Besides in the serum rapid antibody test - which negative result with IFA - at one of the patients received positive. So, rapid antibody test was approved IFA method in 86.7 % cases. Specificness of the rapid antibody test had been – 85,7 %, sensitivity 80%.

The stool test applied for determination of *H.pylori* antibodies only 2 of 22 patients (9.1 %) had positive results. At the same time through IFA against *H.pylori* antibodies found out on 2 patients of 15 rapid antigen test had positive results. At the result of this test only 2 from 13 patients had positive results. So, IFA method of rapid antigen test was approved only in 13.3 % cases, but the rapid antibody test - 15.4 % cases.

As it is seen the results on sensitivity and specificness of rapid antigen tests are not unambiguous. Its cause may not be taken into account of the character of the gastroduodenal pathologies valuing of this test. In the reseach the poor sensitivity and specificness of rapid antigen tests can be connected with the use of asymptomatic patients. Therefore, in future it is necessary to take into consideration the nature of gastroduodenal lesions.

STUDY ENERGY COSTS STUDENTS STUDYING IN THE FERGHANA BRANCH OF THE T ASHKENT MEDICAL ACADEMY

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Energy costs a person consist of two types of costs: 1) unregulated human will waste energy and 2) adjustable power consumption. The energy expended in the basal metabolic rate, the cost of maintaining the need for these conditions, the level of life-supporting functions of systems. For unregulated types of energy consumption is the energy consumption in the basal metabolic rate and energy consumption-specific dynamic action of food. Regulated energy waste include energy consumption in the workplace, home and household behavior, sports and other activities.

Objective: to study the energy costs of students 1-6 courses of medical-prophylactic faculty of the Ferghana branch of the Tashkent Medical Academy.

The research problem. Determination of regulated and unregulated energy costs calculated by the students.

Materials and methods. From the students of medical and preventive faculty was selectively chosen 65 students from 1 to 6 course. The number of selected students was: a first course 16, the second 13, the third 8, the fourth 10, fifth 8 to 12. For the sixth year the definition of regulated energy costs timekeeping method was used for this purpose, each student made a special chronogram day which reflected the duration of the work performed by its individual species, indicating the rest time during his employment, the duration of walk, sleep. Fixed energy costs, including the value of the basal metabolic rate was determined using the Harris-Benedict table, and specifically, the dynamic effect of food (SDDP) was subtracted from the basal metabolic rate, which increased by 10% in the mixed diet. To determine the daily energy expenditure summed regulated and unregulated energy costs.

Results of the study. Regulated energy expenditure 1st year students averaged 2444 calories, 2431 kcal 2 courses, 3 courses of 2502 kcal, 2285 kcal 4th year, 5th year 2320 kcal, 2240 kcal 6 course. Total energy expenditure regulated averaged 2369 calories. Normally regulated energy expenditure up to the first group of labor intensity in 2300 kcal.

Unregulated waste energy first-year students on the main exchange was 1820 kcal, respectively SDDP 182 calories, 2 courses 1415/142 kcal, 3 courses 1935/194 kcal, 4-year 1310/131 kcal, 5-year 1690/169 kcal, 6 Course 1713 / 171 kcal. The value of basal metabolism on average 1647 kcal-specific dynamic action of food 165 calories.

The daily energy consumption of students averaged 4181 calories. For people engaged in intellectual work daily energy consumption is on average 3,800 kcal.

Conclusion. 1. In determining the regulated energy expenditure was found among students of 1-3 courses of higher than normal. This points to the fact that they spend more time (more than 3.5-4 hours) to the home school.

2. Unregulated spending power of students 1, 3, 5, 6 courses were found in large numbers. This is due to the fact that these courses studied contingent (over 70%) were male.

THE SPREAD OF RABIES AND ITS PREVENTION MEASURES

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According to the World Health Organization, each year worldwide 40-70 thousand people die from rabies. Around the world each year more than 10 million people are victims of animal bites and seek the help of rabies. In the Republic each year, an average of 3-4 cases of rabies in humans and 40-50 cases - in animals.

Objective. The main objective of the research activities to strengthen the prevention of rabies in the population and health education among the population on the content in the homes of dogs, cats and other animals.

Subjects. Data of CSES the Republic of Uzbekistan about rabies and its prevention, the consumption of vaccines in order to help rabies. Maps epidemiological survey of epidemic foci of rabies, and others.

Methods. Used epidemiological and statistical methods.

Results. According to the long-term data obtained in the Republic of Uzbekistan in the period from 1972 to 1991, met 15-27 cases of rabies in humans, 1992-1996 - 38-60, in 1997, there were 27 cases of rabies, and in the period of 2000 -2014 years, this figure annually decreased by an average of 3-5 cases.

The susceptibility to the disease in humans is high. The main share of disease occur in people aged 20-29 years (50%), 25% of the incidence of contingent aged 4-14 years, children under 4 years, almost do not get sick with rabies because of the limited contact with wild and stray animals.

75% incidence in males living in rural areas, as men in active age are more often in contact with home (dogs, cats) and wild animals (involved in caring for a dog, hunting wild animals and others).

The main objectives of health education for the prevention of rabies in the population:

1. Explanation of the infectious nature of rabies, extensive coverage of the population of the pathogen sources and routes of transmission of rabies from animals to humans.

2. Immediate treatment in animal bites or contact with their saliva for rabies using the provision, timely receipt of anti-rabies vaccination, adherence to prescribed by your doctor.

3. Training of the population measures to combat rabies in animals, namely:

- The role of different animals in the spread of rabies

- The special importance of the observance of the rules for keeping dogs and cats and timely vaccinations

- The importance of controlling stray dogs, cats and wild animals

- The need for early detection of infected animals and activities to determine the localization of infection and elimination of the disease outbreak.

Conclusion. The highest incidence of rabies in Uzbekistan observed during the 1972-1997 period. In the last decade the incidence has declined, and is 3-5 cases each year. Every year more than 40 thousand people are vaccinated against rabies.

Prevention of rabies: the development of a comprehensive plan and consistent implementation of measures according to plan joint efforts of veterinary services, municipal services, the Department of the Interior, teams of hunters, government departments, health systems and the general public are considered effective preventive measures to reduce morbidity especially among animals, and then to include of people.

EPIDIMIOLOGY – EPIZOOTOLOGICAL CHARACTERIZING OF SALMONELLOSIS

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Relevance of the topic. The etiology of acute intestinal infections remain valid and salmonella, which are located on the first position among intestinal infections of bacterial etiology. In recent years, intestinal infections, including salmonellosis, often recorded in the form of outbreaks in many regions of the world. The ubiquity of Salmonella in nature and variety of transmission routes, they enter the body of humans and animals, due to their genetic plasticity. Salmonella can easily find niches and to adapt to a variety of conditions. The spectrum of animal hosts Salmonella is extremely wide - includes fish, amphibians, reptiles, birds and mammals.

In epidemiological terms the most important are *S. typhimurium* and *S. enteritidis*, which accounted for 75% of all isolates currently allocated to human patients. Identification of salmonellosis is difficult because of the clinical polymorphism for different emergency (severe forms of generalized infection or poisoning to asymptomatic of bacteria) and the prevalence of pulmonary forms of gastrointestinal lesions, in most cases, remain outside the field of view of doctors and therefore not accounted for in official statistics.

Purpose of the study. Explore modern epidemiology-epizootological particular salmonellosis in Tashkent.

Materials and methods. Materials Research statistics were Republican and Tashkent City Center of the State Sanitary and Epidemiological Surveillance (CSES) of Uzbekistan. Salmonellosis incidence for 1999-2013 GG The paper used epizootological-epidemiology, statistical methods of microbiological research.

Results of the study. It was established that the incidence of salmonellosis in Uzbekistan over the past 15 years has tended to decline (from 1724 in 1999 to 656 in 2013), although marked swings from year to year (in 2004, 1184 cases and 2007 -1686), revealed the way transmission - the food, the contact-household. The largest number of detected cases of salmonellosis incidence observed in Tashkent city - from 637 (intensive index 29) in 2007 to 218 (intensive indicator - 9.4) in 2013. This may be due to better diagnosis of cases of medical institutions of the city. Peculiarities of epidemic process of salmonellosis in Tashkent-dominance in the etiological structure of *S. typhimurium* (85%), a distinct predominance of young children among the cases (79%), a relatively high mortality rate (1.84%) and mortality (0.72 per 1000 population). *S. typhimurium*, isolated in infants were resistant to many antibiotics and isolated adults and farm animals - are sensitive to antibiotics. It is shown that the main determinants of the epidemiology of nosocomial infection in the population is stable dominance in the etiological structure diseases *S. typhimurium*, pre-emptive contact-household path of transmission. This was observed both in outbreaks in therapeutic hospitals and maternity wards - the main sources of infection were patients or mothers who have brought the infection in hospital.

Conclusions. Thus, although there is a downward trend in both absolute and intense incidence of salmonellosis in Tashkent, but the numbers are higher than in other regions of the country, it is probably due to the increasing incidence statis-

tics to improve the quality of clinical and bacteriological diagnosis of salmonellosis. Identifying the causes of the high incidence of salmonella, especially nosocomial disease requires improved surveillance systems for salmonellosis in Tashkent.

Contact epizootic and epidemic processes requires a restructuring of the existing system of epidemiological surveillance of salmonellosis on the basis of epizootic and epidemiological surveillance.

EPIDEMIOLOGICAL CHARACTERISTICS AND WAYS TO IMPROVE HIV/AIDS PREVENTION

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According to WHO, on HIV/AIDS, today the number of people living with HIV around the globe more than 35,5 million people. Each year, 2.5 million people is infected with and 1.7 mln people die from this disease. In a world infected per day 7.000 people, 300 people per hour. In Uzbekistan first time HIV was registered in 1987, and until 1999, HIV was determined only in "at risk group". Since 2000, the incidence of new cases of increase of the population. Prior to 2000, reported 154 infected with HIV infections. In 2013 – 14,1%, in 2014 – 13,8%.

Comparative analysis of the groups in 2014: - 55,4% men, women – 44,6%, children up to 14 years – 12,3%. 61,4% of sexually, parentally – 23,3%, vertical – 0,2%.

By the beginning of 2014 registered HIV infected in Tashkent – 31,3%, Andijan and Tashkent region – 15,3%, Samarkand – 8,7%, Fergana – 7,4%, Syrhandarya – 4,5%, Namangan and Sirdarya – 3,5%, Kashkadarya and Bukhara – 2,5%, Khorezm – 2,1%, Djizzak – 1,0%, Republic of Karakalpakstan 0,7%, Navoi – 0,5%.

Objective: to determine the incidence of HIV/AIDS infection and the development of new ways of improving activities.

Materials and methods. Official data from the incidence of HIV/AIDS infections in the years from 2000-2014 CSSES the Republic of Uzbekistan and the center for AIDS and their reports.

In HIV infection need to pay attention to:

1. Avoid sexual intercourse with unfamiliar and those leading promiscuous sex life.
2. When handling parenteral use only disposable syringes and needles.
3. If personal hygiene – do not use someone else's razor and toothbrush.
4. Avoid direct contact with the blood of another person.
5. When entering the blood or body fluids at the surface of the skin open with plenty of water and soap.
6. If you do not wound with a sterile needle and other cutting tools excretion of blood and seek immediate medical stutt.

Conclusions. The main objective of improving the way the fight against HIV/AIDS, early identification of infected persons, set to medical control and development of new methods of improving preventive measures.

EPIDEMIOLOGICAL FEATURES OF THE SPREADING OF HIV INFECTION AMONG LABOR MIGRANTS IN THE REPUBLIC OF KARAKALPAKSTAN

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Recent UNAIDS estimates indicate that, there are about 86 million international migrants around the world. Migrants, as an important source of economic development, constitute a significant and growing share of the population. According to analytical estimates in search of work across borders more than 3% of the world population migrates annually. According to the Federal Migration Service, in the region of Russian Federal Migration Service, there are 10.2 million foreign nationals, including citizens of Uzbekistan (23%), Ukraine (13.3%) and Tajikistan (10%). A characteristic feature of labor migration is a significant number of irregular migrants or workers without permits. Migrants are more vulnerable to risky behaviors, the risk of infection through sexual contact among them is higher than that of the stationary population. Social control the behavior of migrants is sharply reduced when leaving the country. The vulnerability of migrant populations HIV infection makes difficult to use traditional approaches to solve these challenges.

Objective. Study prevalence of HIV infection among labor migrants.

Materials of research was appeared, the official reporting data for 2010 – 2014 y. Karakalpak Republican Center Combating with AIDS. In this work epidemiological and statistical research methods were used.

Number of surveyed among migrant workers over the past 5 years in the republic of Karakalpakstan was 2010 - 10135; 2011 - 11523; 2012 - 13226; 2013 - 18022; 2014 - 48413. Detection of HIV among migrant workers depending on the regions was similar. At surveyed analysis for HIV - infection among labor migrants detection was in 2010 - 0.08%; 2011 - 0%; 2012 - 0.1%; 2013 - 0.08%; 2014 - 0.03%. Among HIV-infected migrants in analysis of labor age, sex structure and social situation of migrant workers, main role is belongs to the youth, whose age ranges from 20 years to 39 years (56.2%), the proportion of women is 24.1%.

Conclusions. Thus, our findings allow to figure out that, HIV infection is quite prevalent among migrant workers.

Determination of the intensity of the epidemic of HIV infection is one of the important factors in the migration process of population. Works with labor migrants should be developed and implemented in practice strictly with most active methods of work to their place of residence, with neighborhood committees and women's councils.

NIFUROXAZIDE (STOPDIAR) AS A NEW DRUG IN THE TREATMENT OF GIARDIASIS

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Currently formed a large group of persons with special requirements for the treatment of giardiasis as a co-infection: TB patients, HIV-infected patients, patients with

chronic hepatitis of various genesis. TB treatment and ARV therapy include hepatotoxic drugs [Mashkovskii MD Drugs: in 2 parts. Part 2.-stereotypical ed. - T.: Medicina, 2006. Chapter 11], in chronic hepatitis any extra burden on the liver, including the drug burden is not desirable. In this regard, drugs with limited absorbability from intestines are of particular interest.

The aim of our study is to determine the effectiveness of Stopdiar (nifuroxazide) in the treatment of giardiasis compared with metronidazole and ecdysten.

Materials and methods. Investigations were carried out in the scientific research Institute of Epidemiology, Microbiology and Infectious Diseases of the Ministry of Health of the Republic of Uzbekistan. We observed 60 patients with primary and persistent (resistant to traditional drugs against giardiasis) giardiasis. All the patients were between the ages of 6 to 34 years old. The Patients with chronic viral hepatitis were excluded. Each group receiving metronidazole, stopdiar, ecdysten included 20 patients with giardiasis. The primary giardiasis was diagnosed in previously untreated patients with newly diagnosed giardiasis who had not taken medicine against giardiasis. Patients with the persistent giardiasis had taken without effect at least one course of the conventional drugs mostly metronidazole and albendazole. Giardiasis was diagnosed by triple scatoscopy, the negative cases were verified by the additional analysis using formalin-ether concentration of Ritchii (Ritchii et al. 1952). In cases of diarrhea we excluded bacterial etiology using the conventional bacteriological methods. The treatment efficacy was assessed by re scatoscopy with provocation with saline laxative and formalin-ether enrichment. Daily scatoscopy started from the 2nd day of the therapy and continued for 3 days after the completion of the course. Patients received metronidazole in age dosage for 7 days. Stopdiar administered to the patients at the age of 6 years old or older in a daily dose of 800 mg (200 mg four times daily) for 7 days. Ecdysten administered to the patients at the age 18 years old and older in a daily dose of 20 mg (4 doses) for 10 days.

Results. A daily dose of 800 mg of Stopdiar caused the elimination of 100% of the patients with primary persistent giardiasis. In the first two days giardia remained determined in feces of the patients with the primary giardiasis ($n = 17$), the elimination of giardia was observed in feces of 12 patients on the 3rd day, on the 4th day – in feces of 5 patients. Of 3 patients with the persistent giardiasis only one patient did not have giardia on the 3rd day of the treatment, in feces of 2 patients the elimination occurred on the 4th day. Metronidazole has caused the elimination of the parasites in the first three days in feces of 10 (50%) patients, on 4th day Giardia was not detected in 6 patients, on the 6th day all the patients ($n = 20$) were free from Giardia. At the patients with the primary giardiasis treated by ecdysten, for the first 2 days giardias were determined, starting from the 3rd to the 5th day the lamblia elimination was observed in 70.0% of the patients (on 3rd day - 4 patients, on the 4th day – 6 patients, on 5th day – 4 patients). In feces of two patients with the primary giardiasis the elimination was observed on the 6th day, in feces of 4 patients who had the persistent giardiasis the parasite elimination was observed on the 6th and 7th days of the treatment. Thus, the medium term of the elimination of lamblia in the patients receiving Stopdiar, metronidazole and Ecdysten were respectively $3,3 \pm 0,05$; $3,7 \pm 0,14$; $4,8 \pm 0,4$ days. The elimination of giardia during the treatment (including patients at whom metronidazole had not led to the eradication of the parasite) with stopdiar was completed in significantly less time than in the groups which

were treated with metronidazole and Ecdysten (P <0,01).

Conclusion. Consequently, stopdiar can be regarded as the drug of choice in treating giardiasis, particularly in giardiasis which has resistance to metronidazole, and also when an additional burden of the drug on the liver should be avoided, as stopdiar is not practically absorbed. Slower elimination of Giardia by ecdysten is compensated by beneficial effects of ecdysten on the macroorganism (hepatoprotective and other properties).

OPTIMIZATION THERAPY OF ALOPECIA AREATA

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Alopecia represents heterogeneous, polyetiologycal group of disease, characterized by persistent shedding of hair, mostly combined with nail pathology accompanied by aesthetic discomfort and decreasing quality of life. Interrelation endocrine, neurologic and vegeta- trophic, vascular, immune and autoimmune changes which evolve against the background of genetic determinancy are significant in the development of the various kinds of alopecia . Among the triggers able to induce systematic changes in organism the most frequent ones are stress, bacterial and viral infection, worm and protease invasion which activate immunopathological, and metabolic processes. Toxoplasmosis, cytomegalovirus and herpetic infection which mostly unidentified and unconsidered in the complex treatment of patient with alopecia and are referred to this kind of infections. Disorder of microelements metabolism is significant in pathogenesis of alopecia, which are part of different enzyme systems appreciably influence on the immunocompetent cells metabolism and on character of inflammation as well as participate in functioning of pro- and antioxidant systems. On the background of persisting infection in organism quite pronounced the disorder of vitamins metabolism: zinc, iron, calcium, selen, phosphorus and ect. , which should be noticed in treatment. Therefore, working out complex treatment of alopecia taking into account the interrelation of etiological factors is important.

The aim of the work – to study the efficacy of complex treatment of alopecia with considering of risk factors .Clinical observations were performed in 53 patients with alopecia at the age of 19-45,who live in Tashkent region. In 34 patients nested alopecia was established including focal alopecia -in 29, edge alopecia - in2 subtotal and total alopecia – in3 patients. In 19 patients diffuse alopecia with seborrheal character was revealed. On the basis of screening by EUSA method with defining the Ig-M and – G association with protozoan (lambliasis, toxoplasmosis – in16 patients) and viral (herpes simplex, cytomegalovirus – 7 patients) infections. Gastro-intestinal tract and (GIT) hepatobiliar system (HBS) diseases -in 12 patients, endemic goiter II degree -in 5 patients and NCD – in 5 patients were established. The content of the blood Ca,Mg,P,Fe in the serum was studied. Decreasing the serumal concentration Ca in 15 patients, Mg in 10 patients, Fe - in 5 patients was revealed and was more expressed in the group of patients with total, subtotal condition. As a result in the complex treatment was included polyvitamin - microelements complex VITA –RICH(Russia).

IMMUNOLOGICAL INDEXES IN PATIENTS WITH BASAL - CELLULAR SKIN CANCER

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Development and clinical- morphological variety of basal cellular cancer (BCC) is accompanied by interference of number of path-physiological mechanisms. It was established, that there is a syndrome of tumor associated secondary immune deficiency in patients with BCC, which is the most important conception of carcinogenesis.

Cellular and humoral factors of immune system in patients with BCC of the skin were studied. 45 patients with different forms of primary solitary BCC were observed at the age of 33-85 with localization on the trunk, face, extremities. Surface forms of BCC (SF BCC) was in 19, nodular (NF BCC) -in 12 and ulcerative (UF BCC) - in 14. Remoteness of the disease made up 1-10 years, at an average 3,3+1,6 years. At the stage of T1N0-M0 was in 7 patients, T2N0M0 -33, T3N0M0 -5 patients. Immunological investigations were included determination of the indexes of cellular immunity (CD3+, CD4+, CD8+, CD16+, CD20+) activated markers of lymphocytes (CD25+, CD38+ and CD95+) with using of monoclonal antibody. The level IgG, IgA and IgM were revealed in the serum of peripheral blood by IFA method. Analysis of received results in patients with BCC of skin allowed detecting disorders as in cellular group and in humoral group of immunity as well: suppression CD3+, decreasing CD4+, increasing CD8+ and CD16+ cells. Suppression of serumal concentration of the main immunoglobulin and increase of expression of CD23+ and CD95+ were noted. Imbalance in cellular group of immunity expressed in suppression of IRI due to the decreasing of a number of T- helpers / inductors and increasing of T-cytotoxic lymphocytes. Taken data characterize the condition of immune reactivity of patients with BCC and can be served as diagnostic and prognostic criteria of this disease.

WAY OF LIFE - THE MAJOR FACTOR OF SAFETY OF HEALTH

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In connection with introduction of modern in the hygienic relation of technologies, improvements of the industrial environment, optimisation of labour processes actual become also measures on improvement of a way of life. Now studying of dependence of disease from a complex of socially-hygienic factors of the working industrial enterprises for the purpose of an establishment of leading risk factors and working out of preventive actions is especially important.

Research objective. A work main objective was profound studying of disease with time disability; revealing of relationships of cause and effect between risk factors and health of the working.

Material and research methods: he studying of hygienic working conditions spent at two large enterprises of Uzbekistan "Nitrogen" of Fergana and by "Electrohimprom" of Chirchik, making nitric mineral fertilizers has allowed to reveal a number of the leading adverse harmful and dangerous production factors which formation is caused by character of technological process, its organization, placing and imperfection of the equipment, irrational industrial ventilation, occurrence of non-standard situations.

Results of research: In structure of disease of working factories of mineral ferti-

lizers, the leading place at both enterprises was occupied with illnesses of respiratory organs, bone-muscular system, a trauma and poisoning, digestive organs, blood circulation system, and also nervous system and sense organs.

Studying of conditions and way of life of the working it was spent by poll-interview 2000 working (1000 working on each enterprise). The data received at poll-interview of respondents, was brought in specially developed «the Questionnaire of studying of conditions and a way of life working».

For an estimation of the importance of production factors and a way of life in development of the diseases, all working have been divided into 3 groups: illness, chronic illness and healthy groups.

It is necessary to notice that on the average at 2 enterprises on 100 roundyear working it was necessary 24,0 illness and 76,0-illness, from them, persons of illness 1 times 37,7 %, 2 times - 28,7 %, 3 times - 21,4 % were necessary.

8 and more years of the experience of work (41,6 %) had the basic contingent of the working. 24,4 % had the experience from 5 till 8 years, 18,3 % - from 3 till 5 years, and only 15,7 % had the experience of work till 3 years.

As to the correlation analysis and presence of statistically authentic linear dependence between alcohol intake and with used in the given research and health indicators have revealed their essential dependences ($\chi^2 = 19,98$, $p < 0,01$). Thus, results of our researches specify that on disease of the working render positive influences favorable living conditions, marital status (a full family), a favorable psychological climate of a family, high educational level, observance of mode of work and rest, a food, employment by physical culture and sports. It affects not only level of frequency of diseases, but to some extent and reduces level DFB among the working. And, on the contrary, absence of the positive factors set forth above, presence and expressiveness of bad habits, promote deterioration of a state of health, increase in level of disease, and also formation of contingent DFB.

The conclusion. The further decrease in disease with time disability and improvement of a state of health working in many respects depends on improvement of working conditions, rationalization and propagation of a healthy way of life.

CLINICAL FEATURES SHIGELLOSIS FLEXNER IN PATIENTS WITH BURDENED PREMORBID BACKGROUND

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Objective. To explore the clinical features of shigellosis Flexner in patients with a history of premorbid background.

Materials and methods. The study involved 100 patients with shigellosis Flexner burdened with premorbid background between the ages of 18 to 60 years. All patients diagnosed with the disease was confirmed by bacteriological isolation stool culture. In 70% of patients suffering from chronic alcoholism and had expressed an eating disorder. The etiologic agent in most cases (90%) were *Shigella flexneri* 2a. Severe shigellosis said noted primarily in patients with malnutrition and the expressed protein and vitamin deficiency. In a certain percentage of patients (25%) had symptoms of infectious-toxic shock. It is also detected cases of serous and perforated peritonitis, thromboembolic complications, erosive stomach and intestinal bleeding.

Results. The patients in the timing of hospital infection from disease onset ranged

from 2-9 days. Late arrival in the majority of cases were due to the fact that the disease develops in patients with alcohol abuse and the doctor did not apply. The disease in patients with premorbid background proceeded with severe signs of intoxication. Identified clinical signs of pneumonia (cough, shortness of breath, dullness with impaired breathing, wheezing in the lungs). Radiological confirmation of acute pneumonia obtained in 25% of cases. One patient with acute pneumonia and related shigellosis developed a clinical picture of acute abdomen, abdominal plain film, signs of perforation of a hollow organ. By the morphological features of the studied cases should include a significant extent and depth of the inflammatory process in the intestine. Typical is the defeat of the colon from the anus till the Baugin's flap with a further extension to the small intestine and even the stomach. It should be noted that a certain number of patients diagnosed steatosis, characteristic of chronic alcoholism.

Thus, shigellosis Flexner in patients with a history of premorbid background differs significantly severe and with various complications. Characteristic is poliorgan lesions of the internal organs and the presence of fatty liver characteristic of alcoholism.

SURVEILLANCE OF HIV AND THE DEVELOPMENT OF COMPLEX APPROACHES TO ANTI-EPIDEMIC MEASURES OF HIV/AIDS

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Despite significant advances in the fight against infectious diseases in the world and in the Republic of Uzbekistan, of particular relevance keeps HIV infection. The international community has recognized infectious diseases leading cause of death in the world. HIV infection may not disappear in the foreseeable future, but the AIDS epidemic as a threat to public health on a global scale can be done away with accelerating the use of the key approaches of prevention and treatment of HIV infection it will limit the spread of the epidemic and to reduce it to a manageable level, which will give countries the opportunity to take the next step - to its total eradication. If the pace of implementation of countermeasures will be too slow, the AIDS epidemic will continue to grow, taking more lives and increasing burden the financial costs of the increase in demand for antiretrovirals and the costs for the prevention and treatment of HIV infection. Thus, at the initiative of the country's leadership and the Ministry of Health decree of the Council of Ministers of the Republic of Uzbekistan from 19.01.1987g. №563-RS and the Order of the Ministry of Health of 13.08.1987g. №1124 in Tashkent was organized by the Republican Center for AIDS diagnosis engaged her identification, diagnosis, treatment, prevention, providing organizational methodological help skilled allied health professions. Cases of HIV infection have been registered in all regions of the republic, but the prevalence is uneven. In certain regions defined by a generalized phase of the epidemic. The main causes of failure in the fight against HIV infection

They are:

- The lack of unified leadership in the fight against HIV/AIDS;
- A significant backlog of funding from the growing needs for diagnosis and treatment of HIV-infected, staffing

AIDS centers:

- The absence of a full-scale public programs to prevent HIV infection. The achievements in the fight against HIV infection include advances in the prevention of perinatal transmission of HIV exposure from mother to child:

- Annual increase in the number of regions that have achieved the level of perinatal transmission of HIV below 2%.

The country has a tendency to increase in frequency and the proportion of sexual transmission of HIV is through heterosexual and homosexual contacts, with no signs of stabilization of the epidemic among drug users. Currently, there is a problem of late diagnosis of HIV, increasing the number of patients in need of ART. To improve the effectiveness of HIV testing is necessary to test the involvement of vulnerable groups in all regions of the country and the introduction of a mass of routine counseling and testing for HIV among the adult population in most regions of the country affected by the infection.

BACTERIOLOGICAL INDICATIONS OF PURULENT-DESTRUCTIVE NIDUS OF AMPUTATED HANDS AND LEGS OF PATIENTS WITH DIABETES

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Diabetes is the most widespread disease among endocrine illnesses, and 4-5% of the world population is sick with it. Diabetes became an important medical and social problem of XXI century because of its prevailing early invalidization and early level of death. Gangrene and suppurative inflammation of heel in insular diabetes are considered to be the main reason of amputation of more than 50% patients. A pus of hand an leg tips after amputation happens in 11-23.1%, and 13-20% with lethal rate after operation. 35% patients die within 3 years after amputation.

The aim. Of the work is to study a bacteriological etiology of suppurative inflammation on the places of amputated hands and legs of patients as a result of pancreatic diabetes.

The tasks. Of the research is to identify the etiological significance of microorganisms as a reason of purulent-destructive case of patients with pancreatic diabetes after amputation.

The material and methods of investigation. A material for analysis was discharge and sphacelated cells taken from purulent-destructive nidi of 19 patients with pancreatic diabetes after amputation. And thorough analysis was held in scientific bacteriological laboratory of the department of microbiology, virusology and immunology in Tashkent Medical Academy.

10 patients (52.6%) were men and 9 (47.4%) patients were women aged 40-60 (average age is 50). Different parts of the leg of 13 patients and hand fingers of 6 patients were amputated. A taken biological material was cropped in sugar broth, in blood agar for coccus, in salty agar with yolk for staphylococcus, in the method of Gowld in Saburo environment for fungus, in Kitta-Tarossy, Wilson-Bler environment for anaerobic clostridium and was put in thermostat with 37°C for 18-24, 48-72 hours, besides an ointment was prepared and dyed in Gram's method.

The results of research. A material taken from 19 patients for analysis showed: 42 markings were taken from monoculture of 4 patients and mixed culture of 15 patients. During the investigation the following causative agents were found: Streptococcus spp. 40%, Staphylococcus spp. 40%, E.coli 3%, Ps.aureginosa 1%, Klebsiella

spp. 4%, Clostridium spp. from anaerobes and Candida spp. 8% from fungus.

Conclusion. 1. An association of aerobe-anaerobe microbes plays a great role in widespread purulent-destructive cases of patients with pancreatic diabetes after amputation. **2.** Causative agents as St. aureus, St. epidermicus, Str. pyogenus in suppurative inflammation nidi after hand gingers amputation, Clostridium spp., Ps. aureginosa and-piogencoccus after toes and upper part amputation worsen the process of disease.

EFFECT OF ORCHIDECTOMY ON STRESS-INDUCED CHANGES OF THE PERIPHERAL BLOOD NEUTROPHIL PHAGOCYTOTIC ACTIVITY IN MALE RATS

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It is known that sex steroids can regulate the reaction of the neuroendocrine system during stress. However, many aspects of their involvement in regulation of an phagocytotic cell functions under stress are not well understood.

Aim of investigation was to study the effect of orchidectomy on stress-induced changes of the peripheral blood neutrophil phagocytotic activity in male rats.

Materials and methods: Research studies were carried out on non-inbred white male rats 4-6 months of age. Orchiectomy was performed under ether anesthesia by generally accepted method a month prior to start of the experiment. The control group consisted of intact animals. All animals were subjected to the acute 6-h immobilization stress with hemorrhage (samples of peripheral blood in volume 1.5 ml were taken for analysis from tail vessels prior to onset of immobilization and 6 h later). Phagocytotic activity of neutrophils was evaluated by the previously described method (Shilov, Orlova, 2003). The percentages of neutrophils with ingested formalinized sheep erythrocytes (fSRBC), the mean number of fSRBC ingested by one cell, absolute number of neutrophils with ingested fSRBC per mm³ of blood and absolute number of ingested fSRBC per mm³ of blood were calculated. The baseline values were used as the control. The significance of differences between two values was assessed by paired and unpaired variants of Student's t-test.

Results: The orchidectomy did not influence the absolute neutrophil number and phagocytotic activity of neutrophils in compare with non-castrated animals before immobilization ($p > 0.05$ for baseline values). The absence of increase in the number of neutrophils ($p > 0.05$ to baseline values) and statistically significant increase in relative parameters of the neutrophil phagocytotic activity after 6 h from the start of the stress exposure (immobilization in combination with blood loss) were revealed in orchidectomized rats in comparison with intact animals.

Conclusion. Thus, orchidectomy leads to a more pronounced increase in neutrophil phagocytosis relative parameters under stress, but cancels the increase in the

MICROBIOLOGICAL FEATURES OF COLON IN CANDIDA'S CARRIAGE

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It was known about participation of fungal-bacterial associations in the development of respiratory inflammatory diseases. The colon can serve as a reservoir for

the spread of infection, and the diseases of the gastrointestinal tract often precedes invasive systemic candidiasis. The possibility of mutual influence of microbes in associations and exchange of information between them are the scientific interest.

Aim of investigation - to study the composition of the bacterial flora of the colon with *Candida* carriage.

Materials and methods. A quantitative microbiological examination of colon contents among 387 patients was held. They were divided into two groups. The first group consisted of patients who possessed *Candida*. The second (control) group consisted of patients who didn't have *Candida*, and the pathogenic microflora, *Staphylococcus aureus*, and the number of lactobacilli and bifidobacteria wasn't reduced. Statistical analysis was performed with the usage of an unpaired Student's t-test.

Results. It was found that the frequency of typical *Escherichia coli* in these two groups was not significantly different ($p > 0.05$). We found a significant incidence of large lactose-negative and hemolytic *E. coli* in the first group ($p < 0.05$). Among the other enterobacteria in the first group *Enterobacter sp.* was significantly less common ($p < 0.05$). The frequency of *Klebsiella sp.* and *Citrobacter sp.* was not so different ($p > 0.05$). In the first group *S. aureus* was detected more frequently. In the first group *Enterococcus sp.* were found in the $51.7 \pm 5.2\%$ of cases (in the second group – $31.0 \pm 5.3\%$; $p < 0.05$). The presence of *Candida sp.* in the colon did not significantly affect the number of lacto- and bifidobacteria, and non-fermenting microorganisms.

Conclusion. *Candida* carriage changes the composition of microorganisms in a colonic biotope: more frequent are atypical of *E. coli*, enterococci, *S. aureus*, and much less – *Enterobacter*; absence of changes in the composition of anaerobic microflora.

EFFECT OF THE COMPLEX IMMUNOGLOBULIN AT STAPHYLOCOCCUS AUREUS BIOFILM FORMATION

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It is known that immunoglobulins are able to block surface attachment and biofilm formation by microorganisms (Cerca et al., 2007). Complex immunoglobulin preparation (CIP) with immunologically active protein fraction taken from the donor blood serum fractionation has been developed for enteral application. CIP differs from all other immunoglobulin preparations used in Russia by a high content of IgA and IgM.

Aim of investigation was to study the effect of CIP on the biofilms formation by *Staphylococcus aureus*.

Materials and methods: Sorption CIP on ELISA plates were carried out at $+40^{\circ}\text{C}$ for 1 h. The study used a CIP at concentrations of 60, 20 and 6 mg/ml of protein. NaCl solution was used in the control wells. After sorption a suspension of *S. aureus* (108 CFU/ml) was put in to the wells to form biofilms. The plates were incubated for 24 and 48 h at 37°C . Biofilm-forming ability was studied with the traditional method (O'Toole G., 2000). Statistical data processing was performed using paired Student's t-test.

Results. It was found that the CIP at concentrations of 60 and 20 mg/ml statistically significantly reduced the intensity of biofilm formation by *S. aureus* for 24 h. With increasing period of incubation up to 48 h it was showed that all of the studied concentrations of CIP statistically significantly reduced the intensity of biofilm for-

mation by *S. aureus*. Since the CIP contains a large number of various immunoglobulins, when using it, it causes a strictly specific interaction with microorganisms, which leads to the blocking of their “quorum sensing” (Kaufmann et al., 2011) and to destruction of biofilm formation (Nakayama et al., 2009).

Conclusion. It is shown that the complex immunoglobulin is highly effective in reducing the biofilm formation by strains of *Staphylococcus aureus*.

THE PHANTOM MENACE OF MOBILE PHONES

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It is known that in humans, there are more than 400 species of microorganisms several billion in number, and they are mainly located in different biotopes organism. These habitats include the gastrointestinal tract, upper respiratory tract, urinary tract, and skin. If you do not respect the rules of hygiene, in a weakened body microorganisms, getting from one habitat to another, can become pathogens.

Purpose. Identification of microorganisms on the surface of the cell phones and the risk of human infection.

Material and methods. We explore different brand phones in adults (n = 24). Identification of microorganisms was performed by conventional bacteriological methods.

Results. The mobile phone is always communicating man is in constant contact with his palms of hands, skin and outer ear. In addition, microorganisms can enter phone through clothing, cover the phone by shaking hands with others in the transition of money from hand to hand in the toilet, in transport and in other places.

As is known, there is no opportunity to wash and disinfect the telephones, so the number of microorganisms on their surface averaged 1×10^4 - 1×10^8 colony forming units/milliliter (CFU/ml). Each six telephone (n = 4) of the surveyed detected *Escherichia coli*, and the surface of the mobile phone inoculated *Staphylococcus aureus*, *Candida* spp. Some phones also identified mites causing demadekoz.

The number of bacteria on the surface of the mobile phone was 18 times larger than the handle bowl toilets. Take into account that some of the bacteria find favorable conditions for growth on the surface of the mobile phone. This are explained by the fact that mobile phones are constantly in contact with the palm sweating man who is always protected from direct sunlight and other causes.

Researchers at the University of Arizona (USA) were detected in a fairly large number of microorganisms causing human food poisoning or diarrhea (*pseudomonas*, *bacillus*, *enterobacteria*) on the surface of the mobile phone, they were plated to an average of 4000 microorganisms in 1 cm² phones.

Here are some human diseases, caused by bacteria from the surface of mobile phones: the nature of microbial diseases of the skin; fungal skin lesions; skin disease caused by tiny parasites (ticks demadekoz); diseases of the upper respiratory tract; various viral diseases; diarrheal diseases and others.

We found it useful to bring conditions in which disease can occur:

- Talking on mobile phone while eating, especially in the family (breakfast, lunch, dinner), you can not put your phone on a tablecloth, because being on the surface of the bacteria got into the gastrointestinal tract nutritional way, can cause disease, especially in sensitive areas of the population - children, the elderly and pregnant women;
- Children at play with a mobile phone can take it in your mouth, which is not inher-

ent in the microflora of adult children can get into the child's body and cause infections.

Given the fact that mobile phones are constantly in close contact with the human hand and mouth, they must be cleaned with antibacterial agents. Currently, to solve this problem in a variety of different fields of study are held. For example, in some countries, the unit produced «Phone Soap» and other similar devices that mobile phones disinfected with ultraviolet rays while they recharge.

Conclusion. Given the fact that the spread and infection of human pathogenic and opportunistic microorganisms mobile phones create favorable conditions, we believe that there is a latent threat of mobile phones. For the purpose of disinfection, we recommend that from time to time to wipe mobile phones with wool soaked in 70^o ethanol.

CONDITION OF EXTERNAL RESPIRATION IN THE 1ST YEAR STUDENTS OF KAZNMU UNIVERSITY

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KazNMU

Kazakhstan is accepting a lot of abroad students to study. In KazNMU not only foreign students come, but also students from different places of Kazakhstan. During this period, everybody will face with replacement adapting period. According to research material, it is proved that migration will relate to their cardio-respiratory system. Therefore the research of the functional state of student`s respiratory system as a special social group with their own specific features of working, living, recreation, lifestyle during studying at the university and depending on the climatic - geographical conditions was not conducted. To assessment the condition of health as an indicator of adaptation is used respiratory system that is actively involved in all aspects functioning of the body [1,2].

Aims of this research work: To estimate the functional reserves of the external respiration to characterize the health of students and adaptation to climatic and geographic conditions of Almaty.

In our work we were researched 80 students of first year who study at KAZNMU. Among these students 40 people came from India and another 40 are local people who came from other regions of Kazakhstan. Regarding to medical certificate card (086) all of them are practical healthy people and their age between 17 and 19 years old.

In order to evaluate the external respiratory system followed to these methods:

1. Online survey. The questionnaire composed of 5 questions, which related to influencing factors on adaption of organism to environment.

2. Indicators of external respiration evaluated with spirometer method to determine the Vital Capacity (Tidal volume, Reserve exhalation and inhalation), the frequency of breathing per minute, minute volume in ml [3].

Analysis of these tables revealed a number of laws: 1. Online questionnaire revealed that the majority of students noted that the most influencing factor to physiological adaptation is lifestyle 48%. 2. Regarding to the result all correspondent students vital capacity satisfy on spirometer methods - in Kazakhstan students 3000ml, in Indian students -3500 ml. 3. In Kazakhstan students the frequency of breathing (tim/min) - 16 and minute breathing volume (ml) - 9000, it is in proper level and indicates that they do not have any pathological changing, but at Indian students these results are higher, the frequency of breathing (tim/min) - 18 and

minute breathing volume (ml) – 14000.

We need to pay attention to fact that Indian students spirometrical results show high indicators than local people.

From point of view, the increasing parameters of external breathing of healthy students from India explained that during adaptation processes happen on functional structures, aimed to ability of respiratory system to change in environmental conditions. So, the rise of Vital capacity, the frequency of breathing and minute breathing volume enable to increase the surface of lungs and make a condition to be able on satisfactions lung ventilation at increasing the metabolize supply of organism and an adaption reaction.

STUDYING OF THE ACTUAL FOOD OF STUDENTS OF THE PHYSICIAN OF PEDAGOGICAL FACULTY

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The important role in ensuring quality of human life, its physical and mental health, life expectancy is a balanced diet. It is obvious that optimization of food is not only a medical, but also social problem. Food together with physical activity belongs to the elements of daily behavior forming the health of the person.

Research objective. Studying of the actual food and assessment of the food status of students of higher educational institutions.

Materials and methods. The food behavior of students who were studied during specially developed questionnaire within 10 days became object of the research conducted by us. In the questionnaire there were following questions: A full name, age, sex, whether always you have breakfast before leaving for study, how many times a day do you eat? Food reception hours. How many times a day do you accept hot dishes? List of dishes (products) consumed by you yesterday for breakfast, a lunch, a mid-morning snack, a dinner. Students of 3 courses of the European stream of medico-pedagogical faculty of the Fergana branch of the Tashkent medical academy were interrogated. The total number of students - 40. The males among respondents were 28, females 12.

Results of research. The analysis of frequency rate of meals of students showed that only 25% of respondents eat 4 times a day, most of respondents eat 3 times a day. During poll it was found out that only 5,6% of students have a full-fledged breakfast.

The analysis of answers to a question, "What products prevail in your diet?" showed that 100% of participants daily give preference bakery and flour-grinding products, tea, to fruit and products of their processing (50%), dairy products (78,5%), sugar and confectionery – 65%, fish and products of the sea – 1% .

Answering more certain question "What products do you use during the day?" 100% of respondents answered that in their diet there is constantly a bread, 87,5% of respondents answered that consume soup dishes, and 75% of respondents answered that consume samosa, generally in a lunch break, in 50% of cases in a diet all respondents have a chocolate, plov and salad. Regularly eat from dairy products: sour cream, cream and cottage cheese (on 12,5%), butter, firm cheese and con-

densed milk (on 25%), eggs of hens – 37,5%, sweets prevail in a diet: on 37,5% - jam and cake, honey – 25%. From drinks more than a half of 67,5% prefer tea and coffee, juice (25%) and compote (12,5%), sausages is available only for 25% of students. From fruit in a diet there is an apple (37,5%), citrus – 12,5%.

Showed to data of questioning that generally, respondents in a day receive on average 52,45 mg of proteins, 64,19 mg of fats and 195,96 mg of carbohydrates. The power value of food made 1469,9 kcal. In norm of a proteins, fats and carbohydrates for the first group of intensity of work, that is for the persons who are engaged in brainwork on average have to make 80-100, 90-110 and 350-400 g accordingly. The power value of food has to average 2200-2500 kcal.

Conclusion. Thus, according to the conducted sociological research it is established that the students of the Fergana branch of the Tashkent medical academy who initially have sufficient I.Q., motivated on findings of high level of professional knowledge are not accustomed, motivations for observance of rules of optimum food, so and for formation and maintenance of health. Results of poll testify that the diet of students does not correspond to the hygienic principles of optimum food, their daily diet generally carbohydrate, with insufficient amount of animal protein, deficiency of vitamins and microcells. The hobby for tea, coffee comes to light.

HEALTHY CHILD – DEVELOPMENT OF FUTURE

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Human health - an important set of internal factors and external impressions formed during growth and development. In this regard, the younger generation, and to strengthen our health care Hygienists one of the main problems contingent of children and adolescents is studying health indicators. Children studying the health and the health of the teenager or absence of diseases in accordance with the age of the efficiency of thematic but harmonious with the (harmonic) development, as well as the main indicators of the organism is determined by the state of normative level. Normalization healthy lifestyle should be for them.

Healthy lifestyle - specific health care of the population, to help restore and strengthen the style moral. To regain a healthy lifestyle not only medical, but also the socio-economic category as well, it will depend on the production and development of the relations of production. Choose a healthy lifestyle negative vital to the health of the person is connected to a separate social groups and the general public hygiene means to have a high level of culture.

Each is a group of people that it cared about the health of the boy. In this case, the family, school, neighborhood, health, physical education and sport institutions, and the need to help others.

Oxygen transportation system also provides tissue develops slowly and reaches the age of maturity 16-17. Taking into consideration that it Hygienists children are advised to limit physical workload. At the age of only adolescence heart and the cardiovascular and respiratory systems morfofunction mining continued to progress the development of the physical workload, performance and durability is inadequate.

We have a contingent of children with diseases of the blood vessels of the heart disease on the basis of statistical data twine. FERGANA REGION analysis of childhood diseases in 2014, Operation ill blind following results: They are 30-35% incidence of angina and myocardial infarction will. Total 4310 event rural population of 2032 people, the rural population between 1162 (49%) create girly. You were all registered as of March 1, the diagnosis thematics total INDICATORS 1142 (26%), and 504 (44%) create a more girly. From this production, reduce child morbidity between the procedures and measures to prevent it should. because healthy children are our future prosperity.

Now Hygienists reduction in the open air on the watch division, decreased locomotor activity in children. The children's agenda is the basis of their mentally and physically to ensure the healthy development of the following.

1. House, and the main parts of the training school.
2. Be more than the free fall pivotal holiday.
3. Adequate and catering at the time.
4. Hygienic full sleep.

Thus, academic, labor and sport activities in relation to particular types of functional theoretical preparedness in the form of a time, so for a variety of activities also environmental factors analyzers or functional systems, the effect of the current should differential normalization. less than moving and, most importantly, the nervous stored in a psychiatric tensions. Defense should be the main task to explain.

STUDY OF FUNCTIONAL ACTIVITY OF PERIPHERAL BLOOD MONONUCLEAR CELLS TO ASSESS TREATMENT EFFICACY IN THE LYME BORRELIOSIS AND TICK-BORNE ENCEPHALITIS PATIENTS

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Lyme borreliosis (LB) and tick-borne encephalitis (TBE) are feral herd infections transmitted to humans via tick bites. The functional status of lymphocytes is known to represent immune response to infectious agents, which can be assessed by some morphological features of the cells. The nucleoli are the sites of ribosomal RNA synthesis that localized in the nucleolus organizer regions (NORs) associated with the clusters of ribosomal genes of acrocentric chromosomes 13, 14, 15, 21 and 22 (D and G groups). The number and size of argyrophilic NORs, which can be modified by some exogenous factors, correlate with the level of ribosomal DNA transcription and the degree of cell proliferation.

The objective of the study is to assess size characteristics of the argyrophilic NORs in phytohemagglutinin (PHA)-stimulated peripheral blood lymphocytes of LB and TBE patients.

Materials And Methods. The blood samples were obtained from 7 TBE patients and 8 acute LB patients (a median age of 39 years) on the 1st and 30th day of the onset of illness before and after anti-LB antibiotic or specific anti-TBE immunoglobulin treatment. The control group, a median age of 38 years, was comprised of 9 healthy individuals without any history of LB or TBE and tick bites. Peripheral blood

lymphocyte cultures were stimulated with PHA and incubated in 37°C for 72 h for the lymphocyte blastogenic response assay. Smears were dried in air and fixed in absolute ethanol. The silver staining method for argyrophilic NORs-associated proteins has been used to visualize the NORs in nuclei. Smears were examined with an optical microscope under a x100 oil immersion lens. The total area of argyrophilic NORs in the nucleus was estimated by the PC program "ImageJ". The number and size of the small ring-shaped and large "compact" NORs were assessed in 200 lymphocytes in each individual. A statistical analysis was conducted using the Statistica 10.0 standard software package. To detect statistically significant differences between independent or dependent groups, the nonparametric Mann-Whitney or Wilcoxon tests were used, respectively. The critical significance level (P) for the examination of statistical hypotheses was taken as 0.05.

Results. Before treatment the results of lymphocyte blastogenic response assay were demonstrated the significant depression in PHA-induced proliferative response in LB and TBE patients as compared the controls ($P < 0.01$). The levels of large "compact" NORs were significantly lower as well as the number of small ring-shaped NORs were considerably higher in the both groups of LB and TBE patients before treatment as compared the healthy control group ($P < 0.01$). After the treatment, the significant increase in the frequency of the large "compact" NORs were detected in the groups of LB and TBE patients as compared the results obtained before treatment ($P < 0.05$), which positively correlated with the data of blastogenic response assay. The results can be associated with the recovery of lymphocyte functional activity after the treatment and may be used to assess the effectiveness of therapy.

THE PREVALENCE OF TUBERCULOSIS IN UZBEKISTAN

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The storms, ecological accidents, poverty and social changes have been leading to the increase of tuberculosis diseases and epidemiologic condition. According to the data of WHO (World Health Organization), approximately 2,1 billion people were influenced by tuberculosis in the world. From them 10% people may be occur tuberculosis in their life, the AIDS is significant in this case.

Despite of several preventive measures against tuberculosis in Uzbekistan and the aids which were given by international and foreign companies the epidemiologic condition still remains severe. Every year about 18-20 thousand people suffer from active form of tuberculosis and more than 2 thousand patients die as result of this disease.

In our Republic tuberculosis made up 5,2% among infectious diseases, the most spread infectious disease AIPV - 75,1%. The analyses of tuberculosis who has been registered during 2000-2014 in the Republic of Uzbekistan gave the following results.

The initial year of the analysis - in 2000 in our Republic, with the primary diagnosis of tuberculosis (intensive index for every 100 thousand population - 64,5) patients were noted, but in the Republic of Karakalpakistan (intensive index for every 100 thousand population - 127), we determined the highest index in the Republic of Karakalpakistan in all analyzing period. In 2002 the morbidity index with tuberculosis in Uzbekistan - 79,1, Karakalpakistan - 182,8 (intensive index to every 100

thousand population). We can say as positive turning of decreasing tendency of the morbidity index was marked from 2003. Such case continued the next years of analyzing and decreasing degree was observed significantly. Mainly in 2013 the registered morbidity rate in Uzbekistan (intensive index – 50,8), the degree of morbidity with this disease was observed less than 1,6 times than 2002.

It was revealed 1024 focuses of family tuberculosis according to the analyses of 2013 in different regions of the Republic and the Republic of and the most focuses of family tuberculosis cases were detected in the Republic of Karakalpakistan - 249 cases. The next places in Khorezm region- 107, in Samarkand region - 81.

One of the leading factors of prevalence of tuberculosis is social factor which develops the epidemiologic process. The morbidity with tuberculosis by its spreading in 2014 in our Republic, the incidence with this disease is more higher among the population of rural areas than in urban areas.

Thus, the analysis of tuberculosis which were registered during 2000-2014 in the Republic of Uzbekistan and the Republic of Karakalpakistan shows that continues decreasing tendency have been marking in the dynamics of disease.

DESCRIPTION OF CONTENTS NASOPHARYNGEAL MICROFLORA IN PATIENTS IN ACUTE PURULENT SINUSITIS

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The most common concept of the etiology and pathogenesis of diseases of the paranasal sinuses confirm the nature of the problem to determine their nature and indicate their direct connection with the status of bacterial nasal and oral hygiene status and level of immune resistance. The microflora of the nasopharynx, the mouth is a highly sensitive indicator system responsive qualitative and quantitative shifts to changes in the activity of the inflammatory destructive processes in the tissues of the maxillary sinuses and state bodies in active systems. In this context, the study is of interest microbiocenosis nasopharynx in patients with acute purulent sinusitis.

Purpose of the study. To evaluate changes in the microbial landscape of the nasopharynx in patients with acute purulent sinusitis.

Materials and methods. We studied 17 outpatients with acute purulent sinusitis, and the control group consisted of 13 healthy people matched for age and sex. In all patients studied microflora content of the nasopharynx. The microorganisms were identified to genus and species.

Results. The patients with a healthy microflora nasopharynx contains both aerobic and facultative organisms. Total 39 strains isolated from these 35 strains belonged to obligate constant (89.8%) 4 microflora strains (10.2%) - a non-constant. In healthy people in the nasopharynx was dominated by gram-positive coccal flora (48.7%) and gram-positive rods (*Diphtheroid* spp.,) 46,2%, the proportion of fungi and gram-negative rods was only 51%, respectively. Among the identified strains of 7.8% with hemolytic properties. In patients with acute purulent sinusitis just been allocated 59 strains of microorganisms. Of these, 35 strains belonged to obligate constant (59.3)% microflora, and 24 strains (40.7%) to the non-permanent, and inoculation increased total count per 1 ml of the contents of the nasopharynx on average $11,662 \pm 515$ CFU ml⁻¹.

these figures are significantly 7.5 times higher than in healthy individuals ($p < 0,001$), as well as in the main group was an increase in bacteria *S.aureus* inoculation to 25.4% hemolytic streptococcus - to 30.3%, and *Pseudomonas aeruginosa* to - 15.2%.

Thus, in the nasopharynx of patients with acute purulent sinusitis in exacerbation along with a reduction in the natural inhabitants of the nasopharynx, the microorganisms were not characteristic of this biotope: *P. aeruginosa*., *Escherichia coli*. Also increased the number of *S. aureus* and *Streptococcus* with hemolytic activity, which creates the conditions for starting an immune response to microbial antigens involved in the inflammatory process.

A FOOD AS THE LEADING FACTOR IN MAINTENANCE OF HEALTH OF WOMEN OF REPRODUCTIVE AGE

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In connection with technical achievements of the XX-th century and in this connection, decrease in power inputs and physical activity, at the modern person the diet and food structure has essentially changed. In it deficiency of many micronutrients is marked different degree of expressiveness.

The Aim Of The Research is scientific justification to increase the efficiency of power in maintaining the health of women of childbearing age Fergana region.

Materials And Methods. Studying of a food also was spent to 2014-2015 by questioning on casual samples of women of 15-49 years on the Fergana area.

Results Of The Study. Women with an ill health on the Fergana area made - 11,7 %. A parity of fats and carbohydrates in a daily food allowance of women, on the average, did not correspond to the sizes recommended the CART. The power contribution has made: fats - 22-24 %; the squirrel - 8-9 %; carbohydrates - 67-69 %. At the majority of the interrogated women of size of their consumption did not correspond to norms of consumption and did not answer principles of a healthy food. Deficiency of vitamin C, calcium, vitamin B1, vitamin B2 and iron was observed. Food habits of the majority of the interrogated women do not correspond to principles of a healthy food: only 15-26 % of women used recommended quantity of fruit and vegetables daily; only 25-50 % of women used usual (3,2-3,5: fat contents) milk; more than 50 % of women used butter for sandwiches; About 40 % of women used superfluous quantity of salt. As a result of our researches, at 16 women and girls the increase in the sizes of a thyroid gland is revealed. 61-70 % surveyed suffer an anaemia, among them prevail iron-deficiency anaemia. In such women are found out insufficiency of vitamins A, B-12, B-6. According to poll, 39,8 % interrogated use meat and meat products 1-2 times a week, (9 % - 1-2 times a month, 17,7 % - are more rare, 46,7 % interrogated use fruit during the winter period 3-4 times a week, 20,7 % - 1-2 times a month, 17,3 % - are rare. The given indicators at investigated group of women on 35-40 % are worse, than among men of similar age group. Studying of an anaemia among 1500 women фертильного age from the Fergana area, has shown that the given pathology meets among women is more senior 35 years (44 %), than in age categories of 15-18 years (28,5 %) and 19-35 years (25,1 %) much more often. Among women frequency of an anaemia of heavy degree in 2 times above (1,7 %) is more senior 35 years, than at women is elderly till 35 years (0,76 %). Among this category of women such actions, as weekly reception of preparations of iron,

the use of enriched flour production, balanced diet propagation are most effective.

Conclusion. 1. The alimentary factor is the leader in maintenance of health of women fertile age.

2. The importance of alimentary factors, including biologically active additives in maintenance of healthy reproductive function of women, has the certain laws connected with superfluous and insufficient receipt with food in an organism valuable nutrients, pharmacological substances of food.

3. Among local foodstuff there is wide enough assortment of kinds and the grades, the physical maintenance physical and mental status of women fertile age.

THE STUDY OF SOME INDICATORS OF CALCIUM METABOLISM IN PATIENTS WITH PSORIASIS

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Psoriasis - a chronic immune-heterogeneous hyperproliferative skin disease with a possible associative defeat other organs and systems. According to the clinical and statistical data, psoriasis affects 1-3% of the world population. In recent years there has been growth in the number of severe forms of the diseases that are resistant to therapy. Psoriasis significantly reduces the quality of life and the associated metabolic, cardiovascular disease (CVD) and depression, reduces the life expectancy of patients. Psoriasis is a multifactorial immune-dermatosis with a genetic predisposition. Important changes in the level of calcium-hormones and disorders of mineral and vitamin metabolism (deficiency of vitamins B1 and B6, reduction of calcium, magnesium, etc.). The study of these aspects of the pathogenesis and development of methods of correction remain relevant and contribute to the effectiveness of the treatment and prevention of bone and joint complications in psoriasis.

The purpose of research is assessment of calcium metabolism in patients with psoriasis and psoriatic arthritis in content substance (regulate calcium) hormone and calcium levels in the blood.

Material and methods. Conducts in clinical observations 27 patients with psoriasis vulgaris patients, aged 20-35 years, on the basis of Tashkent regional skin venereal dispensary. All patients had widespread skin lesions of the trunk, extremities, scalp typical lenticular-patchy rash. Onychodystrophy were observed in 16 patients with psoriatic arthropathy - in 6 patients. Comorbidities were found in 12 patients: hepatocholecystitis, fatty liver, hypertension, type 2 diabetes mellitus. There was hypercholesterolemia, dyslipidemia, elevated ALT, AST.

The level of total and ionized calcium and concentration of calcitonin in the blood with immunocardiology method were study. The results indicate an imbalance substance (regulate calcium) hormones in patients with psoriasis: marked increase in the concentration of parathyroid hormone due to lower concentrations of calcitonin and a significant reduction in blood calcium. Revealed hyperparathyroidism obviously develops secondary to prolonged hypocalcemia, which in turn is associated with malabsorption of calcium in the intestine. This indicates the need to include a complex correction targeted therapy of psoriasis and psoriatic arthritis.

PECULIARITIES OF SPONTANEOUS PRODUCTION OF CYTOKINES IN PATIENTS WITH BASAL- CELLULAR SKINCANCER

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Urgency of the theme. Basal cellular skin cancer is the most frequently oncologic problem of skin in persons of middle age. Content of cytokines in blood is immediate reflection of condition of immune system the same time. Typical immunological replacement in skin tumors are typical that presents the interest for understanding of pathogenesis, development of new methods of diagnostics, assessment of prognosis and adequate scheme of immunotherapy.

Purpose of research. to assess the immune status of patients with basal cellular skin cancer and indexes of secretion of the main cytokines of immune system.

Material and methods. It has been studied the level of spontaneous production of the main cytokines of immune system in 45 patients with basal cellular skin cancer (BCC) at the age of 33-85. Surface forms of BCC (SF BCC) was in 19, nodular (NF BCC) - in 12 and ulcerative (UF BCC) - in 14. Remoteness of the disease varied within 1-10 years. At the stage of T1NOMO was in 7 patients, T2NOMO - 33, T3NOMO - 5 patients. Tumors localized on the skin of the trunk, temple, cheek, lower extremities, forehead and nose. Histological superficial multicentric type - in 7 patients, superficial multicentric type with solid component - in 3 patients, in 2 patients solid type of basalioma was noted.

In patients with BCC the level of IFN - was suppressed in 2,7 times relatively than control which justified about the presence of cellular immunodeficiency and duration of disease. In patients NF BCC the level of IL-4 in 3,4 times increased control but in SF BCC and UF BCC, on the contrary decreased in 1,8 - 1,3 times. As a whole in BCC was observed expressed imbalance of the main regulator cytokines with increasing of anti-inflammatory cytokines of IFN - and suppression of proinflammatory cytokine IL-4 in different forms of BCC ratio of IFN- γ /IL-4 (TX1/TX2) made up 0,4 and 0,37 but in control group - 0,8. Investigating cytokines participate in formation and progression of malignant process and also they have diagnostic and prognostic value in selection of treatment tactics of BCC.

PHAGOCYtic ACTIVITY OF PERIPHERAL BLOOD LEUKOCYTES AT THE OPSONIZATION OF CANDIDA ALBICANS BY INTRAVENOUS IMMUNOGLOBULIN

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The number of fungal infections has grown recently and this requires an increased interest in the study of antifungal immunity mechanisms. However, there is little information about the participation of opsonic mechanisms in the recognition of fungi.

Aim of investigation was to study the effect of intravenous immunoglobulin (Ig) on parameters of phagocytic activity (against *Candida albicans*) of peripheral blood

leukocytes from healthy donors.

Materials and methods. We used the nonopsonized cells and opsonized *C. albicans*. We carried opsonization using a commercial preparation "Octagam" containing IgG with a wide range of specific Ig against a complex of microorganisms. The working concentration of IgG was 20 mg/ml (Deryabin, 2007). We conducted accounting results microscopically by counting the parameters of phagocytic activity of neutrophils and monocytes separately. Statistical analysis used the Student t-test, for significance threshold value accepted $p < 0.05$.

Results. It was determined that the number of non-phagocytic leukocytes with nonopsonized *C. albicans* being used was 4503 ± 501 , and with opsonized *C. albicans* - 4105 ± 480 per $1 \mu\text{l}$ ($p < 0.05$). When using opsonized objects the number of actively phagocytic leukocytes was significantly higher, than in samples with nonopsonized *C. albicans* ($p < 0.05$). The revealed changes of phagocytic activity mostly concerned neutrophils. The number of phagocytic monocytes using opsonized *C. albicans* was 112 ± 36 , and when using nonopsonized objects - 42 ± 5 per $1 \mu\text{l}$ ($p > 0.05$). It is known that mononuclear cells are less dependent on the opsonization of objects by immunoglobulins than granulocytes (Czop et al., 1978). Monocytes more actively absorb apoptotic neutrophils, that contain absorbed yeast cells (Liddiard et al., 2011).

Conclusion. Use of intravenous immunoglobulin can effectively stimulate phagocytic activity for *C. albicans* of neutrophilic leukocytes predominantly, that are then utilized by mononuclear cells.

EPIDEMIOLOGICAL CHARACTERISTICS AND WAYS TO IMPROVE HIV/AIDS PREVENTION

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According to WHO, on HIV/AIDS, today the number of people living with HIV around the globe more than 40 million people. Each year, 2.5 million people is infected with and 1.7 mln people die from this disease. In a world infected per day 7,000 people, 300 people per hour. In Uzbekistan first time HIV was registered in 1987, and until 1999, HIV was determined only in "at risk group". Since 2000, the incidence of new cases of increase of the population. Prior to 2000, reported 154 infected with HIV infections. In 2010 - 3795, in 2012 - 3881. In 2012, 53.9% of sexually parenterally 31.7%, vertical - 3.5%, 11% unknown.

Comparative analysis of the groups in 2012: -52.4% men, women - 47.6%, children up to 14 years - 71.7%, workers and 96.8% of the couple, pregnant - 11.9%, medical staff - 51.9%.

By the beginning of 2013 registered HIV-infected in Tashkent - 7967, Andijan - 4410, Tashkent region - 4181, Samarkand - 1982, Fergana - 1855, Namangan - 947, Bukhara - 717, Syrhandarya - 539, Harezmi - 462, Kashkadarya - 531 Djizzak - 234, Nava - 148, Republic of Karakalpakstan - 144.

Objective. determined the incidence of HIV/AIDS infection and the development of new ways to improve activities.

Materials and methods. Official data from the incidence of HIV / AIDS infections

in the years from 2000-2013 CSSES the Republic of Uzbekistan and the Center for AIDS and their reports.

In HIV infection need to pay attention to:

1. Avoid sexual intercourse with unfamiliar and those leading promiscuous sex life.
2. When handling parenteral use only disposable syringes and needles.
3. If personal hygiene - do not use someone else's razor and toothbrush.
4. Avoid direct contact with the blood of another person.
5. When entering the blood or body fluids at the surface of the skin open with plenty of water and soap.
6. If you do not wound with a sterile needle and other cutting tools excretion of blood and seek immediate medical personnel.

Conclusions. The main objective of improving the way the fight against HIV/AIDS, early identification of infected persons, set to medical control and development of new methods of improvement preventive measures.

THE RESEARCH OF THE ENERGY EXPENDITURE OF STUDENTS AT FERGHANA BRANCH OF TASHKENT MEDICAL ACADEMY

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There are two types of energy expenditure in human organism: 1) unregulated waste of energy 2) regulated power consumption. Unregulated energy consumption includes energy expenditure for basic metabolism and energy cost for specifically-dynamic action of food. Energy, which was spent for basic metabolism, is used for keeping life-supporting organs up on the maintain data in the required conditions. Regulated energy waste includes consumption of energy during the work activity, domestic and household behavior, during the sport and other activities.

The purpose of the research. To study the energy consumption of the students of medical preventive faculty from 1th to 6th courses of Ferghana branch of Tashkent Medical Academy

The objective of the research. Determination of regulated and unregulated energy expenditure of student with the calculating method

Materials and methods of research. From the medical preventive faculty was selectively chosen 65 students from 1th to 6th course. The numbers of chosen students were: from 1st course - 16, from 2nd course - 13, from 3rd course - 8, from 4th - 10, from 5th - 8, from 6th - 12. To determine the regulated expenditure of energy was used method of timing and for this every student compiled a chronogram of the day that reflected the duration of performed work by its separate types, time of resting with the indication of work during it, duration of walking and sleeping. Unregulated energy expenditure including the value of basic metabolism was determined with the help of tables Harris-Benedict, and specifically-dynamic action of food (SDAF) was calculated from basic metabolism, which increases to 10% while mixed nutrition. The regulated and unregulated energy consumption were summarized to determine the daily energy expenditure.

Results of the research: regulated energy consumption of the students of 1st-course was an average of 2444 kcal, 2nd course 2431 kcal, 3rd course 2502 kcal, and 4th course 2285 kcal, 5th course 2320 kcal, 6th course 2240 kcal. The normal amount of regulated expenditure of energy for the first group of labor intensity is 2300 kcal.

Unregulated energy expenditure of 1st course amounted to 1820 kcal, respectively SDAF 182 calories, 2nd course 1415/142 kcal, 3rd course 1935/194 kcal, 4th course 1310/131 kcal, 5th course 690/169 kcal, , 6th course 1713/171 kcal. The value of basic metabolism averaged to 1647 kcal, specifically-dynamic action of food was 165 kcal.

Daily consumption of energy of students was in average 4181 kcal. The daily consumption of energy for people with mental activity is in average 3800 kcal.

Conclusion: 1. During the research of regulated energy consumption of students from 1 to 3 courses were above the mark. This indicates that they spend the most of their time (3.2-4 hours) to do home assignments.

2. Unregulated energy expenditure of students 1, 3, 5, 6 courses was identified in large numbers. This explains the fact that in this courses researched contingent (70%) was male.

STUDYING OF DISTRIBUTION OF DISEASE LYAMBLOZ AMONG YOUTH IN THE CITY OF FERGHANA

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Theme urgency. For the first time parasite lyamblia was shown 1859 to year scientist D.F.Lyambli. Disease caused intestinal lyamblia is called lyamblioz. lyamblioz widespread all over the world. Activator Lyamblioz basically is transferred through water, a foodstuff and a kontaktno-household way. At present lyamblioz it is considered the disease meeting among children. For definition and studying of clinic-epidemiological features lyamblioz and shares of protozoan infections among sharp intestinal infections we have laid down to ourselves the aim "To Study position of distribution of disease lyamblioz among young" 1. Studying diseases lyamblioz among the young; 2. An eminence of ways of elimination and specification of the reasons and the factors of groups of youth infected most of all.

Ways of check. Distribution of disease among youth is studied with the help epidemiological check. With the help parasitologic ways degree of infection of the population is studied.

Results of check. Our checks for the purpose of definition of degree of infection among children in laboratory of parasitology D.S.S.E.S. Have shown, that in 2008 at children from 1 till 3 years makes 25 (16 %), at children from 1 to 4 20 (13 %), at the age from 6 to 12 24 (16 %), at the age from 12 to 16 - 18 (12 %), at adults from 20 to 50 - 10 (6 %), at the unorganized population 36 (24 %). In 2009 at children from 1 till 3 years makes 30 (14 %), at children from 1 till 4 years 35 (7 %), at the age from 6 to 12 36 (17 %), at the age from 12 to 16 - 25 (12 %), at adults at the age from 20 to 50 20 (9 %), at the unorganized population 18 (8 %), and at the organised population 40 (19 %).

Conclusion. The Above-stated indicators show, that disease at children from 1

till 3 years and from 6 till 12 years above, than at the others. Also long-term periodicity of disease was not defined and identical level in a current of many years was observed. It was defined, that at the organised collective disease indicators above, than at the unorganized. Such results show, that the role of social factors plays a high role in disease distribution.

The recommendation: 1. Maintenance the population qualitative potable water; 2. To reach concept about personal hygiene by carrying out of educational works at schools and preschool centres; 3. It is necessary to reach introduction of planned preventive checks in child care centres, for definition протозоев, and as disease lyamblioz.

BACTERIOLOGICAL INDEXES OF INTESTINAL MICROFLORA CHANGES IN HIV PATIENTS

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In recent years the trends of fast spreading of HIV infections have been observed. Annually from, 4, 3 to 6, 6 million people influence with HIV infection and more than 2 million people die from this disease. One of the main clinics of silent period of HIV infection is a syndrome of prolonged diarrhea, which it can lead to dehydration and loss of weight of organism. In HIV infection the connection of gastro – intestinal system to pathologic process occurs different terms of the disease. It can be developed not only morphological disorders of the walls intestine but the decreasing of its resistance, development of intestinal dysbacteriosis ,severe course and development of infectious process that is capable to recurrence .

The purpose of research. To study the condition of dysbacteriosis of intestinal microflora in HIV patients.

Scientific novelty. It has been studied for the first time the large intestine microbiocenosis of HIV patients in Uzbekistan.

The tasks of research. To reveal the degrees of colon microbiocenosis condition and intestinal dysbacteriosis in patients with HIV.

Material and methods. For investigation the material were taken the results of patients, who have been admitted to the clinic of specific infectious diseases under the Republican center of fighting against the AIDS and bacteriologic investigations were performed in bacteriologic laboratory of this clinic. 17 patients with diarrhea syndrome II-III-IV sub clinic degree were selected for investigation and the degrees of disease were marked on the basis of order № 81, March 4, 2015 of the Health Ministry of the Republic of Uzbekistan. From them 8(47%) – men, 9(53%) – women, the age of them from 18-30(average 25). Patients faeces were diluted with physiologic solution in 1:10 and Endo, blood agar, blood agar for bacteriods, MRE-4 (selective environment for reduction of milk) for lactobacteria, Blaurocco for bifidobacteria, Saburo for fungi, Kitta-Tarotstsi for clostridia, Vilson-Bler conditions were planted by Gold method and put into thermostat to 37° C, 18-24, 48-72 hours. Identification of microorganisms was carried out by general standard methods.

The results of research. After the bacteriologic investigation of II-degree pa-

tients' faeces of dysbacteriosis was revealed in patients. *E. coli* 105 CMU/g, quantity of lactose negative *E. coli* >106, *Lactobacillus* spp. > 104 CMU/g, *Bifidobacterium* spp. >103 CMU/g, *Bacteroid* spp. >104 CMU /g, *Enterococcus* spp. decreased than in norm, condition – pathogen microbes: *Klebsiella* spp., *Enterobacter* spp., *Citrobacter* spp., *Proteus* spp. 106 CMU / g, *Candida* >107 CMU /g, and also the quantity of pathogen hemolytic *E. coli*, *Streptococcus* spp., *S. aureus* agents were determined.

Conclusion. 1. II-degree of dysbacteriosis of intestinal microflora was observed in all stages of disease in patients with HIV infection. 2. The decrease of general quantity of indigene microflora in patients, especially the quantity of bifido-, lacto bacteria, and bacterioids and conditional-pathogen microorganisms decreased more than 2-3 times.

THE IMPORTANCE OF GOOD FOOD IN THE FAMILY AS A FACTOR IN THE PREVENTION OF TUBERCULOSIS

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According to WHO, a high risk of tuberculosis are economically undeveloped countries. According to the forecast for the next 30 years the number of tuberculosis cases could reach 90 million. Currently, the globe recorded 9 million. TB patients, 60% of them in developing countries. Every year, tuberculosis kills about 3.4 million. People. In Uzbekistan, a number of authors fully explored distribution, and for the incidence of tuberculosis. But despite the advances in diagnosis and treatment of disease, the incidence remains high. Hygienic assessment of nutritional status and development of measures for the balanced nutrition of the population of the Republic of Uzbekistan among the risk factors for tuberculosis are not fully understood.

The Purpose And Research Problems. To study the incidence of tuberculosis in the Fergana region, and to develop a balanced diet for patients with tuberculosis.

Materials And Methods Of Research. In the study of family nutrition used interrogatory-weighting and weighting methods.

Results Of The Study. The incidence of tuberculosis in the Fergana region amounted in 2000 - 50.6%, 2001 - 60.0%, 2003 - 70.0% to 100 thousand. Population, the highest rate was in 2006 - 65,9%. Of the above it is clear that in 2006 - compared to 2000, the incidence of TB has increased by 15.3%.

In the study of actual nutrition patients with tuberculosis energy value of the diet was 2300 kcal. It was established deficiency of proteins, fats and vitamins. Carried out hygienic assessment of actual nutrition patients with tuberculosis made it possible to create, develop objectives and principles of good nutrition. In the study of dietary energy it was scientifically proved full payment of lost energy, stimulation of assimilation, repair, improvement and balanced unbalanced immunological reactions of the body against disease factors.

In the study of dietary intake among TB patients showed the following performance indicators are as follows: in 46% of cases - not complied with the diet, 29% - do not eat breakfast, 55-63% - did not comply with a balanced diet, in turn, intervals and mealtime. The results indicate the failure of the following elements: protein - 21% fat - 29% of essential amino acids - 31% vitamins - 27% and minerals - 21%.

Conclusions. We found that a violation of the balance of nutrients in the daily diet, failure to comply with a variety of food and sanitation, the discrepancy comes

from food into the body of energy in comparison with the energy consumed, leading to the development of the disease.

When the permanent status of the power structure and function of the body is not disturbed, increased adaptation to external factors. When stress states of the organism in an optimum position not observed shifts and homeostasis.

As a result, unbalanced, inadequate nutrition and waste, as well as under the influence of other negative factors in the body may experience a decrease in functions and adaptation leading to the development of Mycobacterium tuberculosis in the organism. To prevent the disease in the daily diet should enter poultry meat, grapes, pomegranate, pumpkin juice, tea with honey, mother's milk, goat's milk and honey. Enrichment of the diet in essential amino acids (methionine, cystine), half-saturated fatty acids (arachidonyl, linola) and vitamins A, B1, B2, B6, B12, B15 is particularly important in the prevention of various forms of tuberculosis.

THE IMPORTANCE OF A HEALTHY LIFESTYLE TO PREVENT DISEASE FAMILY

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According to the World Health Organization, tuberculosis growing economic power is limited to countries with a high birth rate. The number of TB patients in the next 30 to 90 million predicted. Currently, the world's 9 million people mentioned diseases, 60% of them in developing countries. The globe a total of 3-4 million people die from TB. In some regions of Uzbekistan, there is a tendency for patients with tuberculosis disease dynamic growth. Spread of tuberculosis in Uzbekistan, dinner and a variety of health indicators studied in detail by the authors. But it should make a note that morbidity his diagnosis of treatment success, the incidence rate is still high.

TB disease risk factors among the population in the country, food hygiene and balanced nutrition measures to assess the state of development remains low learning. TB patients infected with the development of measures for rational nutrition is one of the most urgent problems of the present.

Research methods and materials. Family nutrition survey questionnaire method used in the study.

The results obtained. The actual study of the nutritional diet of patients diagnosed with TB of the energy value of 2,300 kcal. Protein, fat, and noted the lack of vitamins. To assess the actual state hygienic purposes and principles of rational nutrition of patients with TB contributed to the further development of the formation. They learn the true state of nutrition catering Failure to comply with the order of 46% to 29% between 55-63% of eating breakfast in the morning in the asymmetry, determined not to comply with the time interval and nutrition. 21% of TB patients infected with the results obtained from protein, 29% fat, 31% cannot be replaced amino acids, vitamins, 27 % and 21% noted a lack of mineral elements.

TB violation of the balance of the daily ration of food items to a food, and non-compliance with the diversity of food products, sanitary and safety, the value of the power supply corresponds to the power consumption was found to have a negative impact on the development of the disease. The status of permanent food structure and

function of the body intact, adaptation will be higher.

Optimal body's stress tests, no changes in the homeostasis changes. Disproportionate, and not rational enough food and other negative factors impact the status of the organism to function, adaptation may be affected, this disease leads to the formation of the organism *Mycobacterium tuberculosis*.

The parade of the daily diet in the prevention of the disease meats, grapes, pomegranates, pumpkin juice, honey, tea, mother's milk, goat's milk and the mules, the addition of a mixture of honey and milk are recommended.

The disease cannot be replaced food intake of amino acids (methionine, cystitis), a lot of fatty acids (arachidonic, linolen) and vitamins A, B1, B2, B6, B12, v15, TB disease is important in the prevention of various forms of enrichment.

URBANIZATION AND HEALTH OF THE PERSON

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One of the most typical features of development of a modern society is the tachyauxis of cities, continuous rate of augmentation of number of their inhabitants, augmentation of a role of cities in society lives, transformation of countryside in city, and also agricultural population migration in cities.

Urbanization (from the Lat. Urbanus - city) is a process of increase of a role of cities in society development. The special city attitudes cover socially-professional and demographic frame of the population, its mode of life, placement of production and moving. Urbanization preconditions are: industry growth, an excavation of territorial division of labor, development of cultural and political functions of cities. Cities existed from an extreme antiquity; however the urbanity civilization has arisen only in our century. If the planet population as a whole doubles for 35 years, urban population - for 11 years. And the largest centers grow twice faster small cities. In the XIX-th century beginning in world cities lived only 29,3 million persons (3 % of the population of the Earth); by 1900 - 224,4 million (13,6 %); by 1950 - 729 million, (28,8 %); and to 1980 - 1821 million (41,1 %). It is possible to tell that now the majority of citizens of the world are born by townspeople. The urban population lobe in Europe compounds 69 %, in Asia - 38 %, in Africa - 20 %, in the North America - 75 %, Latin America - 65 %, in Australia and Oceania - 76 %. The urban population lobe in the educed countries is especially great: in the USA - about 73 %, in France - 78 %, in Germany - about 85 %, in Great Britain - 91 %. The country is considered almost completely urbanized if 4/5 its population lives in cities.

In big cities have interlaced both positive, and negative sides of scientific and technical progress and industrialization. The new ecological medium with high concentration of anthropogenic factors is created. One them, such as free air contamination, a noise high level, electromagnetic radiations, are industrialization immediate product, others, such as a concentration of the enterprises in the circumscribed terrain, a dense population, migratory processes and so on- an urbanization consequence as moving forms.

Health of people appreciably depends on quality both connatural, and anthropogenic medium. In the conditions of a big city influence on the person of a connatu-

ral component is relaxed, and action of anthropogenic factors is sharply enhanced. Cities in which in rather small terrains a considerable quantity of people concentrates, motor transport and the various enterprises, are the centers of technogenic influence on the nature. Gas and dust exhausts of the industrial enterprises, shunt by them in surrounding reservoirs of sewage, a municipal and household waste of a big city pollute environment various chemical elements.

The urbanization ambiguously reacts on a human society: on the one hand, the city gives the person a series of socioeconomic, social and cultural advantages affects its intellectual development, gives the chance for the best realization of professional and creative abilities, with another - the person keeps away by nature and gets on medium with harmful effects - contaminated air, noise and the vibration circumscribed inhabited terrain, the complicated system of supply, dependence on transport, the constant forced dialogue with set of strangers - all it unfavorable affects on its physical and mental health.

The problems bound to urbanization, it is necessary to solve not separate private actions, finding precocious and ineffective decisions, and having developed a complex of interdependent social, ecological, technical and other measures. In all cases the person and environment should be considered as a unit.

STOMATOLOGY



POSSIBILITY OF CORRECTION OF LIPID SPECTRUM IN PATIENTS WITH POST-INFARCTION CARDIOSCLEROSIS

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Purpose of the study. Assess the impact of long-term therapy of omega-3 PUFA on lipid profile in patients with postinfarction atherosclerosis complicated by heart failure.

Materials and methods. In 125 patients with CHF FC I-III (with the original content of total cholesterol > 4.5 mmol/L and/or the original content of triglycerides > 1.7 mmol/L.) To evaluate the comparative effectiveness of lipid-lowering statin — atorvastatin and omega 3 PUFAs. The patients were divided into two groups: the first group (I) accounted for 67 patients who on the background of basic therapy (beta blockers, ACE inhibitors, antiplatelet agents, statins, spiranolakton) taken against a background of basic therapy (Omacor) at a dose of 1 g/day, the second group (II)— 58 patients receiving basic therapy.

In Group I— patients with I, II and III CHF FC were 16, 26 and 25 patients, respectively, in group II— 15, 24 and 19 patients, respectively. All patients were determined the levels of total bilirubin, ALT, AST, the number of erythrocytes, leukocytes, erythrocyte sedimentation rate in blood, determination of total cholesterol (MBF), high density lipoprotein (HDL) and low density lipoprotein (LDL), triglycerides (TG) at baseline and after 6 months treatment.

Results. Evaluation of the 6-month course of treatment ω -3 PUFAs in patients with CHF showed a good tolerability of Omacor: side effects have been reported in any of the patients. Inclusion in the complex therapy of Omacor has led to in-

creased lipid-lowering efficacy of traditional treatments CHF. The level of TC in the blood by the end of 6 months. Treatment decreased by 16,7% ($p < 0,001$), while in the control group changed its concentration of 15.5% (0.01). On Omacor therapy was revealed changes in the level of LDL cholesterol. By the end of 6 months. therapy group showed decrease in value of the level of low density lipoprotein (LDL) to 22,3% ($p < 0,01$). In the control group, the rate changed to 15.9% (0.01). The content of HDL in serum by the end of 6 months. in the intervention group increased by 30.9% compared to baseline and was 1,1 ($p < 0,0005$). In the control group the level of HDL during the study changed to 23,1% ($p < 0,0005$). By the end of 6 months. Omacor therapy serum Tg levels decreased by 30,5% ($p < 0,0005$) compared with baseline. Traditional therapy has reduced this figure by 21.3%.

Findings. The preparation of omega-3 PUFA (Omacor) has lipidlowering effect of reducing the level of TC, LDL-C, TG and increasing the concentration of HDL in patients with coronary artery disease and heart failure. Our experience of Omacor has shown that the drug has a sufficient efficiency, well tolerated and can be recommended for use in patients with coronary artery disease and heart failure with hypercholesterolemia.

ADHESIVE TIME APPLICATION AS A RISK FACTOR FOR LONGEVITY OF TOOTH COMPOSITE RESTORATION

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At a present time a lot of adhesive systems is implementing in dental restorative practice, but the problem of safe and long integration of composite material with tooth tissues remains unresolved.

The quality of composite adhesion in part is depending on the level of completeness of adhesive infiltration of etched tooth tissues. The presence of zones of incomplete infiltration promotes hydrolytic degradation of a hybrid layer and leads to microgap formation. Application time for adhesive infiltration of demineralized tooth enamel and dentin could be one of the crucial factors for a safe adhesion prognosis and longevity of composite restoration.

That is why the purpose of the present study was to assess the quality of composite to tooth integration in dependence of the application time of liquid adhesive on to an etched surface.

Materials and methods. There were 22 tooth samples under the study in which 44 composite filling were placed in artificially created cavities. The size of cavities was 1 mm in depth and 3 mm in diameter. They were formed on approximal surfaces of every tooth and centered in the cervical part of each one. On each tooth samples were performed two composite filling with the same protocol but different adhesive time application: in the 1st group – 20 sec in accordance with the manufacture instructions, and in the 2nd group – 60 sec. After the polymerization, shaping and polishing of the fillings all samples were subjected to thermocycling, dying in methylene blue, cutting through the center of fillings and examination of dye penetration along the tooth-composite interface.

Results. In accordance to obtained results it was established that prolonged adhesive time application brought no any significant statistical difference to the quality of composite – enamel interface, but differences were noted at the composite – dentin junc-

tion. 60 sec adhesive time application was better for dentin in 1.36 times with $p= 0.042$.

Conclusion. Thus far, 60 sec adhesive time application demonstrated no statistical difference on composite-enamel interface in comparison with 20 sec time application, but was significantly better for the quality of the composite to dentin adhesion.

EXPERIMENTAL STUDY OF BONE INTEGRATION WITH THE SURFACE OF TITANIUM IMPLANT MODIFIED WITH "VECTOR SYSTEM"

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At a present time the quality of dental implant surface along with the method of its treatment and design of implant itself are the actual issues of contemporary implantology. Many studies have shown that the presence of roughness, grooves and pores on the surface of dental implant facilitates mechanical attachment of fibrin and collagen fibers, promotes osteoblasts formation and adhesion of proteins, increases an area of bone integration.

Objective of the study was: to evaluate radiographically the bone integration with the surface of titanium implant modified with "Vector System".

Material and Methods. Study was made on 12 rabbits with a weight ranging from 3.5 to 4 kg. Two implants with different method of surface treatment were placed in every rabbit in one tibia bone. The size (3.2×5 mm.) and design of implants were the same. 12 implants had surfaces treated with sandblasting only (AL2O3 125 microns, 1.5 bar), and another 12 implants additionally were treated with "Vector System" circumferentially at the 2 mm of cervical part of every implant. All implants before installation were ultrasonically rinsed in distilled water and subjected to autoclaving.

For the four months of the study at once after the placement and every fourteenth day of observation a digital radiograph of implants was taken.

Results. Analysis of X-ray examinations did not reveal any differences in the process of osseointegration of titanium implants in 2 groups ($p = 0.003$).

Conclusions. According to the results of the study it is found that the surface of titanium implant treated with "Vector System" is able to integrate with bone within the limits of this experimental study.

THE DIFFERENCE IN FACIAL PROFILE OF MALES AND FEMALES

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Introduction. Harmonious facial profile being an essential part of the overall facial esthetics is estimated according to what gender's profile it belongs. The soft tissue facial profile analysis is one of the essential parts of the contemporary method of cephalometric evaluation of orthodontic patients. Due to the structural features of the facial skeleton in men and women should have a clear idea of the aesthetic problems in the correction of dentofacial anomalies.

The aim of the study was determine differences in facial profile of males and females of soft tissues with orthognathic occlusion.

Material and methods. To solve this problem it has been studied 72 cephalograms and profile photos of persons aged 18-25 with orthognathic occlusion. Cephalograms produced by the machine J.MORITA 3D MFG with cephalostat. Identification of anthropometric points and reference cephalometric planes produced by the method of SS Steiner (1960), V.A. Sassouni (1964), W.V. Downs (1948), R.A. Reidel (1957), Ch. Tweed (1946), R.M. Ricketts (1970), R.A. Holdaway (1983). In order to determine the features of the soft tissue profile of the procedures used G.W. Arnett (2004).

Results and discussions. According to the results of statistical processing of the parameters of the soft tissue profile of the person, a table showing the differences by gender profile of the studied parameters of the soft tissues of the face is presented. Determination of sex differences parameters such as the facial skeleton and soft tissue facial profile is essential when planning orthodontic treatment (Arnett W., McLaughlin R., 2004; Downs W.B., 1948). The results of evaluation of gender differences in the structure of soft tissue profile in patients with orthognathic occlusion shown in table.

The length of the upper lip in men and women were significantly different and thus should be considered as important diagnostic criteria, especially when planning an orthodontic treatment. So, in men it is approximately 2.5 mm longer than that of women, as noted in the works of other authors. Thus, W. Arnett (2004) shows the difference of 3.4 mm. The same applies to the thickness of the upper lip. In our study, a difference of about 3.1 mm, whereas in W. Arnett - 2,2 mm. The thickness of the base of the upper lip in men more than an average of 2.7 mm, which was confirmed by other authors (E.E. Nasimov, 2015; Y.A. Gioeva and L.V. Polma, 1995). The length of the lower lip in women with less occlusion for orthognathic 4.6 mm, while for W. Arnett - about 7.4 mm. Chin women less than men, 6.5 mm. The height of the lower face of men more than 9.2 mm. Bridge of the nose is longer in men than in women, 4.2 mm. A feature of the female profile is more serving (2 mm) along the upper lip, the position of which was evaluated with respect to the aesthetic plane RM Ricketts (E-line). Fair to say that Ricketts plane was important in cases with the evaluation of different types of face profile. This fact we regard as important when choosing a tentative aesthetic plane.

Conclusions. Statistically significant differences in the structure of the facial skeleton and the skin profile with orthognathic occlusion men and women have demonstrated the need to define for them cephalometric different standards that increase the accuracy of anomaly detection. Our data demonstrate the relevance of a detailed specification of the linear dimensions with a definitive diagnosis in accordance with the WHO classification.

IMPACT ON DENTAL IMPLANTED PROSTHETIC DENTAL PROSTHETICS AND ORAL MICROFLORA TAKEN

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As you know, an important support for the growth and development of bacteria in the oral cavity, where the current temperature, humidity, pH, and allows to keep

down food substances on a regular basis. The oral cavity and the development of bacterial resistance mechanisms will be checked on a regular basis and the balance between the conditional-pathogenic microorganisms and pathogens will be provided (N.I. Savkina, S.D. Artyunov, V.N. Tsarev, 2004).

In the presence of various designs of dental prosthetics oral cavity weakens the self-cleaning feature, makes them care and to create the appearance of a soft tooth belonging to. Therefore, the observed accumulation of germs on the surface of the teeth, and the teeth (Goronkina S.M., 1996; Sukontapatipark W. et al., 2001), this, in turn, luminescence remineralizatsiya worsens and can cause damage to the structure of the process. In addition, the oral cavity after the collapse of normal microflora, increase the amount of pathogenic and conditionally pathogenic microorganisms, as well as from the state of disbacteriosis (Rostkina E.B., 1999; Karnitskaya I.V., 2002].

Proceeding from the above, a partial or complete loss of teeth taken from dental prosthetics and oral microflora have to learn the status of the target application.

From 25 to 62 years of research used to be taken from the teeth 21 from the patient's clinical status of the oral cavity and oral fluid microbiological indicators studied.

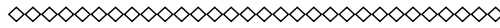
It became known as a result of research conducted in the studied group of patients, the flora and anaerobes, including the total amount of optional microbes found the number of theoretical change. At the same time the amount of anaerobes is representative of the probiotic microorganisms decreased by 38%. Such changes are observed in more than optional group of microorganisms.

In addition, gram-positive coccal flora Str. If there was a reduction of the amount of salivarius, Str. mutans and rallies, but the increase in the amount of Theoretical identified. At the moment, these microorganisms are not specific to biotopo St. aureus and Escherichia identified deserves attention. It is present in patients with enzymes of microbial pathogens is a sizeable deterioration of the status of the oral cavity.

It should be noted that, to increase the amount of Candida zambrug'lar category convincing. This situation can lead to the development of the clinical picture of candidiasis, stomatitis. Changes in the microflora of the oral cavity qualitative and quantitative Theoretically, this process of helping orthopedic patients and it is important to take into account the results of the treatment will be effective.

As a result, we microbiological investigations conducted by the partial loss of teeth, dental prosthetic teeth are not applied before implantation mouth disbiotik continued to apply the measures need to be considered.

MEDICINE AND LAW



STATE OF QUALITY OF LIFE AND ADHERENCE TO TREATMENT AND PREVENTION OF ARTERIAL HYPERTENSION AMONG WOMEN OF REPRODUCTIVE AGE

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Purpose and Objectives. Is to define the status and reasons for low adherence of women of reproductive age to the treatment of arterial hypertension and the quality of their life and their influence on blood pressure.

Material and Methods. By using WHQ questionnaire there was survey among 1866 women and formulated the 3 groups: Group 1 - 183 women with controlled arterial hypertension, 2nd group - 252 women with uncontrolled arterial hypertension and the third group - 466 women without arterial hypertension. Additionally, with the use of Morisky-Green test questionnaires and SF - 36 identified women's indicators of adherence to treatment of arterial hypertension and quality of life, in outpatient medical clinic women were followed for 11 - 15 months, women in Group 1 recommended to follow all the prescriptions of doctors and indentified of the main risk factors of arterial hypertension.

Results and Discussion. Poor adherence to treatment of arterial hypertension is common to all groups of women, its rate in group 1 averaged $2,84 \pm 0,18$ points (at a rate of 4 points), the 2nd group - $2,25 \pm 0,18$ points ($P < 0,05$), in the third group - $2,25 \pm 0,16$ points ($P > 0,05$) was identified 14 reasons for reducing the adherent of women to the treatment of arterial hypertension and their quality of life. Their frequency in the third group was an average of $2,37 \pm 0,43$ causes. In the 2nd group - $6,23 \pm 0,39$ reasons ($P < 0,001$), in the third group - $7,04 \pm 0,31$ reasons ($P > 0,05$). Quality of life at the rate of more than 70 points in these groups were, respectively: $49,2 \pm 1,2$, $55,0 \pm 1,4$ ($P < 0,05$) and $65,8 \pm 1,2$ points ($P < 0,001$).

The final evaluation of the modification of adherent and treatment, and the main risk factors of arterial hypertension among the 1st group of women, carried out by 11-15 months, showed encouraging positive results. Thus, the rate of adherence to treatment of women has increased significantly - $< 2,82 \pm 0,20$ to $3,45 \pm 0,22$ points ($t = 2,10$; $P < 0,05$), which led to an improvement in quality of life - $< 50,6 \pm 68,3 \pm 2,8$ points ($t = 4,80$; $P < 0,001$). At the same time there was decrease of blood pressure and stable performance is maintained throughout the period of observation (BP - with up to $148,4 \pm 5,6$ mmHg $128,2 \pm 4,3$ ($t = 2,86$; $P < 0,01$) BP - from $104,1 \pm 4,2$ to $86,6 \pm 3,3$ mmHg ($t = 3,28$; $P < 0,001$). In the 2nd group of patients analyzed indicators for 11-15 months remained practically unchanged and remained at an unfavorable level.

Conclusions. Affordable outreach regarding the implementation of regulations on medical treatment and limitation the activity of the risk factors of arterial hypertension increase the adherent, quality of life and contributes to the achievement of target levels of blood pressure.

PREREQUISITES OF REALIZATION OF TOTAL BREAST RECONSTRUCTION CONCEPT IN TOMSK REGION: STEP 2

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Profitability of breast reconstruction («cost-effectiveness» analysis mostly) was presented in some international research (Grover et al., 2013; Krishnan et al., 2015; Matros et al., 2015). Most of the studies proved the hypothesis concerning breast reconstruction profitability in comparison with mastectomy alone. However, we can see lack of research toward economic evaluation of total breast reconstruction concepts, also including Russian research.

The aim of recent research was to evaluate potential profitability of the Total Breast Reconstruction concept in Tomsk Region on example of Autonomous non-profit organization "Scientific and Research Institute of Microsurgery".

Materials and methods. In clinical-economical models (using MS Office Excel), the analysis of the TBR program's influence on conventional government budget was made. The recent price of TBR program was also calculated. In addition, the sensitivity analysis to parameters variation was made.

Results. The average profit for one patient in the case of changing from first scenario the second scenario is 50025.44 rubles (standard deviation is 14707.35 rubles). In terms of calculations, this profit is for 230 patients, who retrospectively could be the subjects for the TBR program, and the result might be 11.5 million rubles. The second scenario reaches the level of first scenario after 10.5 months. the first scenario could not be ended sooner than after 15 months (3 months of temporary disability and 12 months of disablement period). The maximal profit we can see from 15th months.

Conclusion. We can say that the scenario with the use of the TBR concept allows the government to save money both in short-term and long-term perspectives. This result reaches mostly by decreasing the amount of disability days and eliminating the necessity for long-term patient disability; in lesser degree by increasing normal activity days and increasing of income tax payments.

HISTOLOGIC-MORPHOLOGIC PECULIARITIES OF INTACT AND DAMAGED MENISCI

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Meniscus is characterized by diversified structure, which can be traced by light and scanning electron microscopies. The stratification of meniscus into vascularized and avascularized zones determines its function, and mainly its regenerative ability in the injuries. The results of are not always satisfactory even after immobilization and systematic treatment of these injuries. This fact attracts attention of researchers to the problem.

Materials and methods. For morphological study by light microscopy, the fragments of menisci (28 in total), excised during surgery, were fixed in 10-12% formalin, on phosphate buffer by Lilly. The paraffin sections were stained with hematoxylin - eosin. For scanning electron microscopy (SEM), the specimens after fixation were de-

hydrated for several hours in alcohol, acetone, and then dried by processing through critical point in apparatus HCP-2.

Results and discussion. In the vascularized zone of intact part of meniscus, there are a large number of microvessels, surrounded by cellular elements. The meniscal surface is lined by a continuous layer of flat cells. Fibers in vascularized part are not located as tightly as in the adjacent avascularized area. The arrangement of fibers in this part is perpendicular to surface. The periphery of meniscus, its avascular part dominated by spindle-shaped cells; the fibers located below are intertwined with each other in a disorderly manner. The fibers located closer to the surface, are oriented parallel to it. Deeper located collagen fibers are oriented to surface fibers at an angle; cells, mainly spindle-shaped, are evenly distributed among these fibers. Prevalently round cells grouped in clusters of 3 – 10 cells are located in the central areas of meniscus, which are surrounded by matrix, forming a structure of isogenic groups of typical cartilage. Fibers at these sites are chaotically arranged and interlaced with each other.

Damage to meniscus near vascularized areas causes numerous vessels to be congested with blood, and areas of hemorrhages. A large number of round cells with large nuclei and basophilic cytoplasm are located around vessels and on the surface of meniscus. Mitotic figures can be seen at the places quite often. All this, points to the activation of reparative processes in the damaged areas. Polymorphic collagen fibers, observed to be loose and fragmented, dominate in avascular areas of meniscus, near damage sites. Here, on the surface, located a homogeneous eosinophilic substance, which does not contain cells. Few single round cells are scattered among polymorphic fibers. On the contrary, the vascularized areas of the meniscus, near sites of damage, along with microvascular congestion and fields of hemorrhages contain numerous cells, which are elongated, spindle-shaped or round. Parts of round cells do not form isogenic groups on the periphery of the meniscus, which are located in groups or individually. At the same time, others round cells, such as chondrocytes, form characteristic groups, surrounded by matrix. As a rule, the periphery of the meniscus is dominated by spindle-shaped cells.

THE CURRENT METHODS OF DIAGNOSIS AND COMBINED TREATMENT OF ESOPHAGEAL CANCER

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Aim. To study diagnosis and combined treatment of esophageal cancer.

Material and methods. During the period from 2008 to 2014 in the Republican Oncological Research Center 527 patients were treated due to esophageal cancer. Males were 317, females — 255, aged from 25 to 80 years. The majority of patients were of 41 -60 years old. The cancer of cervical site was diagnosed in 48 patients, cancer of the middle third in 265, and of lower third — in 90, cancer of the cardio esophageal zone in 163, cancer of the gastric proximal region in 7 patients. Computed tomography of the thoracal and abdominal cavity was made in 254 patients. The stage T2NM0 was found in 34 cases, T3NM0 — in 251 patients, T4NM0 — 270 patients. There were performed 378 radical operative interventions: of them operation by type of Lewis - in 72(19%) patients, operation of McKeown — in 57(15.1%), transhiatal esophagectomy — in 249(65,9%). Beginning from 2006 transhiatal esophagectomy has been performed with use of hybrid technology. The technique of operation includes lap-

arotomy, gastroplasty with lymphodissection in volume D2, videoassisted mobilization of the esophagus with adequate lymphodissection and application of the cervical esophagogastric anastomosis. In cases of apparent nonresectable and/or oncological nonoperable tumor process the plan of examination included diagnostic laparoscopy in cases of confirmed diagnosis of cancer of cardioesophageal zone and lower thoracic site of esophagus. Diagnostic thoracoscopy was made in localization of tumor in the middle and upper thoracic part of esophagus.

Results. The assessment of efficacy of transhiatal esophagectomy with use of hybrid technology showed statistical difference in the volume of blood loss in comparison with traditional technique, thus in the main group accounted 361 ml, in control 578,2 ml. The time of operation was 303 20 min, in control - 363 20 min. Postoperative activation was registered on 2-3 days, the frequency of postoperative complications reduced from 10,5% to 3,4%. In 46 patients with invasive cancer of middle and lower third parts of esophagus and cardioesophageal zone there was performed surgery of esophageal endoprosthesis. Polychemotherapy was performed in 92 patients, postoperative radiotherapy was made in 160 patients, after palliative surgery gastrostomies there was performed brachytherapy in 27 patients, that is, intraesophageal radiotherapy in combination with local hyperthermia. Combined treatment was performed in 120 patients.

Conclusion. Thus, inclusion of computed tomography, diagnostic laparoscopy and thoracoscopy into the plan of examination for the patients with esophageal cancer allows achievement of more adequate assessment of prevalence and respectability of the tumor process, improvement of patient selection quality for surgical treatment, and inclusion of polychemotherapy and radiotherapy results in improvement of the long-term outcomes of combined treatment of esophageal cancer. The use of minimally-invasive technique at the stage of removal of the esophagus and mediastinal lymphodissection, videoassistance, endoscopic technique in the operative practice allows keep strictly to the established oncological principles of the operations, significantly improvement of the adequacy of the lymphodissection performed, reduction of the risk of damage of the adjacent structures without increasing of the total traumatic character of the operative intervention.

QUALITY OF LIFE OF VETERANS WITH POST-TRAUMATIC STRESS SYMPTOMS

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Introduction: the presence of residual post-traumatic symptoms is the norm rather than the exception among Veterans with past or present post-traumatic stress disorder (PTSD), even during or after an efficacious treatment. Moreover, decrease in PTSD symptoms does not warrant a direct and equivalent increase in quality of life. There is considerable variability indices of quality of life among individuals with PTSD, suggesting important individual differences. The objective of this study is to examine the relationship between post-traumatic symptom severity and quality of life among Veterans consulting an operational stress injury (OSI) clinic.

Methodology: eighty-six (86) veterans consulting an OSI clinic have completed validated self report questionnaires targeting PTSD symptom severity, quality of life, depression symptoms, alcohol use, quality and pain severity.

Results: there is a strong negative association between post traumatic symptoms

and quality of life. However, this association is no longer significant when depressive symptoms are accounted for (complete mediation). Pain and sleep also affect this association, but to a lesser extent (partial mediation). Alcohol use showed no significant impact on the relationship between post-traumatic symptoms and quality of life.

Conclusion: although PTSD symptom severity has an important impact on quality of life, depression, sleep and pain considerably affect this relationship. On way to improve the efficacy of empirically-based treatments for PTSD in military and Veterans populations may be to specifically address these issues in therapy. One important implication is the demonstration that Veterans may aspire to acceptable levels of quality of life and daily functioning despite the presence of persistent post-traumatic symptoms.

ANAKINRA - A PROMISING NEW THERAPY FOR IDIOPATHIC RECURRENT PERICARDITIS

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Background. Idiopathic recurrent pericarditis (IRP) is a debilitating condition that can be recalcitrant to conventional therapy. Some patients develop steroid dependency with the attendant risks of systemic side effects and increased future recurrence. Anakinra is a recombinant human interleukin-1 receptor antagonist that reduces systemic inflammatory responses. The aim of this study was to evaluate the therapeutic role of anakinra in IRP.

Methods. We retrospectively studied consenting patients with treatment refractory IRP who received anakinra, between January 2009 and November 2015. The primary end points were symptom resolution and steroid discontinuation.

Results. Nine patients were followed for a median of 16.8 (IQR 1.3-24) months. Study subjects were predominantly female (7 [78%]) with a median age of 53 (IQR 38 - 58) years. All 9 patients had failed maximum tolerated doses of NSAIDs, colchicine and prednisone (median dose 20 mg [IQR 15 - 22.5]). Primary symptom was chest pain in 9 (100%), with concurrent dyspnea in 5 (56%) patients. Symptom duration prior to anakinra initiation was 24 (IQR 13 - 71) months. Indication for anakinra was steroid sparing agent in 7 (78%) and symptom control in 2 (22%) patients. The dosage was 100 mg once daily via subcutaneous injection. Baseline LVEF was 62% (IQR 59% - 67%). Echocardiographic findings include pericardial effusion in 3 (33%), pericardial thickening in 6 (67%), and constrictive physiology in 4 (44%). Pericardial enhancement on cardiac MRI was seen in 7 (78%) patients. All 9 patients (100%) had symptom improvement with complete resolution in 8 (89%) and partial resolution in 1 (11%) patient. At last follow up, all 9 (100%) patients had discontinued NSAIDs and colchicine, 5 (56%) patients discontinued and 4 (44%) had reduced prednisone dosage. All patients remained on anakinra at the end of follow up. The only reported side effect was transient injection site reaction in 4 (44%) patients. In 2 (22%) patients, attempted anakinra weaning was unsuccessful due to symptomatic flare after 6 weeks.

Conclusion. Anakinra is an effective alternative agent for the management of steroid dependent IRP. It provides remarkable symptomatic amelioration, limits steroid dependency, and is associated with minimal side effects.

ESTABLISHMENT OF THE PRESENCE OF SPERMA BY MICROCHROMATOGRAPHY METHOD

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In daily forensic –medical practice not often appears the necessity of investigation of real evidence for establishment of the presence of spot in the sperms. Expert confirming of seminal origin of the spot is decisive evidence in investigation the works about sexual crimes. For the permission of this task for the last time the methods of establishment of the presence of sperms in spot were suggested on the bases of detection in them specific for sperm. With such methods we can take the method which was suggested by D.D.Djalalov (1974) simultaneously detection of choline, spermine and acid phosphatase of sperm in the spot by chromatography method in paper.

The purpose of study. To study of possibilities of establishment the presence of sperm in different textile materials and in insignificant amount of spot by the method of micro chromatography.

Material and methods of investigation. We used ascending chromatography with system of dissolvent butanol-acidic acid – water in ratio 4:1:5. In addition to this we investigated the cutt

LANGUAGES IN MODERN WORLD

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At all times each state sought to establish and develop their language and training in this language of all people on territories of the state. It occurs because every country is populated by many different nationalities, each of which has its own language. And a means of communication between different peoples became the state language, which every citizen should know and that is the main factor uniting all the people of Kazakhstan. According to the forecasts of the linguist Michael Krauss of the 6,000 languages in a hundred years will remain from 500 to 3000. And anxiety strikes not only the IPCC. Languages disappear. UNESCO has already attracted our attention to this alarming problem in a report from 2003. (Moseley, Christopher (ed.). 2010. Atlas of the World's Languages in Danger, 3rd edn. Paris, UNESCO Publishing. Online version: <http://www.unesco.org/culture/en/endangered-languages/atla>)

Language is a multifunctional phenomenon. All language features generally considered to be present in communication. To do this, on earth there are about 5-6 thousand languages. However, recent research shows that with the development of communications technologies the number of living languages is declining at an average speed of 1 language in two weeks. This is because, people in every possible way trying to simplify our lives, thinks, and takes more and more easy solutions to their problems. For example, that people were more comfortable and easier to communicate with each other, in each country there is a national language. In addition, to avoid misunderstandings between people from different countries and continents, there is an international language. (Anastasia Sokolova; Features of the language of television advertising. 2012, Russia http://www.huffingtonpost.fr/thierry-de-greef/tous-les-15-jours-une-lan_b_4064-797.html?ut-m_hp_ref=int-ernational)

Many organizations and people try to take at least some steps to slow the disappearance of languages, because we cannot completely stop it. UNESCO, the International Congress of Linguists (CIPL) and other linguistic groups, explain that these reasons have to do with our way of life, especially in those parts of the world where the number of speakers of many of the languages of the indigenous population drastically reduced. For preserving the world's linguistic diversity, measures should be taken at all levels-international, national, local, organizations and people at the individual level in society. However, the scopes of this study were too small to cover all these possible types of action in detail. Therefore, the study focuses on the effect of people on the individual level. (Alibekova R. I. Russian literature: From words to literature: a Textbook for the 8th grade educational institutions. - 4th edition, stereotype. - M.: Bustard, 2004.)

Little research on this subject has been done before, but it is assumed that the main reasons for not taking action by people are:

- Lack of awareness of the problem of linguistic diversity in general
- Lack of knowledge and guidance about what to do for each person
- The feeling that the contribution of one person is too small to make a difference

And therefore the study was designed to examine the reduction of the level of linguistic diversity and identification of public opinion to take action. Exploring people's attitudes to the identification of problems and prevention, may lead to the discovery of new ways to support individuals to implement any action to reduce the extinction of languages. (Stepanchenko, E. A. The Influence Of The English Language To Russian. Diss. Faculty of linguistics and intercultural communication, 2006. Kaliningrad: privately published, Print.)

As well as this study has changed our own point of view first we thought that many people do not know about the existence of this problem and even if they know, they do not do anything to solve. However, research has shown that for many people this topic is not indifferent, and they are ready to take any action. Now I think the main obstacle is lack of awareness and support from businesses and local authorities and the media will be significant to solve.

THE COMMON DIFFICULTIES IN ASSIMILATING ENGLISH GRAMMAR

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Every language has its own way of fitting words together to form sentences. In English, word order is far more important than in Uzbek. The word order in Tom gave Helen a rose indicates what was given (a rose), to whom (Helen), and by whom (Tom). If we change the word order and say Helen gave Tom a rose, we shall change the meaning of the sentence.

The inversion of subject and finite verb in Are you ... indicates the question form. In speaking English, Uzbek pupils often violate the word order which results in bad mistakes in expressing their thoughts. The English tense system also presents a lot of trouble to Uzbek speaking pupils because of the difference which exists in these languages with regard to time and tense relations. For example, the pupil cannot at first understand why he must say I have seen him today and I saw him yesterday. For him the action is completed in both sentences, and he does not associate it in any way with today or yesterday. The sequence of tenses is another difficult point of English gram-

mar for Uzbek speaking pupils because there is no such phenomenon" in their mother tongue. Why should he say She said she was busy when she is busy?

English grammar must begin, therefore, with pupils' learning the meanings of these structural words, and with practice in their correct use. For example: This is a pen. The pen is red. This is my pen and that is his pen.

Correct selection of grammar teaching material is the first step towards the elimination of mistakes.

What we need is the simplest and shortest grammar that meets the requirements of the school syllabus in foreign languages. This grammar must be simple enough to be grasped and held by any pupil. We cannot say that this problem has been solved.

INTERACTIVE METHODS OF TEACHING

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"The first objective of any act of learning, over and beyond the pleasure it may give, is that it should serve us in the future. Learning should not only take us somewhere; it should allow us later to go further more easily". (Jerome Bruner)

This paper outlines some implications for student's learning and for teacher's practice, of the much increased availability of interactive whiteboards (IWBs) in the context of national educational agendas for desirable characteristics of classroom teaching. It's supposed from the very beginning that students are well aware of their own culture, and the latter enables them to focus on assumptions, values, and style-life of the target culture.

Due to the rapid development of science and technology, today the whole world is led to a process of globalization. There is an invitation to all mosaic of world civilization through mutual enrichment. At present, as we hope language teachers as well should work out problems and serve peaceful creative and smooth trends in the global processes. Broadening and deepening of global processes lead to a multiple increase of oral and writing contacts.

Throughout the world these contacts should solve common tasks and, at the same time, make communications easier. To cope with this task, it's necessary to learn foreign languages. One must not sit in his recess, but widely communicate with colleagues throughout the globe. Globalization of world processes should be followed by globalization of communication. But, one must always keep in mind that to enter another culture with only vaguest notion of its cultural arrogance.

All the above mentions require necessity to form a new world outlook. From this point of view language teachers are bombarded by descriptions and various kinds of prescriptions of new teaching techniques that reportedly have worked well in other classrooms.

Active learning instructional strategies can be created and used to engage students in thinking critically or creatively, speaking with a partner, in a small group, or with the entire class, expressing ideas through writing, exploring personal attitudes and values, giving and receiving feedback, and reflecting upon the learning process.

It should also be noted that active learning instructional strategies can be completed by students either in-class or out-of-class, be done by students working either as individuals or in group, and be done either with or without the use of technology tools.

When an instructor employs active learning strategies, he or she will typically will

spend greater proportion of time helping students develop their understanding and skills (promoting deep learning) and a lesser proportion of time transmitting information (i.e., supporting surface learning). In addition, the instructor will provide opportunities for students to apply and demonstrate what they are learning and to receive immediate feedback from peers and/or the instructor.

Here, we receive the idea that what is central to education is the encounter between and learner which enables the student to acquire a richer and deeper possible apprehension of the human world which he/she inhabits. Knowledge is a human artifact created at the initiative of a learner into a common form of life, and this not something which can be carried out without involvement of other human beings.

So far, it is argued that process of teaching is a vocation where this implies is rather presupposes a love truth and of learning for its own sake; passionate regard for these will not be granted (bestowed) by the use of technology but through the experience of sharing in a journey of discovery with another human being.

POSITIVE AND NEGATIVE SIDES OF E-LEARNING

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E-learning includes such concepts as "distance learning", "distance education», «e-learning», «distance learning system". All of these concepts are mutual-intersection and use at e-learning as synonyms. There is no difference how training materials will be delivered, using a computer and internet technology or not. E-learning is the same process of delivery training materials from teacher to student, but already exceptionally in electronic type. (O.S. Akhmetova, S.A. Issayev, "Perspectives of e-learning development at schools of Kazakhstan", April 26, 2013, <http://www.group-global.org/en/publication/view/4561>)

Practically every school and college organize two computer rooms for students. All computers and notebook computers are connected to the Internet. Studying information covering words and images to present sound, cartoon and video and even 3-D scene gallery enriches the expressive ways of studying material. These new technologies help us to understand new hard materials. But in the same time a computer emits electromagnetic wave, which pollutes surrounding environment harmful to health. If people take a lot of time in front of computer, their health will face with huge threats. (Mortaza Mokht Ari Nazarlou, "Research on negative effect on E-learning", April 2013, <http://www.slideshare.net/ijmnct/research-on-negative-effect-on-elearning#>)

A radical change in lifestyle influenced by information and communication technologies is associated with the formation of a new type of personality. Therefore, it is formed a new culture. The World of Culture, which varies due programs. Pupil does not depend on teachers, he is responsible for own education. Major helper in learning new things case becomes e-Learning. But we can have many problems in test of knowledge. (G.V. Mozhayeva, "Electronic education in high school: current trends", 2013, <http://huminf.tsu.ru/jurnal/vol7-2/mozhaeva/>) The exploration into real world and face-to-face interpersonal contact will be replaced by contact of human and computer. The cost of contact of human and computer will cut down the opportunity of people's outer activities leading to reduction of people's functional capacity in comfortable time.

The management system will upgrade together with the e-learning system. Technology infrastructure management system designed for schools and colleges. There are so many kinds. All these systems are designed for teachers, students, principals, health care workers, etc. All of them will be linked to the national education database. Daily flow of information from each system will allow managers at all levels of education to own actual situation, objectively determine rankings of educational institutions and their development prospects. But the disadvantage is that the government can not keep up with all sectors simultaneously, it may will be crash information. So now scientists think about this fact. (Institute of Advanced Training of teachers in Pavlodar region, “E-learning”, 2013,<http://orleupvl.kz/ru/innovaczii-eksperiment/elektronnoe-obuchenie/126--le-learningr-sistema-elektronnogo-obucheniya>)

Pedagogical Society reacted to the idea of distance education is critical. They fear that education is divided into two kinds: cheap online and traditional education for the elite.

We believe that there will not displace conventional network training methods, but we hope that it will give opportunity to gain knowledge to those who can not receive them in the traditional way.

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