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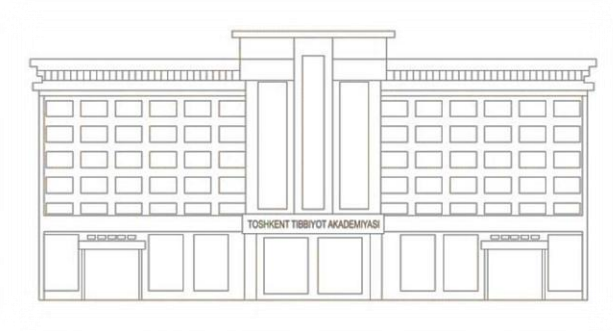

ANALYSIS OF SOCIAL AND PSYCHOLOGICAL CHARACTERISTICS OF THE POPULATION IN RELATION ADHERENCE TO PHARMACOTHERAPY

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Relevance. Currently we can say that the problem of nonadherence to treatment (both medical and non-drug) is a bigger problem than the problems associated with the disease itself, and directly with medications.

Purpose of the study. In order to assess the typological and psychological characteristics of patients of outpatient and inpatient settings and determine the degree of commitment to ongoing pharmacotherapy. In order to identify a particular relationship between the psychological characteristics of the person and the level of compliance, a comparative analysis with the assessment of the factors influencing adherence to and implementation of the individual medical prescriptions.

Materials and method. Evaluation dominant temperament type at study of psychological properties of the person using the test G. J. Eysenko and analysis of the identified characteristics serves as the basis for the development of recommendations for the development of the strengths and weaknesses of self-regulation for the formation of psychological health and treatment adherence in patients with chronic diseases. Hans Eysenck Personality Inventory (EPI) identifies the type of temperament based on introversion and extraversion personality, as well as emotional stability. Interpretation of test results requires identifying the social and psychological characteristics of outpatients. For the purpose of determining the level of compliance in patients with chronic diseases, using techniques focused on the identification and commitment of the individual treatment based on the characteristics that lead to compliance behavior.

Results of the study. The results of the survey show that among patients of primary care is dominated by extroverts that consist - 46% ($p < 0.05$), one bright extroverts - 18%, extroverts - 28%, prone to extraversion - 2%. Patients introverts make up - 14%, prone to introversion - 4%. Among the population, there are also patients with a mean value - amboverty - 34%. The results of the comparison of personality characteristics and level of compliance shown that the most pronounced social, emotional and behavioral compliance in outpatients having introversion personality, 29, 28 and 27 balls, respectively, which are considered to be phlegmatic, with features like passivity, prudence, discretion, friendliness, handling and etc. Less pronounced level of compliance the total - 68.5 points, identification of extroverts who are more than willing to contribute to the process of treatment, compared with patients with poor compliance. These patients with a low level of social, emotional and behavioral noncompliance were deep introventy total compliance (TC) which was - 54.5 points ($p < 0.05$), and in particular the typical extroverted TC - 48.5 points ($p < 0.05$) having a sensitive, anxious, aggressive, excitable, changeable, fickle character traits, which is typical choleric.

Conclusions. Thus, following the results of the study, it can be argued that the level of compliance corresponds to the real picture of attitudes towards treatment and correlated with psychological and typological personality types of patients when

the sanguine and phlegmatic a more responsible approach to issues relating to their health than those choleric and melancholic.

THE PRINCIPLES OF CLINICAL APPLICATION OF ULTRA-LONG-ACTING BASAL INSULIN IN PATIENTS WITH TYPE 2 DIABETES MELLITUS

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Introduction. Diabetes mellitus type 2, a disease of the endocrine system resulting in absolute or relative insulin deficiency is observed with a chronic increase in blood glucose.Diabetes, especially type 2 diabetes is increasing dramatically every year, 382 million people worldwide suffer from diabetes. Type 2 diabetes mellitus covers 85-95% of this tendency.This figure is expected to reach 592 million in 2035. Morever, nowadays, there are urgent problems have not been solved yet relating insulinotherapy including stable pharmacodynamic profile, hypoglycemic risk reduction,increasing patient comfort by reducing the number of insulin injections. We aimed to evaluate the effectiveness of treatment within insulin Lantus (Glargin) and Tresiba (Degludec) and the clinical performance characterization during 3 months of treatment in patients.

Materials & Methods. Research was conducted on 30 patients . 14 patients with insulin Glargin,16 patients with insulin Degludec were treated during the study including 18 men and 12 women. The average age of the patients involved in the study is 55.

Glargin is injected at the same time every day for 3 months, however, Degludec is injected every day, for the first month of 3 months period and in the last 2 months injecting every other day .

Results. In the treatment of patient with insulin glargin there is highlighted decrease in the level of glycohemoglobin. Average percentage of glycohemoglobin of 14 patient treated with glargin was 8.1% changing to 6.9% after 3 months therapy. The same result was observed within insulin degludec showing 1.3% decrease from 8% to 6.7% of glycohemoglobin.

Conclusion. Positive results were obtained in patients treated with the medication of both generation. However, treatment with Degludek in terms of glycemic control and improving the quality of lifestyle of patients results were even more pronounced .

Treatment innovations with insulin degludec:

the number of *hypoglycemia* (mostly at night) reduced drastically,at any time of the injection pump,after a month chaning regime from every day to every other day without changing your daily dose .

Keywords ultra-long-acting basal insulin, Diabetes mellitus type 2, insulin glargin,insulin degludec.

INVESTIGATION OF LIPIDIC SPECTRUM IN THE FEMALES WITH "SUBCLINICAL HYPOTHYROIDISM" LIVING IN ANDIJAN VILLAGE OF ANDIJAN REGION

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Introduction. Hypothyroidism - is a clinical syndrome, which occurs owing to the constant insufficiency of thyroid gland hormones in organism for a long period of time or as a result of reducing their biological effect as a tissue. Now, hypothyroidism occurs in 7-10 % of females and 2-3 % of men. Subclinical hypothyroidism – is characterized by gradual aggravating chronic condition of thyroid gland of immune pathologic character, normal level (T4) of free thyroxin and large amount of thyroid-stimulating hormone (TSH). It is on the leading place among all pathologies of thyroid gland according to the prevalence in population

Aim. At present the mentioned pathology is considered to be the most important.. But, nevertheless, its diagnostics and study of concomitant diseases still cause some problems. If not to reveal in proper time latent hypothyroidism may produce a number of grave conditions. Our aim is concentrated on estimating lipid and hormonal profile of the women ill with latent hypothyroidism, prevention of its transition to manifested hypothyroidism and stop development of various diseases.

Material and methods. We divided according to degree of thyroid stimulating hormone of examinated women**.** In our examination 100 women took part from 17 year to 66 year. We divided all patients 3 groups according to amount of thyroid stimulating hormone:

1-group. TSH 0,4<2mU/l
2-group. TSH 2-4mU/l
3-group. TSH >4mU/l

Result. According to our investigations, lipid profile of the patients ill with subclinical hypothyroidism have been examined. The studies showed that general cholesterol, lipoproteins with low density, triglycerides have been considerably increased in first and second groups. It consist of 32 patients.

Conclusion. In patients with the amount of TG more than 4mU/l the level of general cholesterol, triglycerides, lipoproteins with low density (LLD) have been found in quantities, whereas the level of lipoproteins with high density (LHD) was considerably low. It has been determined that in patients who haven't reached the age of 66 the risk of acquiring ischemic heart disease is high as a result of subclinical hypothyroidism.

FEATURES OF THE ENDOTHELIAL DYSFUNCTION MARKERS IN PATIENTS WITH METABOLIC SYNDROME

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Objective: Insulin resistance is considered by impaired signaling pathway phosphatidylinositol-3-kinase (PI-3 kinase), which determine the imbalance between

the production of NO and secretion of endothelin-1 at the endothelial level. Hyperinsulinism is accompanied by insulin resistance, also on the path of PI-3 kinase, and it is amplifying the mitogenic action of insulin with a role in the pathogenesis of hypertension and it is proved to accelerate the atherosclerosis.

Aim of this work to analyse the relationship between insulin resistance and the oxidative stress and the lipidic risk generated by the LDL-cholesterol on the endothelial dysfunction.

Material and Methods: The study included patients with metabolic syndrome without symptomatic cardiovascular disease, hospitalized in the first Republican clinical hospital. The Protocol Assessment included: risk SCORE assessment, the hemodynamic profile, the cardio-metabolic risk, the ultrasound evaluation of the thickness of the intima average carotid artery (c-IMT), the degree of insulin resistance was determined by the HOMA and the endothelial dysfunction was appreciated by the method FORT (Free Oxygen Radical Test).

Results: There were included in the study 54 patients with metabolic syndrome. The hypertensive patients with metabolic syndrome have demonstrated a high level of oxidative stress. We found a significant positive relationship between the hypertension and the thickness of carotid artery intima-media complex: the average value of c-IMTstg was significantly higher in hypertensive group (c-IMT stg = 0.636 mm) compared with normotensive (c- IMTstg = 0.542mm), ($p>0.05$, unpaired t-test, 95% CI). We achieved a direct highly statistically significant correlation between c-IMT right internal carotid and the oxidative stress ($p = 0.04$, $r = 0.29$) and a statistically significant direct correlation between c-IMT Left internal carotid and the oxidative stress ($p = 0.01$, $r = 0.19$).

Conclusion: The degree of endothelial dysfunction analyzed by FormOx was statistically significant correlated with carotid IMT and with LDL-Chol in case of the presence of the metabolic syndrome.

THE LEVEL OF PRO-INFLAMMATORY FACTORS AND PARACRINE FACTORS IN RATS WITH PRENATALLY HYPERANDROGENISM

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Introduction. Cytokines - soluble polypeptides which are involved in the regulation of sex hormone secretion, modulation of the ovulatory process and corpus luteum operation. TNFα, IL-1 and IL-6 have pleiotropic effects on ovarian function. These cytokines found in the follicular fluid, presumably produce their granulosa cells. Gonadotropins are in a relationship with the secretion of cytokines. The level of cytokines and the proportion varies depending on the phase of folliculogenesis. According to the literature in PCOS, is characterized by impaired folliculogenesis, there is increased synthesis of pro-inflammatory cytokines.

The purpose of this study was to determine the level of pro-inflammatory cytokines in rats with prenatallyhyperandrogenism.

Materials and methods. Rats were kept at a temperature of 23-24 ° C at 10: 14-hour light-dark cycle and 40-55% relative humidity. The first day of pregnancy was

defined as the day on which the vaginal smear was determined in the presence of semen. Estrus cycle was determined by vaginal cytology.60 female rats were randomly divided into 2 groups of 20 each. The first of which was a control, and the second received testosterone. Pregnant female rats of the second group were taken on day 14 of gestation and treated with embryonic day (E) 16 (E) 19 daily subcutaneous (sc) injection of 5 mg of testosterone dissolved in 1 ml of sesame oil (prenatally Androgenized: PA). The rats of the control group at the same time it was introduced 1 mL of pure sesame oil as a control (C). This experimental model mimics embryonic surge of testosterone, which is observed in male rats. Young (n = 6) were selected from the offspring of the control group so as to equalize the sizes of the groups. On day 21, pups were weaned, the females were separated from the males, then they regularly received food (diet) (RD) (3.30 kcal / g: 15% fat, 62% carbohydrates and 23% protein) and water ad libitum. Body weight was checked on a weekly basis from the date of weaning to 60 days of age.

At 35 days old female rats were divided into 2 groups. The first switched to a diet high in fat (HFD; n = 19) (5.24 kcal / g: fat 60%, carbohydrates 20% and proteins 20%, the second (n = 15) were kept on a normal balanced diet. Adult female rats (at the age of 60 - 63 days) on their respective diets after an overnight fast, anesthesia with CO2, they were weighed and decapitated.

The level of proinflammatory cytokines in women with PCOS

Immuneparameters	Controlgroupn=18	Themaingroup
IL-1β, pg/ml	28,3±2,4	78,3±2,5*
IL-6, pg/ml	25,9±2,4	58,9±3,0*
TNFα, pg/ml	27,1±2,3	58,3±3,3*
AMPhpg/ml	4,25±0,11	35,5±0,89*^
IL-6/AMPh	6,08±0,36	1,65±0,04*

Note: * The value significantly compared with the control group ^ confidence value in relation to the control group (P □ 0.05 - 0.001)

Conclusion: These experimental study in rats confirmed the role of proinflammatorycytokines and paracrine factors in the development of ovarian hyperandrogenism's form.

PREDICTION FACTORS OF BLOOD VESSELS DEFEAT IN "DIABETIC FOOT" SYNDROME

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Relevance. Diabetes mellitus (DM) is one of the main risk factors for peripheral arterial disease (PAD). According to several studies, PAD ranges from 10% to 29% among patients with diabetes. The risk factors for PAD in DM include: the extent and duration of glycemic disorders, visceral type of obesity, smoking, hypertension, dyslipidemia, hyperhomocysteinemia, end-stage of chronic renal failure. According to the

data of some authors, patients with DM, PAD occur with equal frequency in men and women, predominantly affecting the distal arteries of medium and small caliber.

The aim of our study was to identify the prediction factors for the development of PAD in the lower extremities in individuals suffering from "diabetic foot" syndrome.

Material and methods. Prospective study was conducted in 66 patients with diabetes type 2 in the stage of decompensation, with the syndrome of "diabetic foot" (SDS). The subject of study: medical history, results of general and biochemical blood tests, the presence of concomitant pathology of the organs and systems. Based on affected sides, patients were divided into 2 groups: persons with unilateral vascular defeat of the lower extremity (n=27 right and left n=27) – 1 group, and those with bilateral vascular defeat of the lower extremities (n=12) – 2 group.

Results. The age of patients ranged from 31 to 80 (61,0+0,4) years, duration of diabetes from 2 to 28 (11,3+3,4) years, with no significant difference between the groups (P>0.05). In the first group men were 34 (62,9%), and while the in the second group were 11 (91,6%), i.e. in percentage 1.5 times more than in the first. In individuals of the first group of DM was characterized by acute onset in 29 cases (53.7 %), and 8 (66.7%) cases in the second group, which indicates the predominance of acute onset of the disease in the second group by 1.24 times.

The level of glycemia in patients during primary treatment was ranged from 6.1 to 21,5mmol / l, and by groups of 11.6 + 3.9 mmol / l and 10.8 + 4.3 mmol / l (P> 0,05) respectively. There was no significant difference also in terms of general and biochemical blood tests. The level of blood lipids during primary treatment was significantly higher in patients of the second group, 311.6 + 8.2 U ?? versus 284.8 + 3.3 (the first group). After a prior standard treatment the individuals' indicators of the first group were reduced to 6.3+2,1, and in the second group to 9.4+3,2 (P<0,05).

The results of the existing comorbidities of organs and systems observed that the patients of the first group at 51.8%, and the second 75,0% (1.45 more) had pathology of the cardiovascular system. Patients of both groups were appointed complex therapy, in spite of this, patients with DFS were detected 5 months earlier in the second group than among first group individuals (P<0.05)

Conclusions. Prognostic factors of the DFS development with the defeat of the lower extremities surface arteries on both sides in patients with DM can serve as gender, family history, the nature of disease onset, initial blood lipid levels, a lack of pre-treatment effectiveness and the presence of cardiovascular system disease. Implementation of measures taking these factors into account (targeted diagnosis and adequate treatment of diabetes type 2 in the early stages) may allow to delay or avoid the development of the DFS with the defeat lower extremities surface arteries on both sides.

FEATURES OF DUAL ANTIPLATELET THERAPY FOR CHRONIC AND ACUTE FORMS OF THE COURSE OF CORONARY HEART DISEASE

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Objective: To study the characteristics of dual antiplatelet therapy (DAT) in patients with acute and chronic variants of the course of multivessel coronary heart

disease (CHD) after implantation of coronary stents.

Materials and methods. The examination and treatment of 56 patients with ischemic heart disease with multivessel coronary disease. Of these, 40 patients suffering from angina pectoris (AP) of different functional classes were 1st group, 16 patients in the preceding 3,25 ± 2,91 days after acute coronary syndrome without ST elevation ST (ACSWSTE) are included in the 2nd group. All patients had evidence I and Class IIa AHA / ACC 2004 Recommendations of direct myocardial revascularization by coronary artery bypass grafting (CABG). Ejection fraction in group 1 was 52,2 ± 12,1%, in group 2 - 55,5 ± 12,6%, (p> 0,05). All patients assigned to aspirin DAT 100 mg and clopidogrel 75 mg for 12 months. The duration of follow-up was 1.5 years on average.

Results. The frequency of occurrence of the primary end point (death from any cause, myocardial infarction, stroke) was not significantly different between left and 1 group of 35% in group 2 31.25% (p> 0.05). The need for repeated revascularization after percutaneous coronary intervention PCI, also did not differ significantly in both groups and amounted to 7.5% and 6.26%, respectively, in patients with AP and ACSWSTE (p> 0.05). The development of bleeding complications in Group 1 occurred in 4 patients (including massive bleeding - 1 case and moderate - 3 cases), in group 2, 3 patients (including massive bleeding and mild case 1 - case 2). The incidence of thrombosis in patients with AP groups and ACSWSTE was similar - 12.5%. Early thrombosis in group 1 was detected in 1 patient, late - at 4 in the 2nd group of early thrombosis have been identified, later - in 2 patients. All intergroup differences between comparable figures are not statistically significant (p> 0,05). Duration of DAT differ for the better in ACSWSTE group - 10,12 ± 3,07 months versus 8,85 ± 2,95 months in the AP group, although the differences are not statistically significant (p> 0,05).

Conclusions. Performing PCI in multivessel equally effective and safe in chronic and in acute variants of the CAD. It is shown that the frequency of occurrence of early and late postoperative complications of PCI in the background DAT in patients with AP and ACSWSTE not statistically significantly different. Invasive treatment ACSWSTE as clinical form of acute CAD flow, does not require a subsequent correction of unit dosages DAT. However, some patients stop taking yourself too early DAT products. A more long-term compliance to the DAT patients undergoing ACSWSTE.

COMPARATIVE ANALYSIS OF QT DISPERSION AFTER STENTING OPERATION IN PATIENTS WITH SINGLE VESSEL CORONARY ARTERY DISEASE

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Currently, ischemic heart disease is (IHD) a leading cause of death in both genders in the world despite advances in medicine and technology. Based on data from Framingham trial nearly 50% of males and 30% of females over the age of 40 will develop coronary artery disease. An ischemic event may alter electrophysiological parameters of the heart and increase a risk of life-threatening ventricular arrhythmias like a torsade de pointes and sudden cardiac death.

The purpose of the study: QT dispersion (identified maximal QT interval minus

minimal QT interval), is assessed using the surface electrocardiography (ECG), has been shown to reflect regional inhomogeneities in ventricular repolarization. The aim of this study was to show the effect of revascularization by successful coronary stent implantation on QT dispersion in patients with single vessel coronary artery disease.

Materials and methods: We carried out experiment on 40 patients (15 female and 25 male) aged 45-65 with diagnosis IHD, stable angina, FC III without prior mycardial infarction. The trial was conducted in the department of surgery and angiography in the second clinic of TMA in 2015-2016. 60 patients underwent coronary angioplasty and stents including a resolute, biomatrix, orsiro and xience were inserted in 40 patients. SCHILLER ECG, treadmill and the SIEMENS angiography equipments were used in this investigation. Maximum and minimal QT interval and QT dispersion were identified utilizing 12-lead electrocardiography 72 h before and after each successful procedure. All measurements were obtained manually and blindly.

Results: Patients were grouped into three depending on the results of the coronarography. 1st group comprised of 20 patients and identified 75.5 ± 2.2% stenosis in descending coronary artery. 2nd group comprised of 15 patients and detected 75.0 ± 2.4% stenosis in circumflex coronary artery. 3rd group comprised of 5 patients and spotted 76.0 ± 1.6% stenosis in right coronary artery. In the 1st group of patients QT dispersion decreased from 66.1 ± 2.5 ms to 35.0 ± 1.86 ms after the procedure ($P > 0.05$). In the 2nd group of patients QT dispersion declined from 64.9 ± 2.2 ms to 34.8 ± 2.0 ms after the procedure ($P > 0.05$). In the 3rd group of patients QT dispersion fell from 65.8 ± 1.5 ms to 36.0 ± 1.58 ms after the procedure ($P > 0.05$). QT dispersion was significantly lower in all groups after the procedure.

Conclusions: QT dispersion (QTd) is believed to reflect the regional variations in ventricular repolarization and thus may provide an indirect marker of arrhythmogenicity. Successful coronary stent implantation reduced QT dispersion substantially. The decreased QT dispersion may have been caused by improvements in myocardial perfusion and may prove beneficial in reducing the probability of arrhythmias occurring. Therefore, the authors consider the dispersion of Q-T and Q-Tc intervals as being a valuable marker of malignant ventricular arrhythmias which could be included in the algorithm of assessment of the risk of sudden arrhythmic death in patients with coronary artery disease.

AN ASSESSMENT OF DYNAMIC CHANGES OF QT INTERVAL IN PATIENTS WITHOUT MYCARDIAL INFARCTION AFTER CORONARY ARTERY STENTING OPERATION

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According to the information provided by WHO, ischemic heart diseases (IHD) is the number one cause of mortality throughout the world. Despite of unprecedented advances and unparalleled developments in the fields of cardiology, interventional cardiology and cardiosurgery, this disease has been threatening human life. This in turn requires further research and inventions in this sphere.

The purpose of the study: In IHDs, the most widespread complications that can

lead to a sudden cardiac death are fatal and life-endangering arrythmias in the type of ventricular tachycardia and fibrillation. In order to assess the formation of risks of above-mentioned arrythmias, the changes in the QT interval is identified via non-invasive ECG test in cardiology. We have investigated the dynamic changes in the QT interval in patients suffering from IHD, but those who have not experienced mycardial infarction after the stenting operation in this paper.

Materials and methods: The total of 40 patients (15 female and 25 male) aged 45-65, IHD, stable angina, FC III, patients without mycardial infarction were chosen for the sudy. The study was carried out in the second clinic of TMA, in the department of surgery and angiography in 2015-2016. SCHILLER ECG, treadmill and the SIEMENS angiography apparatus were deployed in the research. The stents Resolute, Biomatrix, Orsiro and Xience were used in the research. QT interval was measured three days before and after the intervention and the formula of Bazett was used in this measurement.

Results: All the patients in the sample were divided into three groups based on the results of coronaroangiography. 1st group consisted of 20 patients and 75,5±2,24% stenosis was identified in the descending coronary artery, 2nd group consisted of 15 patients and 75,0±2,4% stenosis was identified in the circumflex coronary artery, 3rd group consisted of 5 patients and 76,0±1,6% stenosis was identified in right coronary artery. Drug-eluting stent was inserted in all patients. Recanalization rate constituted 3 balls according to TIMI. QTc accounted for 476,1±3,71 ms before the operation and 445,1±3,3 ms after the operation in 1st group patients, (p>0,01). This indicator was 469,1±5,6 ms before the stenting operation and 432,7±5,3 ms after it in 2nd group patients, (p>0,01). QTc was 466,2±1,3 ms before the recanalization and 432,6±3,97 ms after the operation in 3rd group patients, (p>0,01). It is evident that the noticeable reduction in QTc is being observed after recanalization in single-vessel disease of over 70%.

Conclusion: Life-endangering arrythmias, ventricular tachycardia and fibrillation have a principal role to play in the formation of a sudden cardiac death among patients with IHD, the changes in QT interval serve as a marker in the assessment of risk levels of these diseases. The prolongation of the QT intervals demonstrate the fact that the process of ventricular repolarization is nonhomogenous and it illustrates the progression risk of fatal, life threatening arrythmias based on re-entry mechanism. Positive changes in QT interval after the stenting operation reveal improvements in the electromechanical function of ventricles and the reduction in the risk of sudden arrythmic death.

EFFICIENCY OF LEFLUNOMIDE IN THE TREATMENT OF EARLY RHEUMATOID ARTHRITIS

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Goal. Evaluation of efficacy, tolerability and safety of leflunomide in the treatment of early rheumatoid arthritis (RA).

Material and methods. 60 patients were documented with diagnosis of RA at the age of 17 to 62 years, they have been divided into 2 groups. 1st group has consisted of 40 patients with disease duration up to 6 months (on average 4,5 ± 1,7 months.) and 2nd group has included 20 patients with RA duration from 6 months up to 1 year (on average7,8 ± 4,5 months.). Efficacy of treatment was evaluated by

DAS 28, criteria of ACR and visual analogy scale (VAS) of pain, laboratory parameters. Leflunomide was administered in dose of 20 mg per day during the 12 months.

Results. In the 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 by parameters of laboratory investigations during the treatment period. In 2nd group reducing of activity was occurred in 5 months. In 1st group 33 (82.5%) patients has clinical remission towards 6 months of treatment with leflunomide. Serious side effects were not observed during the treatment.

Conclusions. Leflunomide is a highly basic anti inflammation drug for the treatment of early RA. In the appointment of leflunomide in patients with early RA exactly who has disease duration less than 6 months and effectiveness of therapy higher than when administered at a later date.

COMPARATIVE EVALUATION OF BASIC ANTI RHEUMATIC DRUGS IN THE TREATMENT OF RHEUMATOID ARTHRITIS

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Goal. Detection of efficacy of 3 modifying anti rheumatic drugs in rheumatoid arthritis (RA).

Material and methods. 60 patients were diagnosed with RA at the age of 17-62 years, who has disease duration up to 6 months (on average 4,5 ± 1,7 months). They have 2 and 3 degree of activity without glucocorticoid therapy (systemic and / articular), the absence of heavy accompanying internal diseases.

Results. The diagnosis of RA was confirmed in the process of follow-up of 60 patients. They were divided into 3 groups. All of them consisted of 20 patients. Patients of 1st group received Plaquenil. It was applied over 3 months, as a result it was ineffective in 7 patients. The effect was also absent in 5 of 20 patients which treated with sulfasalazine in 2nd group. 18 of 20 patients in 3rd group noted subjective improvement in the first 3 months which treated with methotrexate and they reached clinical and laboratory remission. The amount of bone erosions in patients which treated with methotrexate was significantly less; marked dependence of erosion on time of initiation of therapy and character of debut of the disease.

Conclusion. The most effective drug among the rest modifying anti rheumatic drugs which used for treatment of early RA is methotrexate when we exactly recommended it in the first 3 months.

TREATMENT OF PATIENTS WITH FUNCTIONAL HEARTBURN

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Introduction: in patients with heartburn is extremely important to verify the nature of the occurrence of this symptom.

Objective: To evaluate the efficacy of low-dose tricyclic antidepressants (amitriptyline) in patients with functional heartburn.

Materials and methods. Patients with documented functional heartburn (n = 21) in accordance with the Rome III diagnostic criteria received amitriptyline po0,01 ×

g 4 times a day for 4 weeks. diagnostic algorithm functional heartburn was built on the basis of exclusion of gastro-oesophageal reflux disease (endoscopy), carrying out a histological study to rule out other possible causes of the symptoms of the disease (eosinophilic esophagitis), followed in the absence of damage to the esophageal mucosa provedeniem24 chasovogop-H-monitoring and determining simptom-associated probability to exclude non-erosive gastroesophageal reflux disease, and further, in the absence of data zareflyuks esophagitis and NERD, except of motor disorders of the esophagus (achalasia, diffuse esophageal spasm). Patients with functional heartburn verified held Stepenko test and load test with water to determine esophageal hypersensitivity.

Results. After 4 weeks of treatment was a decrease in the frequency and severity of heartburn, which correlated with the positive dynamics of the test to determine hypersensitivity.

Conclusions. The use of amitriptyline in low doses may be recommended for patients with functional heartburn when hyper intensity of the esophageal mucosa.

DYNAMIC CHANGES OF BASIC RISK FACTORS OF ISHCHEMIC HEART DISEASE IN THE TRANSION TO MENAPAUSE

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The occurrence of a cardiovascular disease, which is the leading cause of death among women, increases substantially after menopause. This may be related to adverse changes in cardiovascular risk factors including lipoproteins, blood pressure and weight that occur during the menopausal transition. More women die from coronary artery disease (CAD) than of cancer, chronic lower respiratory disease, Alzheimer disease and accidents.

The purpose of the study: Epidemiological studies suggest that the menopause is associated with increases in total cholesterol, low density lipoproteins (LDL) and at the same time there will be an increase in blood pressure and weight in women. Because of these risk factors, the rate of CAD increases after menopause in females. In this study we investigated dynamic changes of total cholesterol, blood pressure and weight in the perimenopausal women.

Materials and methods: This prospective study contained 40 women aged between 50-55 who have perimenapausal, but those who have not been diagnosed with an ischemic heart disease and diabetes mellitus. The research was carried out in out-patient department number 16 among target population of Olmazor district during 2015-2016. We actively controlled the level of total cholesterol, arterial blood pressure (ABP) and weight every 6 months among transional menopausal women.

Results: There are some differences in the results of examination. We divided women into three groups based on the severity level. The first group consists of 30 women and results of mean total cholesterol in the first 6 months is 5,5 mmol/l and second 6 months is 5,8 mmol/l. Mean ABP is 130/70 mmHg and in the second period it is 145/80 mmHg in the first group. Mean weight is 72,6 kg and changed in the next period to 78,5 kg. The second group consists of 15 women and the level of cho-

lesterol is 5,25 mmol/l initially and shifted to 5,5 mmol/l after 6 months. The number of ABP is 125/70 mmHg in the first time and in the second time it is 135/80 mmHg. The weight is 70,4 kg and then it increased to 76,6 kg. The last group consisted of 5 women, cholesterol concentration is 5,0 mmol/l and in the second time it is 5,2 mmol/l. The ABP is 120/70 nnHg and in the second time examination it is 125/80 mmHg. The weight is 68,5 kg and in the second 6 months it is 70,6 kg. As time passed by in the perimenapausal women there have been significant changes in the progression of the risk factors of ischemic heart disease.

Conclusion: This research illustrates that above examined indices which are major risk factors of ischemic heart disease play a great role in the progression of coronary artery disease after menopause. The level of cholesterol, ABP and weight increased steadily in the perimenapausal women because of lack of estrogen and its metabolites in the blood. Monitoring above-mentioned risk factors in perimenopausal women may lead to a reduction of cardiovascular events and should enhance primary prevention of CHD.

THE INFLUENCE OF MINERALOCORTICOID RECEPTOR ANTAGONISTS ON THE FUNCTIONAL STATE OF LIVER IN PATIENTS WITH CHRONIC HEART FAILURE IN ELDERLY

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Aim. To study the influence of antagonists of the mineralocorticoid receptor (AMR) on the functional state of liver in patients with chronic heart failure (CHF) in elderly on the basis of retrospective analysis medical records in patients with CHF.

Materials and methods. A retrospective analysis of medical records of the patients in the archives Department of 3-rd clinic of TMA in 2014. It was selectively studied 411 medical records of patients with CHF. Of these, 232 (56,44%) men and 179 (43,55%) women, mean age was 63,3±11.6 years. All the patients underwent conventional research methods (clinical and biochemical blood tests, coagulogram, ECG, 6-minute walk test. The patients were divided to 3 groups depending on the use of AMR.

Results. In the process of retrospective analysis of case histories revealed that of 74,90% (n=308) of patients with coronary heart disease (CHD) and 89,05% (n=366) arterial hypertension (AH), of 30,09% (n=127) patients had atrial fibrillation, at 2,67% (n=11) atherosclerotic heart disease, of 27,00% (n=110) of patients suffered diabetes mellitus type 2. Average systolic blood pressure (SBP) was 136,6±18,0 mm Hg. art. and diastolic blood pressure (DBP) 78,8±18,26 mm Hg. article baseline ejection fraction (EF) was 46,62±12,4 per cent. The heart rate was 81,2±24,6 bpm. The value of glucose in venous blood in the range of 5,6±4,2 mmol/l baseline total cholesterol was 5,2±3,5 mmol/L. the Initial potassium level was 4,2±1,1 mmol/l and 5,1±1,2 mmol/l when leaving the hospital ($p<0,05$). Baseline creatinine level in blood was 124,2±3,1 mmol/l and of 116,8±2,3 mmol/l at the discharging from the hospital ($p>0,05$). Patients of the first group (n=195) received verospiron in combination with beta-blockers (BB) and angiotensin converting enzyme (I-ACE), patients of the second group (n=158) received without an aldosterone antagonist BB and of ACE-inhibitors, and patients of the third group (n=58) received eplerenone in combination with BB and ACE. Mapping and comparison

of the results of patients receiving and not receiving the AMR, it was revealed that the indicators of tolerance to physical activity according to the results 6 minute walk test, patients of the two groups were significantly worse, and biochemical liver function parameters remained without significant changes (p>0,05), as determined by the inertia of the AMR in relation to these figures the blood. When comparing these indicators among the groups treated with eplerenone and verospiron, a significant difference was not identified. But it was marked by a positive shift of indicators of laboratory tests, in particular the levels of potassium and creatinine in blood of patients treated with eplerenone in comparison with patients treated with verospiron.

Conclusion. The obtained results and the available evidence indicates about the effectiveness, safety, and good tolerability eplerenone in patients with CHF. These data should clearly be the basis for a wider use of the drug in clinical practice, especially in patients with concomitant hepatic pathology. This requires dynamic control of clinical and biochemical parameters of the patient. Strict adherence to these recommendations increases efficiency and decreases side-effects of antagonists of mineralocorticoid receptors.

THE COURSE OF HYPERTENSIVE DISEASE IN COMBINATION WITH PATHOLOGY OF GASTRODUODENAL AREA

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Essential hypertension (EH) meets every third patient with peptic ulcer (BU). Combinations of these diseases often complicates their course. Common to them is widespread, social health value, high risk of life-threatening cardiovascular complications. The specificity of this combination of poorly understood.

The purpose of research - to study cardio-gastric relationship with ulcerative erosive lesions gastroduodenaonoy zone (UELGDZ).

Materials and Methods. A total of 34 patients aged 57 + - 1.2 years, who UELGDZ combined with EH I and II degree, the risk of 2. Of them men - 28, women - 6. All clinical research methods were carried out to patients, which included an electrocardiogram, echocardiogram, endoscopy of the upper gastrointestinal tract, confirming the UELGDZ The control group consisted of 10 patients without UELGDZ EH.

Results of the study. Patients with UELGDZ in conjunction with EH marked lengthening the interval Q - T up to 55%, that is, violations were observed contraction processes and repolarization of the left ventricle. Revealed normo - and bradycardia, which is apparently associated with vagal influence on the heart. Other ECG changes were immaterial. On echocardiography identified reduced ejection fraction of 20% in the treatment group compared with the group of patients without GB. We have noted the emergence and worsening of pain symptoms, which are localized in the epigastric and precardial areas. Clinical manifestation of cardio - gastric relations were early signs of chronic cardio - vascular insufficiency.

Conclusions. Noted lengthening the interval Q - T and decrease in ejection fraction in patients UELGDZ and EH are characteristic of the combination of these pathologies and conditions necessitate therapeutic correction data.

TO STUDY PREVALENCE OF GENOTYPES OF GENE PLASMINOGEN ACTIVATOR INHIBITOR TYPE 1 IN PATIENTS WITH CORONARY HEART DISEASE

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Objective: The study of the frequency of occurrence of genotypes of polymorphic marker 4G (-675) 5G gene plasminogen activator inhibitor type I (PAI-1) in patients with stable angina (SA) and the control group.

Materials and Methods: The study included 60 patients with coronary heart disease, 46 men and 14 women admitted to hospital relatively stable angina FC II-III in the I- Cardiology department of the Tashkent Medical Academy.The average age of women 56,1 ± 4,02 years, men 55,3 ± 5,32 years. The control group consisted of 22 individuals (mean age 46.58 ± 7.13 years), with no evidence of cardiovascular and other chronic diseases.All respondents were administered the standard clinical and laboratory research. 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) 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 . All patients received identical basic therapy (b-blockers, ACE inhibitors, antiplatelet drugs - aspirin).

Results: As a result of the research, we have found that the genotype frequency 5G / 5G in patients constituted 30.0% (18/60) patients. Of these, 77.8% (14/18) of men, 22.2% (4/18) of women. 4G / 5G genotype among men and women was found in 68.9% (20/29) and 31.1% (9/29) cases, respectively.4G allele frequency in the homozygous state was detected in 13 patients, 92.3% (12/13) of men and 7.7% (1/13) of women. Frequencies of genotype PAI-1 gene in the control group was: 22,7% (4G / 4G), 63,7% (4G / 5G), and 13,6% (5G / 5G), indicating a relatively high rate of prevalence of the gene in Uzbek population.

Conclusions: Prevalence of combining unfavorable genotypes of gene PAI-1 in patients with SA of male in Uzbek nationalities. The results show that the 4G / 5G genotype may be predisposing to the emergence of the early manifestations of coronary artery disease.

CLINICAL IMPROVEMENT IN KNEE OSTEOARTHRITIS PATIENTS AFTER INTRA-ARTICULAR INJECTIONS OF HYALURONIC ACID: COMPARATIVE STUDY WITH DIPROSPAN

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Background: Osteoarthritis (OA) is a chronic degenerative joint disease characterized by joint pain and progressive functional limitation. Supplementation of in-

tra-articular (IA) hyaluronic acid (HA) could be a treatment option in OA, however recommendations made in different international guidelines for the non-surgical management of OA are not always concordant with regard to the role of IA injection therapies. Intra-articular (IA) administration of hyaluronic acid (HA) or corticosteroids (CS) have been previously studied, although the results obtained are controversial due to short follow-up periods.

Objective: Evaluate HA and CS in patients with OA with prevalent gonoarthitis in terms of clinical efficacy over 6 months.

Materials and methods: We performed a prospective study with parallel groups of 45 patients with knee OA in the rheumatologic department of the 1st Clinic of Tashkent Medical Academy based on the Republican Center of Rheumatology. Patients with OA received IA injections of HA or diprospan (DS). The primary outcomes were evaluated using Visual Analog Scale and function Likert scale. Follow-up visits were scheduled at 3 months and 6 months.

Results: A total of 52 patients were included. 7 patients were excluded due to comorbid pathology (joint rheumatoid arthritis, reactive arthritis). Group I included 24 patients receiving IA injections of HA. Group II included 21 patients receiving IA injections of DS. Pain was significantly reduced in both groups at the first follow-ups. At 6 months, the mean pain reduction in the HA group was 31.2% compared to 7.8% in BM (P<0.005). Improvement in functional scale was higher in HA through every visit, mean improvement at 6 months was 37.6% in HA patients vs. 11.4% in the DS group (P<0.001). All patients from both groups achieved the clinically important improvement for both pain and function up to 3 months. At 6 months results were higher in HA group with ≥70% compared to ≤15% in DS group (P=0.005). Adverse reactions were rare (5 patients in 2nd group) and related to the administration procedure of DS.

Conclusion: Both HA and DS injections lead to effective control of OA symptoms. DS showed higher short-term effectiveness, while HA showed better long-term effectiveness, maintaining clinical efficacy in a large number of patients 6 months after administration.

HMG-COA REDUCTASE INHIBITOR DRUGS (STATINS) REDUCE CARDIOVASCULAR RISK AND DISEASE ACTIVITY IN RHEUMATOID ARTHRITIS

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Background: Rheumatoid arthritis (RA) is a chronic systemic autoimmune disease that primarily affects the synovial tissue and is characterized by a high prevalence of comorbidities. Patients with active RA are frequently diagnosed with an atherogenic lipid profile and supra-aortic vessel ultrasound signs of atheromatous plaques, which have been linked to the inflammatory activity of RA. Recent experimental and clinical evidences suggest that the beneficial effects of statins are pleiotropic, extending beyond their low density lipoprotein cholesterol (LDL-C) lowering effects. Statins have been proposed to have anti-inflammatory and immunomodu-

latory effects, inhibiting proinflammatory cytokines (IL-1β, 6, 8, TNF-α), adhesion molecules (sICAM 1, sVCAM 1, E-, P-selectin), osteoprotegerin, which are implicated in RA pathogenesis. However, the beneficial role of statin therapy in clinical improvement and their benefit-risk profile are still debatable.

Objective: To evaluate the effect of medium-term rosuvastatin therapy on lipid profile, endothelial dysfunction and RA activity in patients with rheumatoid arthritis (RA) in comparison with conventional disease modifying antirheumatic drugs (DMARD) therapy.

Materials and methods: The study included 82 patients in the Specialized Course Out-patient Therapy Department of the 1st Clinic of Tashkent Medical Academy of age group between 44 and 65 years (mean 52±8.4), predominantly female gender (n = 57, 69.5%), with early RA (mean disease duration 9.2±2.4 months), and divided into 2 groups. Group 1 (n = 40) received methotrexate (MTX; 7.5 mg/week; plus prednisolone (10 mg/day). Group 2 (n = 42) received MTX and prednisolone with the same previous doses plus rosuvastatin (40 mg/day). Lipid profile assessment comprised triglycerides, total cholesterol (TC), high-density lipoprotein cholesterol (HDL-C), low-density lipoprotein cholesterol (LDL-C). Disease activity was assessed by the disease activity score of 28 joints (DAS28), erythrocyte sedimentation rate (ESR), C-reactive protein (CRP) and visual analog scale (VAS). Disease activity, lipid profile and intima-media thickness (IMT) of common carotid arteries were measured before and after 85 days (6 months) of treatment.

Results: 4 patients receiving rosuvastatin were excluded due to abnormal liver function test parameters (De Ritis ratio <0.9), further assessment was thus performed on 78 (Group 2, n = 38) early RA patients. The study revealed statins can attenuate disease activity markedly. Overall ESR (Group 1: 24.4±7.26; Group 2: 37.4±12.3) and CRP (Group 1: 5.56±0.58; Group 2: 3.71±1.23) declined significantly during the treatment. The mean DAS28, unconditionally considered as the most important index of clinical disease activity in RA, was found to be significantly lower ($p<0.05$) in the adjunct statin-treated group (Group 2: 3.68±0.77) than that of the conventional DMARD treated group (Group 1: 4.45±1.08). Statin significantly reduced LDL-C (3.9±1.2 mmol/l to 3.3±0.8 mmol/l; p=0.08) and increased HDL-C (1.3±0.6 mmol/l to 2.0±0.4 mmol/l; p=0.06) after 6 months of treatment. However, rosuvastatin therapy showed no significant improvement in VAS score (6.7±1.5 to 6.9±0.6; p = 0.41) and IMT (1.04±0.09 to 1.08±0.07; p=0.14).

Conclusion: Statins ameliorate RA activity, reduce potential cardiovascular risk in the context of atherosclerosis and mediate clinically apparent anti-inflammatory effects, but long-term effects and benefit-risk profile should be addressed in the management of elevated risk of cardiovascular events in RA patients.

ESTIMATION OF THE LIPID PROFILE IN ACTIVE RHEUMATOID ARTHRITIS LEADS TO INCORRECT CARDIOVASCULAR RISK PREDICTION

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Background: Rheumatoid arthritis (RA) is known as a chronic systemic auto-

immune disease that primarily affects the synovial tissue and is characterized by a high prevalence of comorbid pathology. RA is proved to be associated with increased cardiovascular mortality and morbidity risk. This cardiovascular risk is primarily determined by the lipid profile, which may alter during the RA course. Proper cardiovascular risk assessment is dependent on stable lipid values with Systematic COronary Risk Evaluation (SCORE) scale primarily applying lipid ratios. As the increased cardiovascular risk is already present at the onset of RA, it is important to initiate cardiovascular risk management as far in advance as possible. Prior to the complex treatment it is necessary to establish whether measurement of the lipid profile is adequate (i.e. stable lipid values) in the early stage of disease.

Objective: to investigate the changes in lipid profile during the first 4 weeks of rheumatoid arthritis (RA) therapy, estimate the association between the alteration in lipid profile and the changes in erythrocyte sedimentation rate (ESR) and C-reactive protein (CRP).

Materials and methods: The study included DMARD-naive 58 patients (45 females (77.59%)) with early RA in the Specialized Course Out-patient Therapy Department and Cardiorheumatology Department of the 1st Clinic of Tashkent Medical Academy. Lipid profile (triglycerides, total cholesterol (TC), high-density lipoprotein cholesterol (HDL-C), low-density lipoprotein cholesterol (LDL-C)) and disease activity (DAS28 score) were measured. The analyses were repeated after 4 weeks of methotrexate treatment (7.5 mg/week) and prednisolone (30 mg/day tapered to 10 mg/day). Disease activity was assessed by the disease activity score of 28 joints (DAS28), erythrocyte sedimentation rate (ESR) and C-reactive protein (CRP). Patients on lipid-lowering drugs were excluded.

Results: All parameters of the lipid profile significantly increased during 4 weeks of DMARD treatment. Mean TC increased from 4.6±1.2 mmol/l to 5.2±1.6 mmol/l (p=0.02); triglycerides remained unchanged: 1.6±0.7 mmol/l to 1.6±0.9 mmol/l (p=0.05); HDL-C increased from 1.1±0.7 mmol/l to 1.3±0.6 mmol/l (p=0.02); LDL-C increased from 3.2±0.9 mmol/l to 3.9±0.7 mmol/l (p=0.06). Additionally, lipid ratios, particularly the TC/HDL-C ratio significantly improved: 4.1±1.6 to 3.3±1.4 (p=0.02). RA patients with high ESR (mean -14.2 mm/hour) and CRP (mean -3.3) improvement showed a significantly higher increase in TC, HDL-C, LDL-C levels.

Conclusion: Lipid levels increased after 4 weeks of methotrexate plus prednisolone treatment after the onset of RA, substantial improvement of lipid ratio is inversely proportioned to ESR and CRP changes. Consequently, cardiovascular risk management in early arthritis should consider the effect of active inflammatory process leading to an inappropriately high cardiovascular risk estimation.

PSYCHO-EMOTIONAL STATE IN PATIENTS WITH HYPOTHYROIDISM DURING REPLACEMENT THERAPY

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Objective: To study the clinical and psycho-emotional state of patients with hypothyroidism before and after replacement therapy.

Materials and Methods: All patients were collected at the Department of En-

docrinology 3rd clinics of Tashkent Medical Academy. The study included 75 women with hypothyroidism. Age surveyed had an average of 37,85 ± 8,92 years. All patients were divided into 2 groups: group 1 included 25 patients with primary manifest hypothyroidism and the 2nd group of 50 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). After diagnosis hypothyroidism we carry out replacement therapy with thyroid hormones during three month. First and second groups members received 78,8±30 mcg and 75,5±25mcg thyroxin respectively, after that patients we examine patients psycho-emotional state and TSH level. 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- 8,7 (10-20 pmol/L), free T3-2,4 (2.5-5.5 pmol/L), and a second group with subclinical hypothyroidism TSH -6.8 mU/L, free T4-12,6 pmol/L free T3-3,5 pmol/L. The results are based on the Beck Scale for patients with manifest hypothyroidism averaged 16,2points, while in the group with subclinical hypothyroidism 8,5 points. Psychometric testing has revealed the presence of mild depression in 5 patients (18 points) and moderate depression in 2 patients with manifest hypothyroidism, which amounted overall to 28%, and the 5 patients (12 points) with subclinical hypothyroidism, which amounted to 10%. Thus, this study proves that an increase in serum TSH, increases symptoms of depression in patients with hypothyroidism. After replacement therapy in first group TSH level was 2,6 mEd/L, while in second group was 1,4 mEd/L. The result of Beck Scale after replacement therapy improved significantly in both groups without antidepressants. In first group two patients suffered from mild depression while only one patient in second group after replacement therapy.

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. Also, this study shows that the relationship of elevated TSH and increase in performance of Beck scales. Replacement treatment of hypothyroidism is best accomplished using synthetic L-thyroxin sodium preparations. In addition, achieving euthyroid condition in patients with hypothyroidism brings improvement of their psycho-emotional state and decreases symptoms of depression.

CLINICAL STUDY LIFE QUALITY OF WOMEN WITH SUBCLINICAL HYPOTHYROIDISM

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Objective: To study life quality of patients with subclinical hypothyroidism by using questionnaire SF-36 before and after replacement therapy.

Materials and Methods: All patients were collected at the Department of En-

docrinology 3rd clinics of Tashkent Medical Academy. The study included 55 women with subclinical hypothyroidism and 20 women for control group. Age surveyed had an average of 37,6 ± 8,83 years. Patients included in the study do not take replacement therapy with thyroid hormones. All patients were divided into 2 groups: group 1 included 55 patients with subclinical hypothyroidism and the 2nd group of 30 women without thyroid disease. All patients had a test that assesses the state of life quality with questionnaire SF-36 and ultra sound investigation of thyroid gland (USI), conducted research analysis: thyroid hormone binding free T4, TSH and anti-thyroid peroxidase antibody (TPOAb). After diagnosis hypothyroidism we carry out replacement therapy with thyroxin 70mcg±25 during three month until achieving euthyroid condition, after that we examined their life quality and compared with control group. The questionnaire filled in by the patient alone for 10 minutes. 36 items of the questionnaire are grouped in eight scales: physical functioning- PF, role-physical functioning - RP, bodily pain -BP, general health- GH, social functioning-SF, role-emotional-RE, mental health-MH. Scales are grouped in two measures the physical health component and the psychological component of health. The physical health component includes first four scales while psychological component of health includes others. Results are presented in the form of estimates in points 8 scales vary between 0 and 100, that a higher level of quality of life.

Results: The first group of patients with subclinical hypothyroidism were obtained test results: TSH -6.9 (0,3-4,0mEd/L), free T4- 14,2 (10-20 pmol/L), TPOAb - 87,6 (0-30ME\ml), thyroid gland volume V-24,8cm^3±7,8 and a second group members TSH -1.7 mU/L, free T4-15,6 pmol/L and TPOAb -18,4. After replacement therapy in first group TSH and TPOAb levels were 1,9 mEd/L and 24,6 respectively. Average thyroid gland volume in first and second groups was V-19,8cm^3±4,3 and V-14,6cm^3±3,6 respectively. The most common cause of subclinical hypothyroidism was Hashimoto's thyroiditis with 83, 6%. In 26, 6% members of second group was diffuse enlargement of the thyroid gland 1degree. Practically on all scales of the questionnaire SF-36 (except, role-physical functioning, bodily pain, general health) quality of life parameters in patients with compensated hypothyroidism were significantly lower ($p<0,05$), than in the group of healthy women. This study shows the relationship between increased rates of TSH and the deterioration of the quality of life in women with subclinical hypothyroidism. The result of questionnaire SF-36 and TSH level after replacement therapy with thyroxin improved significantly in hypothyroid patients.

Conclusion: In patients with subclinical hypothyroidism in almost all parameters the quality of life worse than in women without thyroid disease, especially (social functioning, mental health, role-emotional) scales are worse ($p < 0,05$), than in healthy women. While comparing quality of life in patients with hypothyroidism the rates of role physical functioning ($p > 0,06$), vitality ($p <0,012$), social functioning and psychological health of patients with hypothyroidism were significantly less compared with women with euthyroid goiter. Also, this study proves that psychological component of health in 2group better than 1group. Replacement treatment of subclinical hypothyroidism is the best accomplished using synthetic L-thyroxine sodium preparations. Achieving euthyroidism in patients with hypothyroidism brings improvement of their quality of life.

THE DEVELOPMENT OF "DIABETIC FOOT" SYNDROME DEPENDING ON THE GENDER

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Diabetes mellitus is a disease occurring as a result of violations of carbohydrate metabolism in the body. At the same time, there is an increase in blood sugar due to insufficient production of insulin by the pancreas. In individuals long-term diabetes is often observed the angiopathy, due to the formation of atherosclerotic plaques that impede blood flow. On the background of global impairment or complete cessation of blood supply to the tissues various complications develop which can be attributed to the syndrome of "Diabetic foot" (SDS). Firstly, the localized focus with noticeable affection of tissue and suppuration is formed in the extremities. In the future, the ulcer does not heal, a necrotic center grows in size, progressing to gangrene of the extremity.

The aim of our study was to investigate the development of "diabetic foot" syndrome, depending on the gender.

Material and methods. We prospectively studied the results of progressing 75 patients with diabetes mellitus type 2 in the stage of decompensation, with DFS. We analyzed the medical history data, the results of general and biochemical blood tests, and the presence of concomitant pathology of the organs and systems. On the basis of gender, patients were divided into 2 groups. The first group included men (n=52) and second, women (n=23).

Results. Age of men ranged from 31 to 80 (59,0+0,4) years and for women from 46 to 77 (62,3+0,3) years (P<0.05). In both groups diabetes type 2 was characterized by acute onset, severe or compensated and virtually identical to the duration, 11.1 + 0.1 and 11.6 + 0.3 years respectively in groups. The significant difference in the presence of a "family history of diabetes" was not marked, i.e. 63.5% of men and 69.6% of women had relatives with diabetes in the family.

According to laboratory studies, in individuals of the first group when applying the level of glycemia was 11.1+0.1 mmol/l, glycated hemoglobin of 7.2+0.1 mmol/l, lipid 283,1+1.6 mg/l, while the second 12,9+0,1 mmol/l and 8.2+0.1 mmol/l, 310.3+1.7 mg/l respectively to data. In all cases, the difference was significantly (P <0,05) in favor of the male population. The analysis of the general and biochemical blood tests results, the presence of concomitant pathology of organs and systems, significant difference between the groups is not revealed. Despite this, DFS was identified in 8.8 ± 0.1 years in the first group patients and in the second group of 9.6 + 0.1 years from the onset of DM, i.e. complication of main disease was occurred significantly earlier among men (P <0,05).

Conclusions. Depending on the gender, the developing (progressing) terms of the "diabetic foot" syndrome in individuals with diabetes type 2 has the significant difference, and is observed(occurred) in men at a younger age.

Despite the significantly low values of blood glucose, the glycated hemoglobin and lipids, the development period of DFS from the beginning of DM in men significantly less. The tactical measures that aimed to early diagnosis and make adequate treatment of diabetes mellitus type 2 in all stages, gives opportunity to help to eliminate or extend the terms of serious consequences.

ANALYSIS OF PROGNOSTIC VALUE OF EARLY COMPLICATIONS OF MYOCARDIAL INFARCTION

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Objective: to study the occurrence of acute heart failure (AHF), the localization of myocardial infarction (MI) risk factors, with and without Q-wave. To identify unfavorable course and prognosis of myocardial infarction early complications.

Material and methods: A retrospective analysis of medical records of patients in the clinic archive department 3- TMA for 2016 (until December). Selectively, it were studied 200 histories of patients with MI. Of these, 55 (27.5%) men and 145 (72.5%) women, mean age of 63,3 ± 11,6 years. All patients accepted methods of research (clinical and biochemical blood tests, urinalysis, coagulation, ECG) were carried out.

Results. In the course of a retrospective analysis of medical records was found MI localization that 45% (n = 308), the front wall (MI), and 28% of the rear wall, 6% peregorodychny region, 7% (n = 11), the side walls, 14% of the apex of the heart. It was found that in 83% of patients with hypertension, 32% of patients were identified diabetes and 22% of patients were obese. In 21.4% of patients had congestive heart failure. Of these, 24% pulmonary edema, cardiogenic shock, 44%, 22% of cardiac asthma, mortality rate of 10%. Of all the patients have been identified in 40% of patients had an arrhythmia. In 58% of patients with myocardial infarction occurred with wave Q, 42% of patients without wave-Q, 21% recurrence.

Conclusion. The results and the available evidence suggests that early diagnosis of acute myocardial infarction severe complications should be based taking into account the multifactorial traits, laboratory data, functional survey data, individual patient characteristics, age and factors of time. Conductive studies have shown that men suffer from acute myocardial infarction in 2, 3 times more then in age of 60 years. With increasing age, this difference is mitigated. Complications in men under the age of 60 years are typically more severe and often lead to death. In men aged 40 to 59 years they have developed an annual 0.2-0.6%, while in the older age group (60-64 g) of MI incidence is even higher, reaching 1.7% per year. Women suffer MI 2.5-5 times less often than men, especially in young and middle age. In recent years, it has been an increase in the incidence of myocardial infarction, particularly among the young and middle-aged people. Despite the widespread decline in hospital mortality from myocardial infarction, total mortality from this disease remains high, reaching 30-50% of the total number of cases.

CLINICAL FEATURES OF PANIC DISORDER IN PATIENTS WITH ALCOHOL DEPENDENCE

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Panic disorders, forming in patients with alcoholic disease, has pathoplastic influence on its course, varying in its manifestations in different variants of combined pathology. In continued alcoholism on the base of the development of panic attacks It is observed severe currents of both alcoholic disease, and panic disorder. (11. C. Kessler, R. M. Crum et al., 1997).

There is rapid social disadaptation, associated with the inability of performing their previous tasks, because of the deterioration of the quality of work and labour discipline because of abuse of alcohol, and the appearance of constraints due to agoraphobic symptoms. (M. S. Roberts, R. A. Emsley et al., 1999) Despite the expressed disadaptation of labor, and in some cases real loss of health in patients of working age with PA, such patients rarely receive invalidity for panic disorder. (I. A. Pogosov, 2000)

The aim of research: To study clinical-psychological characteristics of patients with alcoholism associated with panic disorders, with development of clinical classification of course variants disease and differentiated strategies of therapy, taking into account psychological peculiarities of the personality.

Materials and methods: The research included 23 patients with comorbid alcoholism and panic disorder, that alcohol disease in these patients preceded the development of panic dis order in age from 23 to 45 years. Among men, abusing alcohol, panic disorder was observed in 41.3% of (10) among women 33.3%(7). Among men suffering from alcoholism, panic disorder was observed in 13.6% of (3), among women - 12,0% of the patients (2)

Methods of experimental psychological research included:

- the scale of anxiety of Spielberg - Hanna, estimating the level of situational and personal anxiety.
- the scale of pathologic attraction of Cherednichenko-Altshuller
- Statistical method by Student

Results and discussion: As a result of clinical observations of patients' alcohol dependence and with comorbid panic disorder. We distinguished four variants of combined course of these diseases.

1. Alcohol - provoked the development of panic attacks with the formation of continuously current panic disorder and persistent alcohol remission;
2. Alcohol – provoked the episodic duration of PA with the development of binge conditions, and unrecovered current of alcoholic illness;(23.1%- 5).
3. Alcohol - provoked episodic duration of panic attacks with the formation of short-term of alcohol remission;(18.9%-4).
4. The development of spontaneous panic attacks on the base of alcoholic remission with the formation of continuously current panic disorder and relapse of alcoholic disease (25.5% of 6).

Conclusion. Thus, the use of differentiated prevention and treatment programs for patients with alcohol dependence associated with panic attacks, helped to increase the efficacy of restoration measures in relation both psychopathology symptoms and social rehabilitation of patients, improve the quality of PD remission and extend remission of alcoholism in patients with substance abuse profile.

ANALYSIS OF SOCIAL AND PSYCHOLOGICAL CHARACTERISTICS OF THE POPULATION IN RELATION ADHERENCE TO PHARMACOTHERAPY

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Actuality: Currently we can say that the problem of nonadherence to treatment

(both medical and non-drug) is a bigger problem than the problems associated with the disease itself, and directly with medications.

The purpose. In order to assess the typological and psychological characteristics of patients of outpatient and inpatient settings and determine the degree of commitment to ongoing pharmacotherapy. Additionally, to identify a particular relationship between the psychological characteristics of the person and the level of compliance, a comparative analysis with the assessment of the factors influencing adherence to and implementation of the individual medical prescriptions.

Materials and methods. Evaluation dominant temperament type at study of psychological properties of the person using the test G. J. Eysenck and analysis of the identified characteristics serves as the basis for the development of recommendations for the development of the strengths and weaknesses of self-regulation for the formation of psychological health and treatment adherence in patients with chronic diseases. Hans Eysenck Personality Inventory (EPI) identifies the type of temperament based on introversion and extraversion personality, as well as emotional stability. Interpretation of test results requires identifying the social and psychological characteristics of outpatients. For the purpose of determining the level of compliance in patients with chronic diseases, using techniques focused on the identification and commitment of the individual treatment based on the characteristics that lead to compliance behavior.

Results. The results of the survey show that among patients of primary care is dominated by extroverts that is - 46% ($p < 0.05$), one bright extroverts - 18%, extroverts - 28%, prone to extraversion - 2%. Patients introverts make up - 14%, prone to introversion - 4%. Among the population, there are also patients with a mean value - amboverty - 34%. The results of the comparison of personality characteristics and level of compliance shown that the most pronounced social, emotional and behavioral compliance in outpatients having introversion personality, 29, 28 and 27 points, respectively, which are considered to be phlegmatic, with features like passivity, prudence, discretion, friendliness, handling and etc. Less pronounced level of compliance the total - 68.5 points, identification of extroverts who are more than willing to contribute to the process of treatment, compared with patients with poor compliance. These patients with a low level of social, emotional and behavioral noncompliance were deep introventy total compliance (s) which was - 54.5 points ($p < 0.05$), and in particular the typical extroverted Ok - 48.5 points ($p < 0.05$) having a sensitive, anxious, aggressive, excitable, changeable, fickle character traits, which is typical choleric.

Conclusions. Thus, following the results of the study, it can be argued that the level of compliance corresponds to the real picture of attitudes towards treatment and interrelated psychological and typological personality types of patients when the sanguine and phlegmatic a more responsible approach to issues relating to their health than those choleric and melancholic.

AWARENESS OF NOVEL PSYCHOACTIVE SUBSTANCES AMONG CLINICIANS OF DRUG TREATMENT SERVICE IN KAZAKHSTAN

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The aim was to evaluate awareness rate of Novel Psychoactive Substances (NPS) among Kazakhstani clinicians practicing in drug treatment service.

Objective: (i) to determine the frequency of dealing with patients, suffered from NPS problems; (ii) to identify the list of NPS occurring in medical practice, (iii) to evaluate subjective correspondence between NPS awareness and current professional situation.

Materials and methods: The study was cross-sectional (survey). The data were collected among 68 addiction psychiatrist (narcologists) from 12 Kazakhstan cities. As instrument was used the adapted version of *ReDNet Legal highs study – Survey* (O.Corazza, 2011). In the survey 67 parameters were registered. For the statistical processing the SPSS programme (Version 20.) was used. The methods of descriptive statistics were applied (S.A. Glantz, 1999).

Results: In the study participated 24 (35.3%) males and 44 (64.7%) females. The mean age was 39.83±11.16 years. The work experience amounted to 8.91±7.31 years. The rate of professional excellence on NPS issue demonstrated following distribution. The prevailing per cent assessed their competence as "intermediate" – 25 (36.8%) doctors or "good" – 19 (27.9%) respondents. The "high/very good" level of knowledge addressing NPS had only 3 (4.4%) clinicians. In contrast, "poor" and "basic" awareness was typical for 11 (16.2%) and 10 (14.7%) narcologists correspondingly. The number of treated patients with substance addictions reached 19.10±16.31 people. Meanwhile , 2.4±2.07 patients referred to those with NPS problems. In proportion that indicator was 12.6%. In average every other NPS patient combined designer drugs with traditional substances (opioids, cannabinoids). The most known classes of NPS occurring in practice of respondents were synthetic cannabinoids – actual for 34 (50%) doctors, and synthetic cathinones - 19 (27.9%) respondents. Less than 6 (8.8%) knew about 10 world broaden NPS. The relevance of understanding/knowledge of 'NPS in relation to real routine work was ranged in the following manner. The absolute competence between knowledge and professional requirements were registered only in 14 (20.6%) doctors. The majority find this topic as moderately relevant – 42 (61.8%). Only 5 (7.4%) denied connection between actual professional situation and competence regarding NPS.

Conclusions: The problem of NPS is actual and determines the new challenges in substance addiction medicine. For Kazakhstan the problem of NPS emerged in 2009 with sporadic media-reports on unknown synthetic drugs. The results of the study represented the first pilot data on NPS and its assessment. In average one in eight patients has problems with NPS, that can be concluded from the survey indirectly. Only 22 (34.1%) of doctors from all Kazakhstan estimated their awareness as "good" or "very good". Two NPS classes from 8 mentioned were familiar to respondents. Meanwhile, the absolute majority underlined the relevance of NPS knowledge toward professional situation. Thus, the study identified the actuality of NPS issue

for the national drug addiction service. The indicators for professional training programs were revealed as measures of contraction against the NPS threat.

COMBINED THERAPY OF REFRACTORY CHF WITH LARGE DOSAGE OF SPIRONOLACTONE AND GLUCOCORTICOSTEROID

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Introduction: To assess the influence of large dosage of spironolactone and prednisone on hydration station, Na, K and cardiac function in refractory congestive heart failure (CHF) on the basis of the routine management.

Methods: 46 patients with severe CHF (cardiac function class III-IV) were randomly divided into two groups, control group (23 patients) and study group (27 patients). The routine treatment in CHF was adopted in control group (including spironolactone 20 mg/d), while prednisone (40 mg/d) and pironolactone (60 mg/d) were adopted in study group for 30 days on the basis of the routine treatment. The general clinical status, left ventricular ejection fraction (EF), serum sodium, potassium, creatinine and daily urinary volume, sodium and potassium excretion in both groups were analyzed.

Results: The daily diuresis and EF were significantly increased in both groups after treatment, but the levels of daily urinary volume, serum Na were significantly increased higher in study group, the level of Na at 7th day and 30th day was (137.12 ±2.85) mmol/L and (137.32±2.95) mmol/L respectively, K (4.12±1.12) mmol/L and (4.24±1.04) mmol/L, while those in control group (135.65±6.23)mmol/L and (135.13±3.59) mmol/L for Na respectively, (3.81±1.28) mmol/L and (3.86±2.12) mmol/L for K respectively). The level of serum creatinine and daily K excretion was lower in study group, at 7th day and 30th day were (91.87±27.72) mmol/L and (91.12±31.28) mmol/L respectively than in control group (124.21±31.68) mmol/L and (116. 02±41. 72) mmol/L. The daily natriuresis was higher in study group than in control group after treatment ($P<0.05$).

Conclusion: By using the proper dosage of prednisone and large dosage of spironoloactone, the patients with severe CHF can acquire more obvious duresis and improvement of the cardiac function with the good balance of Na, K and effective blood volume on the basis of routine management of CHF.

SIGNIFICANCE OF ANXIETY DISORDERS IN INCREASING THE PAIN SYNDROME IN RHEUMATOID ARTHRITIS

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According to modern concepts the intensity of pain syndrome in rheumatoid arthritis (RA) does not always depend on the severity of the inflammatory syndrome. In this case, the special role is played by psychosomatic or somatopsychic disorders. It is known that stress factors and related anxiety disorders are predictors of occurrence of RA, they effect on its activity and the possible outcome (Veltishev D.Yu. 2014).

Purpose of the work. Assess the level of pain syndrome in the joints in the presence of anxiety disorders in patients with rheumatoid arthritis.

Materials and methods of the work. The study design included a survey of patients with RA at admission by Sheehan and Tsung's diagnostic questionnaire detecting anxiety disorders (AD), followed by separation into two groups: with AD (the 1st group) - 20 patients (age 32.8 ± 4.2 years) and without AD (2nd group) - 20 patients (age 33.5 ± 4.6 years). All patients underwent a clinical examination, which included an analysis of complaints, anamnestic data, the study of the joints, as well as the assessment of the level of pain syndrome in them by visual analog scale (VAS), and also used the DAS28 index. Statistic processing was performed by using Statistica 99 software.

Results. Under our supervision were 40 patients (all women) with chronic pain syndrome resulting from the rheumatoid arthritis, established according to the ACR criteria (1996). All patients in the beginning of the study received basic therapy (mean dose methotrexate 7.5-10 mg / week) and stable doses of nonsteroidal anti-inflammatory drugs. Subjectively, the sense of inner anxiety manifested in patients of the 1st group by the presence of inner tension, restlessness, sense of fear, sleep disorders, vegetative dysfunction in the form of tachycardia and sweating. At the same time, these patients had subclinically expressed depression measured by the hospital rating scale of depression and Zung's self-esteem scale of depression that was not significantly different from the level of healthy people. Obtained data showed that the clinical course of RA at the presence of AD is accompanied by certain clinical manifestations, particularly in the manifestations of pain syndrome in the joints. So in 1st group the level of pain according to VAS was 9,3 ± 1,2 points in front of 5,5 ± 2,4 points of the 2nd group. In addition, in the presence of AD also was noted the high activity of the process in both DAS 28 and ESR value. However, significant differences between groups in radiological and functional changes have not been obtained. Consequently, severity of AD in RA patients determined by the characteristics of disease severity.

Conclusion. The presence of AD in patients with RA affects the intensity of pain syndrome in the joints. Therefore, understanding the mechanisms of such pain has the important practical significance because it contributes to a differentiated and integrated approach in therapy.

STUDY PRESENCE OF OBESITY, HYPERCHOLESTEROLEMIA AND EATING REGIMES IN PATIENTS WITH IHD CONCURRENT WITH HD

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Introduction: The most famous study, GISSI-Prevenzione 1 (Italy) have shown that a diet enriched in less than 1 gram omega-3 lipid acids per day , significantly reduced the risk of death from cardiovascular causes by 17% , in particular , the risk of sudden cardiac death in the 26% the risk of nonfatal myocardial infarction not decreased. Given the urgency of research in this field , the **aim** of the study to explore the imagined constitutional data of patients before treatment in the group without dietetics.

Materials and methods: The study involved 48 patients with IHD and HD. All patients underwent comprehensive study, including: medical history, physical exami-

nation, clinical, biochemical analysis and instrumental methods of research allowed to verify the diagnosis of IHD and HD. It was found that the obese suffer from various degrees of 28 (58.3%) patients with IHD, including: overweight celebrated - in 14 (50,0%) patients; 1 degree - in 7 (25,0%); 2 degree - in 6 (21,4%); 3 degree - in 1 (3,6%) and only normal weight detected in 20 (41,7%) patients. On average, patients in the group regardless of the degree of obesity entered the weight string index Ketle equal to 31.6 kg / m^2, which indicate the presence of a relatively high risk of developing cardiovascular danger. Than all patients studied was scheduled study of the level of lipid fractions.

Results: The patients of our study almost 90% of the patients consume fat, flour and meat food, eating fruits and vegetables was observed in 42% of people in the amount of 150-200g. Accordingly, the knowledge and skills of compliance dietary recommendations before training showed that: to know and comply with the dietary recommendations, only 14 persons (29%) analysis of blood lipid parameters in the group showed that a significantly significant increase relative to the control group showed indicators TG levels. 60.9%, VLDL cholesterol, by 15.3%, atherogenic ratio at 2.56%. In our study provide evidence of significant increase in the level of cholesterol, triglycerides, LDL, VLDL and atherogenic factor in 41 (60.3%) patients of group 1 patients with IHD. That the examined group of patients elevated levels of lipid fractions and a high percentage of obesity , took statins on prescription under the scheme only 4 (8,3%) patients among the patients.

Conclusion: It is believed that the reduction in serum cholesterol at 1% reduces the risk of coronary insufficiency expressed by 2%. Hence the rule: the considerable DLP, the stricter the diet must be justified.

FEATURES OF CORONARY HEART DISEASE COMBINATION WITH PATHOLOGY OF THE GASTRODUODENAL ZONE

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Objective: The aim of our retrospective analysis was to determine the number of patients with coronary artery disease combined with gastroduodenal pathology and determine the degree of the relationship of these diseases with coronary artery disease with pathology.

Material and Methods: For this purpose, we have studied the 2636 medical records treated in the department of cardiology and cardio-rehabilitation clinic TMA-3 for 2014 - 2015. The pathology of gastro-intestinal tract was diagnosed in 300 patients (11%). Of these patients (173 men and 127 women) aged 33 to 91 years (mean age - 61.6 years). Verification of the diagnosis was made on the basis of subjective and objective criteria and the results of laboratory and instrumental studies listed in ICD-10.

Results: The retrospective study included surveys of 300 patients, mean age of 62,6 ± 9,9 years. Of these, 127 women (42.3%) and 173 men (57.7%). Duration history of the disease (CHD) ranged from 4 to 12 years. Essential hypertension (EH) was diagnosed in 295 patients (98.3%), of whom 128 (42.7%) women and 167 (55.7%) men, in 219 (73%) patients revealed GB II -III degree. In 290 (96.6%) patients had stable exertional angina functional class (P / R) II of 63 (21.8%) (P / R) III of 167 (57.5%), 60 (20.7%) patients (P / K) IV.

CHD combined with gastroduodenal pathology (GFC) was detected in 176 (58.7%)

patients, of whom 10 (5.7%), gastric ulcer, 43 (24.4%), peptic ulcer duodenal ulcer, 44 (25.0 %), gastritis, 32 (18.1%), gastroesophageal reflux disease, 28 (15.9%), axial hiatal hernia, esophagitis, 9 (5.1%), duodenitis 10 (5.7%). Among the 300 patients studied in 176 (58.7%), ischemic heart disease observed in conjunction with the ODS. Of the 176 patients was conducted EFGDS 72 (40.9%) patients and 104 (57.9%) patients because of the severity of the condition for the study of coronary artery disease carried out.

Conclusions. The pathology of the gastrointestinal tract against the background of ischemic heart disease accounted for 11%. Among the diseases of the gastrointestinal tract pathology of gastroduodenal zone in patients with coronary artery disease was 58.7%. Comorbidity CHD and ODS, regardless of the severity of the GFC, manifested in the deterioration of clinical status and quality of life of patients. Features combined CHD, and CDP must be considered in the diagnosis and treatment of such patients.

EFFECT OF THERAPY TERAFLEX AND ALFLUTOP ON THE PROGRESSION OSTEOARTHROSIS

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Purpose of the work. Comparative study of effect of therapy Teraflex and Alflutop at the symptoms and radiological progression of osteoarthritis (OA) of the knee joints.

Material and methods. The study included 48 patients with a significant diagnosis of gonarthrosis (GA). Diagnosis of the disease was carried out according to the criteria of the American College of Rheumatology GA. In case of absence radiological criteria for the diagnosis of GA have established at presence of a combination of clinical symptoms (pain of mechanical nature, stiffness in the joints <30 min limit function). Radiological stage of gonarthrosis were evaluated according to the classification Kellgrena-Lawrence. Teraflex used 1 capsule 3 times a day for 1 month, then - 1 capsule 2 times a day for 6 months. Alflutop patients received a total dose of 20 ml per course. Have used combined administration scheme: against intramuscular injection of 1 ml of the drug through the day it was administered intra-articularly 2 ml every 2-3 days for 5 injections into the affected joint.

Results of observation and its discussion. After 6 months of continuously using of Teraflex noted positive dynamics of clinical parameters. Therefore, the intensity of pain at rest and when walking has decreased from baseline values with 31,44 ± 7,12 and 52,82 ± 12,48 mm to 20,89 ± 7,44 and 30,65 ± 12,42 mm respectively ($p < 0.01$). Positive impact on the GA symptoms observed after 6 months of therapy with Alflutop. Intensity of pain at rest and when walking decreased from baseline to 36,12 ± 13,23 and 55,41 ± 13,25 mm to 20,55 ± 8,45 and 34,67 ± 12,89 mm, respectively ($p < 0.01$). One of the important indicators of the progression of structural changes in the knee joint at the GA are osteophytes, increase their number and size. The therapy Teraflex and Alflutop was revealed insignificant progression of osteophytosis. Radiographic progression of at Kellgrenu-Lawrence on ≥1 radiological stage on the background of long-term therapy Teraflex ascertained in 8.6% of patients on the background Alflutop therapy in 7.8% of patients.

Sum up all, in long-term treatment as the Teraflex and Alflutop had a positive effect on the symptoms of the GA, demonstrated a deterrent effect of therapy with both drugs, started early in the process, the progression of the disease.

INVESTIGATION OF LIPIDIC SPECTRUM IN THE FEMALES WITH "SUBCLINICAL HYPOTHYROIDISM" LIVING IN ANDIJAN VILLAGE OF ANDIJAN REGION

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Introduction. Hypothyroidism - is a clinical syndrome, which occurs owing to the constant insufficiency of thyroid gland hormones in organism for a long period of time or as a result of reducing their biological effect as a tissue. Now, hypothyroidism occurs in 7-10 % of females and 2-3 % of men. Subclinical hypothyroidism – is characterized by gradual aggravating chronic condition of thyroid gland of immune pathologic character, normal level (T4) of free thyroxin and large amount of thyroid-stimulating hormone (TSH). It is on the leading place among all pathologies of thyroid gland according to the prevalence in population

Aim. At present the mentioned pathology is considered to be the most important.. But, nevertheless, its diagnostics and study of concomitant diseases still cause some problems. If not to reveal in proper time latent hypothyroidism may produce a number of grave conditions. Our aim is concentrated on estimating lipid and hormonal profile of the women ill with latent hypothyroidism, prevention of its transition to manifested hypothyroidism and stop development of various diseases.

Material and methods. We divided according to degree of thyroid stimulating hormone of examinated women**.** In our examination 100 women took part from 17 year to 66 year. We divided all patients 3 groups according to amount of thyroid stimulating hormone:

1-group. TSH 0,4<2mU/l

2-group. TSH 2-4mU/l

3-group. TSH >4mU/l

Result. According to our investigations, lipid profile of the patients ill with subclinical hypothyroidism have been examined. The studies showed that general cholesterol, lipoproteins with low density, triglycerides have been considerably increased in first and second groups. It consist of 32 patients.

Conclusion. In patients with the amount of TG more than 4mU/l the level of general cholesterol, triglycerides, lipoproteins with low density (LLD) have been found in quantities, whereas the level of lipoproteins with high density (LHD) was considerably low.It has been determined that in patients who haven't reached the age of 66 the risk of acquiring ischemic heart disease is high as a result of subclinical hypothyroidism.

THE QUALITY OF LIFE OF WOMEN WITH SUBCLINICAL HYPOTHYROIDISM, DEPENDING ON THE LEVEL OF THYROID STIMULATING HORMONE

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Aim of the research. to evaluate the life quality of women with subclinical hypothyroidism depending on the level of TSH.

Material and methods. 81 women of 20 up to 57 years were included in the investigation. The average age composed 40,4±10,1 years. The basic group was composed of 60 women with subclinical hypothyroidism, the average age composed 42,0±10,4 years. Depending on the level of TSH, the patients are divided into 2 groups: the 1st group consisted of 39 women with TSH level was determined for the first time and the normal level was free T4, a second research of both data was made after 2–3 months. For the evaluation of lives of patients a short version of the questionnaire of health (MOS 36−Item Short-Form Health Survey— MOS SF−36) was used. 36 parts were grouped in 8 scales: physical functioning, role functioning, body ache, general condition of health, life activity, social functioning, role emotional functioning and psychic health. The data of each scale vary between 0 and 100, where 100 presents full health. All the scales form 2 readings: physical and psychological component of health. The readings of each sub scale were counted by using a special key, defended by an International author's right. The results are presented as the ball marks of 8 scales. They are composed in such a way that a higher mark points to a higher level of quality of life(QL).

Results. Analysis of patients' complaints of the 1st and 2nd groups didn't reveal considerable differences. However the women with the level >10,0 mU/l TSH complained of increased exhausting more often (76,9% and 81,0% in accordance with the 1st and 2nd groups), malaise (56,4% and 76,2%), heartbeat (51,3% and 66,7%), the sense of sadness and alarm (53,8% and 71,4%), headache (48,7% and 61,9%), dryness of the skin (46,2% and 57,1%), worsening of the memory and attention (61,5% and 61,9%), the feeling of numbness (35,9% and 61,9%) bad tolerance to cold (41,0% and 47,6%) and destruction of Menstrual Cycle (43,6% and 57,1%). Half of the patients with SH pointed out that they are not able to do all the household affairs with the connection of their bad physical condition. Low balls by the component of SF (14,3% and 16,7% in accordance) means considerable limit in social contacts, decrease of the level of dealing due to the worsening of the emotional and physical state. Average readings of REF (12,2% and 14,9% in accordance) were also lower comparing to clinic control and speaks about the presence of women's problems (worry about their health, bad mood). They result in considerably negative influence on their social activity and daily role activity. The reading of PH (13,8% and 16,9% in accordance) was initially low comparing to the control, it means about the lability of the mood and presence of alarm-depressive state of the examined women. Comparative analysis of the readings of the 1st and 2nd groups didn't reveal any differences.

Conclusion.

1. We have observed the fall of physical and psychic components of life quality in

women with SH living in Andijan region by the questionnaire SF−36, it was highly expressed in patients with 10,0 mU/l level of TSH.

2. The evaluation of the readings of women's QL enables to evaluate the clinical picture of the disease objectively at the beginning and the dynamic study of the readings of QL will give the opportunity to determine the effectiveness of the therapy in the future.

RHYTHM AND CONDUCTION DISTURBANCES IN MYOCARDIAL INFARCTION WITH CONCOMITANT METABOLIC SYNDROME

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Today arrhythmias are hardly detectable and sometimes fatal complications of myocardial infarction. Increased mortality in MI - patients with MS has been proven. An open question remains regarding the possibility of MS to potentiate the development of arrhythmias in MI

The aim of our study: to determine the frequency and type of arrhythmic events in patients with acute myocardial infarction on the background of MS.

Materials and Methods: In order to achieve this goal case histories o f 134 patients hospitalized in the 3rd clinics of the Tashkent Medical Academy with a diagnosis of acute myocardial infarction with ST-segment elevation were studied. Patients with comorbidities that could independently affect cardiac rhythm and conduction were excluded from the study. Diagnosis of MS is established in accordance to the recommendations of VNOK (RSCC). Later, after analyzing the stories, all patients were divided into 2 groups: the main and control. The study group included 24 patients with myocardial infarction in the background MS, 77 patients with myocardial infarction without concomitant MS control group. All medical records were studied for the presence of arrhythmias recorded on an electrocardiogram, or diary rounds (based on ECG monitoring). Identified arrhythmic complications classified and systematized.

Results. After completing the analysis of arrhythmic events in various combinations identified in 45.8% of cases in the study group and in 33.7% - the control. The test group showed a significant increase in the risk of supraventricular arrhythmia (25% vs. 13%), ventricular arrhythmia (29.2% vs. 10.4%), ventricular tachycardia (12.5% vs. 7.8%) and ventricular fibrillation (4 1% versus 2.6%). The incidence of sinus bradycardia, tachycardia, supraventricular tachycardia, atrial fibrillation, atrioventricular block and left bundle branch block were not significantly different in both groups.

Conclusions. According to information received, arrhythmic complications of myocardial infarction in patients with concomitant MS observed significantly more frequently than in the control group (45.8% vs. 33.7%). In patients with myocardial infarction with concomitant MS the development of supraventricular and ventricular arrhythmias, ventricular tachycardia and ventricular fibrillation is more likely.

COMBINATION THERAPY IN EARLY STAGE OF RHEUMATOID ARTHRITIS

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Introduction. It is known that the early period of rheumatoid arthritis (RA) has a critical role in the development and progression of immune inflammation. Allocation of early RA is due to the need for timely appointment of basic anti-inflammatory drugs to prevent the development of destructive changes in the joints and improve its current forecast. We have proposed a combination of two basic drugs for the treatment of RA, methotrexate (MTX) and leflunomide (LF). While this combination, we proceeded from the basic principles of combination therapy: each of the drugs has an independent clinical effect in early RA, the drugs have different mechanisms of action and different spectrum of side effects.

Goal. Investigating of clinical efficacy of combination therapy with MT and LF in patients with RA in its early stages.

Material and methods. We observed 80 patients with early RA, 50 patients of them were women and 30 patients were male. The age of patients ranged from 24 up to 42 years old (31,7 ± 7,6), the duration of illness was 6 months. Activity of RA was corresponded to the II degree (DAS 28 <4.7) in 48 patients, III degree (DAS28> 5,1) was in 32 patients. 1st group consisted of 40 patients and the 2nd group involved 40 patients. Patients in 1st group received combination therapy with LF in doses 20 mg / day and MT in doses 7.5 mg / week. 2nd group received just MT as a single basic anti-inflammatory drug in doses 7.5 mg / week. In order to improve portability of MT was administered to all patients folic acid in doses 1.2 mg / day, 5 days in a week. The efficiency of the intervention was evaluated after 6 months by reducing of the final value of the indicator of inflammatory activity.

Results. The results of observation of patients for 6 months were showed that, combination therapy with MT and LF provides a quick and pronounced clinical effect in patients in the early stages of RA. Patients of 1st group according to criteria ACR 50- 70% improvement was achieved in 50% of patients, while figure of all indicators of patients in 2nd group was 33.4%. During the treatment was indicated improvement of laboratory parameters of disease activity of RA in both groups, features of activity of 1st group were decreased up to (DAS28 = 2,9), signs of 2nd group were (DAS28 = 3,6). However, there were 26% of cases of clinical remission of the disease in patients of 1st group than patients of 2nd group. Known side effects of combination therapy with MT and LF in most cases have not been severe, reversible and demanded the abolition of drugs in rare (11.2%) cases.

Conclusion. Combined basic therapy of patients in the early stages of RA with LF and MT has more efficiency than mono therapy.

MODERN APPROACH FOR LABORATORY DIAGNOSIS OF EARLY RHEUMATOID ARTHRITIS

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Early diagnosis and treatment of rheumatoid arthritis (RA), especially in the ini-

tial stages of disease can eliminate destructive changes in the joints. Today, detection of antibody against cyclic citrulline peptides (ACCP) is considered one of the modern methods of laboratory diagnosis to find a solution to this pressing issue.

Objective: The definition of diagnostic necessity of ACCP in the early stages of RA.

Materials and methods of research: This study has included 40 patients, 28 of them were men and 12 of them were women. Patients' age was 18-54, disease duration of 23 patients was 1 up to 6 months (1st group), 17 patients of them have a term of more than 12 months (2nd group). These patients' age, disease and the level of activity compared to the same link. Study has excluded patients with visceral signs of disease. Rheumatoid factor (RF) and ACCP were suggested to determine.

Results: The results of laboratory investigations have illustrated that, in 21 patients with a disease duration up to 6 months, and in 16 patients who have more than 12 months of disease duration has been detected excess levels of ACCP (≥20 ED / ml). Diagnostic sensitivity of ACCP in patients with RA> 6 months was indicated 91.3% and in patients with RA> 12 months was expressed 94.1%. RF was detected in 14 (60.8%) patients of 1st group and in 10 (58.8%) patients of 2nd group. 15 (93.7%) of 16 patients of both groups with seronegative RF were demonstrated the highest titers of ACCP.

Conclusion: ACCP has been considered as the most sensitive and specific serological marker in the early stages of RA.

ADHERENCE REHABILITATION PROGRAMS IN PATIENTS AFTER MYOCARDIAL INFARCTION WITH PATHOLOGICAL Q WAVE

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Introduction: Myocardial infarction is the main cause of premature death and substantially accounts for morbidity especially in the developed world. Recently, it is shown that there are nine common potentially modifiable risk factors which are; low consumption of fruits and vegetables, smoking, abdominal obesity, diabetes, physical inactivity, no alcohol consumption, hypertension, psychological factors.

Cardiac rehabilitation has strong-based evidence in reducing morbidity and mortality rate. However, the form of rehabilitation must be comprehensive enough so as to achieve its purpose. The effect of rehabilitation after acute infarction cannot be over emphasized because of its far reaching benefits in terms of improve physical, social, emotional and the totality of life in general.

Purpose of the study: To evaluate adherence rehabilitation programs (RP) in patients after myocardial infarction with development pathological Q wave based on Cardiac Rehabilitation Barriers Scale (CRBS).

Materials and methods: According to the conditions and objectives of the study as the object was selected 36 patients with Myocardial infarction development with pathological Q wave men and women aged 30-70 years enrolled in therapeutic departments Cardiology in the 1st clinic for TMA and 37-familiar polyclinic of city of Tashkent . All patients will pass from relevant special questionnaire, diagnostic tests, clinic laboratory and instrumental examination.

Results: Based on CRBS from 36 patients 23 (63,9%) patients didn`t follow RP. 6 (16,7%) patients followed incompletely RP. Only 7 (19,4%) patients followed RP completely. When the scores were analyzed for each subscale, the highest score was determined for two question "because I don`t know about cardiac rehabilitation" and "Because many people with heart problems don`t engage in cardiac rehabilitation and they are fine"

Conclusion: Patients who diseased myocardial infarction with pathological Q wave followed low degree to rehabilitation programs. Mainly cause consists of that many of them didn`t know RP and considered CR less useful.

DIAGNOSTIC APPROACH OF CEREBRAL MICROANGIOPATHY IN PATIENTS WITH DIABETES MELLITUS TYPE 2 BY DOPPLER ULTRASOUND

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Objectives: To identify opportunities Doppler ultrasound in the diagnosis of cerebral microangiopathy in patients with diabetes mellitus (DM) type 2 and hypertension (AH).

Materials and methods: The study included diagnosis of 72 patients with type 2 diabetes and hypertension were hospitalized in the 2 and 3 clinics TMA. The control group consisted of 25 patients aged 61,9 ± 2,6 years, suffering from type 2 diabetes. The study group included 47 patients (19 men and 28 women), older age groups with diagnosed type 2 diabetes and hypertension history, besides the patients of the second group were divided into two groups - those with diabetes complications flow (nephropathy, retinopathy and polyneuropathy) - 23 patients without microvascular complications - 24 patients. Time monitoring of patients ranged from 3 to 8 years. All patients underwent Doppler ultrasound of the main arteries of the head and neck - the internal carotid artery (ICA). Evaluated the speed of blood flow indices, the PI index (which determines the stiffness and elasticity of the arteries), the RI index (reflecting peripheral resistance), systolic and diastolic index (the ISD), assessed cerebrovascular reactivity (according to tests with breath holding and hyperventilation).

Results: Changes dopplerographic index (PI> 1, RI> 0,7) in the BCA observed in 19 (82.6%) patients in the subgroup with diabetes complications compared with 2 (8.3%) patients of the subgroup without complications. In the subgroup with diabetes complications in 21 (91.3%) patients had signs of nephropathy and in 18 (85.7%) of them were identified changes dopplerographic indicators BCA, which may indicate vascular remodeling processes in the body of patients with type 2 diabetes. Significant ($p < 0,05$) moderate ($0,5 < r < 0,7$) and strong correlation ($r > 0,7$) LED current duration of type 2 and the presence of diabetic retinopathy and nephropathy, altered dopplerographic indices PI and RI . So a critical increase in the ICA RI index was observed after 6.8 years after the diagnosis of type 2 diabetes. It was revealed that the predictors of microcirculatory disorders in patients with type 2 diabetes mellitus were the duration of 8 years (OR = 2,36, $p < 0,05$).

It is shown that microcirculatory disorders, diagnosed by means of ultrasound diagnostics, develops an average of 7 years after the onset of diabetes ($p < 0,05$).

Changes dopplerographic indices were observed mainly in patients with type 2 diabetes complications (82.6%). At the same time in all patients with diabetes study group for the duration of 2 years, more than 7 marked change in cerebrovascular reactivity by reducing vasodilatation reserve.

Conclusions: These results suggest that Doppler ultrasound to diagnose cerebral microangiopathy in patients with type 2 diabetes.

THE MAIN ASPECTS OF THE NECESSITY FOR NON-PHARMACOLOGICAL TREATMENT OF ANGINA

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T**he purpose of the study:** insufficient frequency recommendations for lipid-lowering diet, refusal of smoking, an increase of physical activity are repeatedly mentioned in the literature. Even in relatively recent study EUROASPIRE II most of the enrolled patients with coronary artery disease had not received any professional assistance with lifestyle changes. Therefore, the original purpose of our study was to examine the state of the fight against malnutrition by patients with coronary heart disease with hypertension

Materials and research methods: According to our requirement at the first stage of our inspection in a random way by 22 GPs were selected hospital records of patients in an amount up to 5 persons consisting on the dispensary with CHD

Results of the study: When analyzing the data of 110 outpatients revealed the presence of excess weight by 27 (24%) patients, and physical inactivity by 29 (26%), but the mark of the BMI and the appointment of a dosage of physical activity to patients in an outpatient cards, found in only 2% of the studied. The rules of a balanced diet are general in nature and, as a rule, are reduced to the abandonment of salty, spicy and fatty foods by 21 (19%) medical card. The presence of mental and emotional distress syndrome noted in 28 (25%) outpatients rural medical centers. The study also found that the level of cholesterol and triglycerides in the blood is elevated in 45 (40%) patients, but the correction of lipid-lowering drugs GPs carried out only in 6 patients, which accounted for 5%. This suggests low awareness of primary care physicians about the risk factors of CHD and its prevention basics.

Most of the risk factors associated with lifestyle, one of the important component of which is food. It manifests itself in action on blood lipid and processes of thrombus formation, the protective effect contained in fruits and vegetables complex carbohydrates and fiber. According to some studies, it is considered the best food, in which the share of total energy derived from complex carbohydrates is 46-66%, sugar - 10% of protein - 12-13% of the total fat - 30%. Food is considered optimal, wherein the proportion of the total energy received from the complex carbohydrate is 46-66% sugar - 10% of the protein - 12-13% of the total fat - 30%. Today, in most cases, food doesn't correspond to these indicators. This is confirmed by the data of 24 patients, 2 phase of the study, admitted to the cardiology clinic the first TMA with a diagnosis of ischemic heart disease in combination with hypertension

When collecting history we have defined the attitude of our patients to the rules of a balanced diet and compliance with dietary recommendations: strictly adhere to them only 5 (20%) of patients with coronary artery disease; often - 9 (37.5%) pa-

tients; sometimes - 10 (41%) among surveyed. Not giving heed to dietary recommendations, in large enough quantities take fatty (prevalence in the diet of animal fats), salt, flour dishes - 19 patients (79.1%).

The lack of preventive measures in terms of dietary advice led to a sharp increase in the levels of other risk factors, which presumably is a poor prognostic sign in the progression of coronary heart disease.

THE SAFETY AND EFFECTIVENESS OF DIFFERENT APPROACHES OF ALLERGEN-SPECIFIC IMMUNOTHERAPHY IN PATIENTS WITH RESPIRATORY ALLERGOSIS

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Goal: To examine the safety and effectiveness of the various approaches of allergen-specific immunoteraphy (ASIT) in patients with respiratory allergies in the study included 240 patients with pollinosis of which 102 were women and 138 were men. For forcification of ASIT in the study used the method of systemic enzyme therapy(SET) with drug Vobenzym. Patients were randomized into 4 groups: 1st – patients received treatment of water-salt pollen allergens injected by injection method (iASIT); 2nd – treatment of water-salt pollen allergens injected by the injection method was preceded by a 2-week SET drug Vobenzym; in the 3rd – the patients received sublingually ASIT (slASIT) method according to the scheme in accordance with international recommendations; 4th – sublingually ASIT method was preceded by a course of systemic enzyme teraphy Vobenzym. The study of systemic reactions of organism to the injection of various dilutions of the allergen showed a dependence not only on dose of administered allergen, route of injection and measures the forcification of immunoteraphy. The highest frequency of systemic reactions was observed in patients undergoing iASIT (50%) than slASIT, which they noted only at 27.6%. Forcification of immunoteraphy with drug Vobenzym permitted to reduce the frequency of systemic reactions to 26.6% compared to iASIT and 39.5% in comparison with slASIT. Changing the way the introduction of ASIT has resulted in an absence of systemic reactions in breeding 10-4-10-3, also reduced 8.0% systemic reactions in breeding 10^{-2}-10^{-1}. Forcification immunotherapy Vobenzym reduced the frequency of systemic reactions in 10^{-3} -10^{-4} in 3 times when iASIT + SET with 20.0% to 6.7% and breeding 10^{-2}-10^{-1}-at 39.5% at slASIT + SET. Evaluating the development of local reactions of different approaches to ASIT, depending on the number of cause-significant allergens, it was found that among patients with the amount of less than 3 allergens local reactions were noted in 66.7% of patients with iASIT, 20.0% iASIT + SET and by 14.3% on slASIT and slASIT + SET. Among patients with a lot of cause-significant allergens 3 and more frequency of systemic reactions was higher and consequently was 66.7% 45.0%, 45.5% and 17.4%. The results suggest that slASIT forsification Vobenzym can serve as an alternative choice in conducting ASIT in patients with pronounced polisensibilization. Comparison of the frequency of adverse systemic reactions depending on the dilution of allergen at different approaches introduction to groups with different amounts of important allergens (less than 3 and more than 3 allergens) showed that when classic and classic

of forcificated Vobenzym noted a lower frequency of adverse reactions, and only the introduction of large doses of the allergen. In summary it must be emphasized that classic - safe and highly effective method of therapy of pollinosis with the comparable security with the classical method ASIT, but in some respects superior to it. Sublingual ASIT allows at the stage of maximum concentration of the allergen to avoid severity of side reactions. Classic fortificated Vobenzyma can serve as an alternative choice to carrying out ASIT in patients with severe polisensibility.

DOCTOR'S HUMANISM

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Doctor's humanism has always been his main and essential quality. "All that is sought for wisdom - Hippocrates wrote - it's all there and in medicine, namely, contempt for money, conscientiousness, modesty, simplicity in clothes, respect, judgment, decisiveness, cleanliness, plenty of ideas, knowledge of everything that is useful and necessary for life..." [Hippocratic Oath // http: //lechebnik.info]. However, the XX century has left behind not only huge scientific and technological achievements, but also a considerable amount of spiritual loss, especially moral one. Humanism, unfortunately, is one of them. Even medicine, which historically grew out of compassion, today has become an exception. And all this is despite the scientific and practical achievements in medicine, advances in a variety of its branches. In the XXI century, the patient will not be in less need for human involvement, but he may need even more involvement.

What is humanity and how it manifests itself in medicine? Humanism – is a worldview, in the center of which is the idea that a man should be of the highest value. Humanism affirms the value of man as a person, his right to freedom, happiness, development and expression of his abilities. Humanism in Medicine - is respect for the individual through the mercy and compassion. No wonder that among the extant precepts of ancient medicine, one of the first places is given to a call of great Greek physician and philosopher Hippocrates "do no harm". And in his "Oath," he declares, "Pure and undefiled I will spend my life and my art. In whatever house I ever go in, I'll go there for the benefit of the patient ... "[Hippocratic Oath // http: //lechebnik.info].

And Friedrich Nietzsche observed accurately: "Higher spiritual development ... the doctor; he should also have the eloquence that would have to adapt to each individual and to involve all the heart, courage, is the sight of which would be distilled off cowardice (the wormhole of all patients), the agility of the diplomat, the subtlety of the police agent and attorney to learn the secrets of the soul, without giving them - in short, a good doctor needs to artificial techniques and advantages of all other professions; in such arms, he can become a benefactor of the whole society, multiplying the good things, spiritual joy and productivity, preventing evil thoughts, intentions, and all sorts of villainy ... ".

Therefore, a physician in the modern sense, is not only a graduate, with a degree wearing white coat, but also a formed highly spiritual person, possessing high human qualities as kindness, sincerity, honesty, openness, compassion, humility, justice. Today, the primary task is the formation of a fundamentally new moral and ethical consciousness of future specialists even during their training in medical school. For medical students it is necessary to philosophically understand biomedical problems.

Time urgently demands from people, especially from doctor researchers, understanding the higher meaning of all-encompassing philosophical formula: "To love a person." Only strict adherence to this humane formula will enable humanity to not only survive, but also grow progressively.

THE ROLE OF EDUCATION IN THE PREVENTION OF INFORMATION THREATS

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The purpose and objectives: identify positive and negative aspects of the information society. Show the role of education in the prevention of information threats.

A characteristic feature of modern society is its informatization - the active development and implementation in all areas of human activity of information technology and equipment. Information and information resources are a decisive factor in the development of the individual, society and state. A wide range of computers and information technologies make it possible to automate the state monitoring and management processes, economic, social and other objects and systems to receive, collect, process and transmit information about these processes virtually in any desired speed and in any quantity.

All this provides the basis to say that today the informatization plays a crucial positive role in human development; the information society is objectively inevitable. But here arises another problem. With the emersion and development of information technology, more sophisticated technical devices there appeared information threat that harms the individual, the state, and society. Uncontrolled information is used not only for the creative, but for destructive purposes: to promote violence, aggression, pornography, public mind control, etc. The first President of the Republic of Uzbekistan Islam Karimov in his work "High spirituality – is an invincible force" emphasizes the negative impact of these trends and notes that even the smallest information, which appears at first glance minor, in the current context of globalization of information space can do incomparable damage to the spiritual and moral education of youth and girls. Currently, tens of Internet sites are directed against the Republic of Uzbekistan and are seeking to destabilize the country.

Information threats directed at society as a whole, but especially at young people, which lead to the possibility of creating an atmosphere of immorality and lack of spirituality among the next generation. Young people, we may say, are "Eagerly drawing information of different content." In particular, "absorption" and the spread of youth "mass culture" is a speedy pace and the whole world is concerned about this problem. Of course, there were positive moments in the functioning of «mass culture" related to its appearance in the age of mass media - the media and informatization; it really brings to people one or the other cultural heritage samples (eg, broadcasting of world opera masterpieces, travelling to museums, filming of textbook works), informs the new thoughts and feelings promptly, it helps to relax, etc. But if we compare this with the negative effects of "mass culture", the whole positive part is "erased" and "comes to naught." According to the Spanish philosopher and critic X. Ortega y Gasset, rapid population growth, massivization processes, mechanization forms the mass man, weaken the cultural, moral status of civilization [Klimova L.E. Popular Culture: the nature and function. URL: http://superinf.ru/].

Conclusion: Fair to say that our country pays great attention to the moral education of youth. The Republic has adopted the "National Program for Personnel Training", "The national program for the development of school education", the Law "On education", the purpose of which is to educate fully developed and spiritually rich individual, which can counteract the various information threats, including "mass culture".

PREVALENCE OF MAJOR RISK FACTORS OF ALLERGIC DISEASES IN CHILDREN IN THE CITY OF TASHKENT

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Allergic diseases are one of the most frequent causes of the violation of social activity, early disability of children and young working population, that brings enormous economic damage and determine its medical and social significance.

Purpose of the study. To study the risk factors of allergic diseases in children's contingent in the city of Tashkent.

M**aterial and methods**. The test materials were statistics Allergic Center of the Republic of Uzbekistan, 2015. In this study, the clinical and statistical methods were used.

Results. Of the total number of children who have identified an allergic pathology, 66.5% had isolated forms of allergic diseases: atopic dermatitis - 27.5%, asthma - 26.4%, seasonal allergic rhinitis - 12.6% of children.

The study of age-related features of allergic diseases among children surveyed showed a clear tendency to expand the clinical manifestations of the disease as children get older. For children under the age of 4.5 years revealed mostly atopic dermatitis, and 5 years of atopic dermatitis and bronchial asthma by the age of 5.5 years often observed combined pathology: atopic dermatitis - asthma. C 5-6 years frequently diagnosed atopic seasonal rhinitis isolated and combined with bronchial asthma.

In the study of lifestyle characteristics of the surveyed preschool children found that 65.18% of children, parents have the harmful habit of smoking. Unfavorable psychological climate holds 32.24% in families. There are no physical education at 65.65% and 75.23% at the hardening of children, physical inactivity observed in 73.36% of children.

According to the results of this study, in 23.48% of the surveyed children had allergic disease in the immediate family. More than half (51.51%) children often suffered from acute respiratory infections. Allergic diseases or symptoms of allergic diseases observed in the past history of 42.75% of the children, chronic respiratory disease in 36.68% of the gastrointestinal tract in 33.52%.

Conclusions. The criteria for the risk factors that contribute to the formation of allergic diseases in children living in rural areas, is a combination of medical and biological (genetic predisposition to the development of atopic diseases), socio-hygienic and sanitary-hygienic factors. The results indicate the need for targeted development and implementation of measures to eliminate or mitigate the adverse effects of the most important risk factors to health, in this case, the incidence of allergic children.

TO SOME MEDICAL-SOCIAL ASPECTS OF CHILD DISABILITY

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Children's disability is a major problem today. Hundreds of thousands of disabled children need attention and support of society, social, medical and other assistance. The relevance of this issue indicates the quantitative growth of disability in childhood and adverse trends in its structure.

Child disability, risk factors for childhood disability, health care for children with disabilities.

Disability in childhood is not only a complex medical and social problem, but also brings significant economic loss to society from the sphere of public activity is excluded adult family members caring for a disabled person from childhood. Heavy moral and psychological climate in families where there are disabled from birth, as a rule, lower material wealth, cannot say a negative impact on quality of life of the family as a whole (1,2).

In the Republic of Uzbekistan is one of socio-economic, medical and preventive measures to protect the health of mothers and children to their harmonious development [3,4].

One of the priorities in health care reform is the prevention of disability in childhood development of medical and social assistance to families with children with disabilities. This is especially true for large cities, which is the Tashkent.

The aim of the study was to examine the age characteristics of childhood disability, identifying risk factors contributing to its formation.

Materials and methods. The prevalence of childhood disability in Tashkent studied a continuous method in dynamics over the period 2001-2010. Investigation of causes of disability, circumstances and lifestyles of children with disabilities and their families conducted in 2008-2010. Within the framework of a comprehensive program. The study included children up to age 16 who are on the dispensary in general practice family health centers of 4 districts of Tashkent, Mirzo-Ulugbek, Chilanzar, Shayhontahur and Almazar. Collecting the material was carried out by polling interviews of mothers and vykapirovki data from the primary registration of medical records of the child with a disability. To unify the collection of information has developed a comprehensive questionnaire "Study of health and social care, environment and way of life of children with disabilities." Causes of disability studied almost 2000 children with disabilities, who constitute about 30% of the total number of disabled children, born and living in Tashkent. In the case study was included every fourth child, selected at random - a mechanical process (300 - the main group). To establish the underlying causes and risk factors for the prevalence of childhood disability similar mechanical random selection formed a group of healthy children (300 - control group).

Analysis of causes of disability was carried out by the main classes of diseases, according to the ICD 10th revision. The results are processed by modern statistical methods, the methodology of evidence-based medicine (random sample, the method of "case-control" cohort method), contributing to the elimination of systematic and random error reduction.

Results of the study and discussion. The study found that among children with disabilities make up 31,3% of preschool children, 51,3% of school-age children. Disabled children aged 15-16 years was 17,4%. Consequently, 82,6% of children disability has been established in pre-primary, secondary and primary school age. Among boys with disabilities was higher (54,8%) than girls.

In general, Tashkent level of child disability varies from case to 98,1-105,6 10.tys. Children 0-16 - years old. In recent years the tendency to reduce child disability from 10,7 cases per 10.tys. 2004 BC to 98.1 cases per 10.tys. children in 2010. It is interesting to note that 67,6% of children with disabilities are congenital, 32,4% acquired a disability. In this age level with congenital disability is reduced, and acquired increased.

Among all the causes of childhood disability classes of diseases occupy the first place nervous system diseases, congenital anomalies second, the third disease of the musculoskeletal system, the fourth mental and behavioral disorders, fifth disease of ear and mastoid. These classes are made up of the disease 75,0-80,1% of all causes of childhood disability over the years studied.

Established that 45,4% of children treated in hospital, 38,7% of children were followed on an outpatient basis, ie treatment was reduced to the observation of experts in the clinical examination, 12,3% were treated in hospitals at home and only 3,7% for regenerative therapy using specialized health centers and rehabilitation centers.

Of children with disabilities who need to study more than half (53,9%) receive education in schools, 24,9% are trained in specialized boarding schools, 8,0% of study at home, and 13,3% never attend.

Of great importance for health, social adaptation and integration and the formation of the child is his family. Families with disabled children are classified as high social risk. This is due, above all, a large number of negatively affecting the child's socio-hygienic, medical and demographic and psychological factors.

Our results suggest that in families with disabled children is relatively high proportion of mothers all older – 19,1% versus 6,7% in the controls ($p<0,001$); of every three women at the time of birth (33.9%) had a history of gynecological and chronic extragenital pathology: 24,5% of mothers (in control 10,0%) with secondary special and higher education ($p<0,001$), not forced to work in the profession, 36,0% of mothers did not work, and are housewives and caring for a disabled child. In 34,0% of families hold unstable psychological situation. Many families have no hope for a favorable outcome. Set relatively low activity of medical families raising a disabled child: ¾ of the parents carry a doctor's prescription, nearly half of families continue to recommend rehabilitation treatment at home. Only 31,6% of parents regularly engage with a child, instilling in him the development of necessary skills. Study of awareness and health education of parents about the nature of the disease the child, how education and training revealed that most parents do not possess such knowledge. In addition, much of it ill informed about the causes, pathogenesis, and methods of secondary prevention. All the above convinces us that the majority of families with disabled children disadvantaged by a number of medical and demographic and socio-psychological indicators. Efficient operation of government services and NGOs to reduce child disability is represented as a coherent organism, the crucial issue at all stages of the health of children from prenatal period and ending the system of rehabilitation as a disabled child and his family.

Findings

1. Child disability in Tashkent have specific age-sex characteristics: one third of disability is established in the preschool years. With increasing age of child birth causes of childhood disability significantly reduced, and acquired increased: in all age groups takes place to identify children with congenital disorders.

2. The leading causes of childhood disability are diseases of the nervous system, congenital anomalies, diseases of the musculoskeletal and connective tissue disorders, diseases of ear and mastoid. These classes are 76,3% of the disease causes of childhood disability.

3. Given the low activity of the medical family, home and brought up a disabled child,

you need to improve the quality of support they health and social care by enhancing the integration of healthy lifestyle, enhancing preventative public health system.

RISK FACTORS OF HERNIATED LUMBAR INTERVERTEBRAL DISCS

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Currently, pain syndromes vertebrogenic nature widespread, and in developed countries, according to the who, has reached epidemic proportions. Back pain is the second most frequent reason for seeking medical attention and the third most common cause of hospitalization. In 20-30% of cases the cause of significant pain syndrome, herniated disks of the lumbar spine. Despite receiving patients modern methods of treatment of recurrence of hernias of intervertebral disks of the lumbar spine affect most working age adult population and lead to significant disability (Borzunov, A. A., 2008).

Reliably significant risk factors for relapse of pain syndrome in patients operated on for removal of hernia of lumbar intervertebral disks are the presence of spinal injury in anamnesis, the narrowing of the spinal canal over 16.6 mm, the identification related with the hernia protrusions of two or more discs in patients, leading a sedentary lifestyle. In the study of psycho-emotional status of patients with pain syndrome recurrence after the removal of hernia of lumbar intervertebral discs revealed a high level of personal (58.6% of cases) and reactive anxiety (52.6% of the observations), 84,9% of cases of clinical and subclinical levels of depression, which is one of the reasons chronic pain syndrome (Islands K. A., 2010).

Most of the works are among the main risk factors for acute and chronic BNC isolated individual, psychosocial and occupational (Popelyansky Y. Yu, 1997; Pavlenko S. S., 2007; Koes, B. W. et al., 2006; Lorusso A. et al., 2007). Among occupational risk factors are: the bending and twisting of the torso, weight lifting, physical stress, static working posture (prolonged sitting or standing).

In the process of oil production operating acts a complex of harmful factors, leading to which is the increased severity and intensity of work, vibration and poor environmental conditions. (Gallyamov, S. A., 2005).

For the prevention of osteochondrosis of the lumbar spine and its exacerbations, education of hernias of intervertebral disks, it is important to exclude effects on the body and implementing predisposing factors, which are acute traumatic or significant physical exercise, and for the prolapse of intervertebral disks important are physical inactivity, metabolic and endocrine disorders, microfracture with production loads, etc. (Berdnikov, I. N., 2004).

High incidence of degenerative disc disease of the lumbar spine with herniated disc, persistence of the pathological process, high degree of disability determines the need to examine the risk factors and improving preventive action.

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Findings

1. Child disability in Tashkent have specific age-sex characteristics: one third of disability is established in the preschool years. With increasing age of child birth causes of childhood disability significantly reduced, and acquired increased: in all age groups takes place to identify children with congenital disorders.

2. The leading causes of childhood disability are diseases of the nervous system, congenital anomalies, diseases of the musculoskeletal and connective tissue disor-

ders, diseases of ear and mastoid. These classes are 76,3% of the disease causes of childhood disability.

3. Given the low activity of the medical family, home and brought up a disabled child, you need to improve the quality of support they health and social care by enhancing the integration of healthy lifestyle, enhancing preventative public health system.

IODINE PROPHYLAXIS OF PREGNANT WOMEN WITH EUTHYROID DIFFUSE GOITER

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The purpose of the study. To evaluate thyroid function during pregnancy in women with euthyroid diffuse goiter on the background of iodine prophylaxis.

Materials and methods. The study was conducted in the clinic of family Almazar district of Tashkent in 66 pregnant women. The women were divided into 2 groups. I - basic - 32 pregnant women with diffuse euthyroid goiter included 2 subgroups: 1a - 17 women on the background of iodine prophylaxis by assigning "Yodomarin 200" and I used - 15 pregnant women who, for various reasons, do not take potassium iodide. The diagnosis of diffuse euthyroid goiter was put endocrinologist based on visual, palpation examination, ultrasound examination of thyroid gland, research TSH and thyroid hormones Group II - control - 34 women without thyroid pathology was also divided into 2 subgroups: On - "a" of 19 pregnant women who received "Yodomarin 200", and b - 15 women without iodine prophylaxis. All women analyzed the features of the course of pregnancy, labor, state of newborns. In terms of pregnancy 6-12 weeks 35 - 37 weeks, defined by TSH levels was performed ultrasound of the thyroid gland.

The results of the study. Comparative analysis of the course of pregnancy, childbirth, newborn state has shown that when a woman has a diffuse euthyroid goiter observed increase in the incidence of pregnancy complications, such as the threat of interruption - at 56.3%, placental insufficiency - 12.5%, anemia - at 15 , 6%, preeclampsia - at 21.9%, edema - at 34.4%. The frequency of these diseases significantly different in women and the main control groups. There were no significant differences in the characteristics of the course delivery in women of all subgroups, but there was a trend to an increase in the incidence of the weakness of labor, operative delivery in women with diffuse goiter receiving no iodine prophylaxis. Significant differences were obtained early neonatal period in infants from mothers of different subgroups. Significantly more common in newborns of women with diffuse goiter, not receiving "Yodomarin" during pregnancy encountered complications such as excessive transient loss of initial body weight; transient hypoglycemia and prolonged hyperbilirubinemia. The basis of the above pathological conditions, like a mother, fetus and newborn may lie relative hypothyroxinemia or subclinical hypothyroidism, which develop in the case of iodine deficiency, which is especially significant in the presence of goiter in women. In women, the main group with the presence of diffuse euthyroid goitre there was an increase of TSH level by the end of pregnancy. However, in the subgroup of women without iodine prophylaxis was significantly more pronounced rise in TSH. TSH level in this group of pregnant women differed significantly from the control group both subgroups. Women in the control group marked by a significant increase in TSH in the subgroup without iodine prophy-

laxis, which in turn may lead to excessive "stimulation" of the thyroid gland and goiter. The level of free thyroxine decreased during pregnancy in all women, which is connected directly with the content of thyroxine-binding globulin. According to US data was an increase in thyroid volume by the end of pregnancy in all groups of women. In healthy pregnant women, and pregnant women with goiter treated "Jodomarin", this increase did not exceed the physiological value by increasing vascularization and thyroid tissue was 14.1% and 14.5%, respectively. The maximum valid thyroid volume increase was observed in the group of women with goiter receiving no iodine prophylaxis. This figure has increased from 20.8 ml to 26.8 ml - 28.8%. Thus, the majority of women with diffuse goiter, not receiving "Yodomarin" to the end of pregnancy was determined relative hypothyroxinemia, and 20% originated subclinical hypothyroidism, which contributed to the increase in the number of obstetric and perinatal complications.

Conclusions: The rational and adequate iodine prophylaxis, especially in the presence of diffuse goiter is an indispensable and essential condition for the physiological course of pregnancy.

INFANT MORTALITY RATE IN KAZAKHSTAN IN THE CASE OF SEMEY PERINATAL CENTRE FROM 2010 TO 2015

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The relevance of research: At the present time premature birth is the second leading cause of death among children under 5 years old , and it is a leading cause of death for infants in the critical first month of life (Liu et al., 2012). In almost all high- and middle-income countries of the world, preterm birth is the leading cause of child death. (Liu et al., 2012). Furthermore, premature birth increases the risk of child deaths from other causes, especially of newborn infections (Lawn et al., 2005). It is estimated that premature birth is a risk factor is not less than 50% of all infant deaths (Lawn et al., 2010).

Therefore, premature birth is one of the most significant pathological states, according to an analysis of the global disease burden, given the high mortality rate and a significant risk of lifelong health problems (WHO, 2008).

The goal of research: to analyze infant mortality rate in the case of Semey Perinatal Centre.

Material and Methods:

Object of Research: historical data of parturient woman statistical maps in Semey Perinatal Centre.

Methods research: retrospective, analytical, statistical.

Results of the study: One of the actual problems of Perinatology is developmental care for premature infants. Over the last decades due to the introduction of intensive technologies of care for premature infants, achieved great successes in this area, but at the same time there are new questions related to the health and development of premature infants. According to the Semey Perinatal Center during the period from 2010 to 2015 (6 years) was born 16100 children, of whom 302 had died (1.9%). 83.7%

(253 deaths) of all deaths of children born with gestational age less than 37 weeks.

During the period of 2010-2015 278 children were born (1.7%) weighing up to 1000 grams, 159 of them died (57.6%); 263 infants with body weight 1000-1499 grams (1.6%), 38 of whom had died (16.1%); with body weight 1500-2499 grams weighing 1520 infants (9.4%), 50 of them died (3.1%); weighing 2500 grams and more infants born 14039, 49 of them died (0.3%).

All the dead newborns in the early neonatal period (0-6 days) - 209 children, representing 69.2% of all deaths of children, died in the late neonatal period (7-27 days) - 79 (26.1%); in the postnatal period (28 days - 1 year) - 14 (4.6%).

Conclusion and summary:

More than 80% of all dead children were born before the target date. Every second newborn baby with extremely low birth weight (weight of 500 - 999) dies in the early neonatal period. In order to improve health care delivery in preterm infants is necessary a detailed study of premature infants death structure, with the release of the main group of causes of death.

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).

WHY DO WE NEED A «NURSING BLOG»?

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Web logs, also known as blogs, are an emerging writing tool that are easy to use, are Internet-based, and can enhance health professionals' writing, communication, collaboration, reading, and information-gathering skills.

Nurses and other healthcare professionals are required to have effective communication skills. The ability to write clearly is necessary in order to communicate patients' needs, medical data, and contribute to the body of health profession research.

The purpose of this article is to present an innovative method of publishing on the Internet as a motivating learning tool for healthcare students and staffs in higher-education settings and to look at the tools and the necessary steps used for this burgeoning technology.

In addition, the blog will be only electron resource for every nurse, also it will be unique and convenient method to unite all of nurses among Republic. Apart from this it increases the intellectual capacity of nurses, to share skills and knowledge based on experience in working, will be an important stimulus to develop health care service which is equal to foreign standards. This blog is useful for all nurses should be allocated. It also acceptable for students who study at medical colleges and for nurses who has great experience in health care system. «Nursing blog» will consist of 5 parts and all information will be covered in the Uzbek language.

Care plans for all illnesses.

Advices related to nurses lifestyle.

Nursing career tips.

Nursing Mnemonics.

Latest nursing news

Every nurse from any medical university has accepted to add useful information which related to nursing process.

Blogs offer online spots where medics can reflect and express their inner thoughts and feelings. Students reticent in face-to-face learning environments may be more comfortable with blogging for expressing their creative thoughts. Since blogs can be commented on, they offer a feedback feature that provides the learner with prospective novel thoughts.

The creation and publication of blogs by students from the healthcare profession can enhance their written and oral communication skills. The opportunity to instantly publish on the Web encourages students to write and, furthermore, provides them the chance to read thoughts authored by peers, faculty members, and preceptors. Clinical educators may encourage students to reflect and post journals regarding their interactions with patients and clinical staff on a regular basis.

Technological tools that promote critical thinking, synthesis and provision of information, as well as publication on the Internet are not to be ignored.

IODINE PROPHYLAXIS OF PREGNANT WOMEN WITH EUTHYROID DIFFUSE GOITER

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In healthy pregnant women, and pregnant women with goiter treated "Jodomarin", this increase did not exceed the physiological value by increasing vascularization and thyroid tissue was 14.1% and 14.5%, respectively. The maximum valid thyroid volume increase was observed in the group of women with goiter receiving no iodine prophylaxis. This figure has increased from 20.8 ml to 26.8 ml - 28.8%. Thus, the majority of women with diffuse goiter, not receiving "Yodomarin" to the end of pregnancy was determined relative hypothyroxinemia, and 20% originated subclinical hypothyroidism, which contributed to the increase in the number of obstetric and perinatal complications.

Conclusions: The rational and adequate iodine prophylaxis, especially in the presence of diffuse goiter is an indispensable and essential condition for the physiological course of pregnancy.

KEY ETHICAL ISSUES IN GLOBAL HEALTH

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The purpose and objectives: to discover the essence of concepts: global health, global health ethics, and global healthcare ethics. Identify the problem of equity in health care.

Global health ethics is a relatively new term used to conceptualize the process of applying moral value to health issues that are usually characterized by a global level effect or require action coordinated at a global level. When we discuss 'global health' we refer to a phenomenon that is occurring 'where determinants of health or health outcomes circumvent, undermine or are oblivious to the territorial boundaries of the state and this is beyond the capacity of individual countries alone to address through domestic institutions'. Whilst this definition provides a relatively concise account of what phenomena constitute a global health challenge, it does not, however, help us to understand why we should care enough to do something about it. To answer this, one must first explore the scope of global health phenomena to identify potential ethical issues. Once achieved, one can then develop salient moral arguments for or against potential action (including inaction). We consider this process in its entirety to be 'global health ethics'.

Global health ethics is still a relatively new subject, and health-related issues have not always been framed within its paradigm. This is partly due to its infancy but also due to the plurality of debate that inevitably occurs within such a broadly relevant field. The endeavor to develop a robust ethical framework to apply to issues of global health has been a long and complex process.

While access to good health may be thought to be a vitally important ethical principle, it remains unavailable to most people. Health in low-resource countries is often compromised by social determinants, such as poverty, malnutrition, poor education, unhealthy living conditions, and lack of access to health care, as well as by corruption in the public and private sectors. The global health care status quo reflects a collective failure of the international community to meet the most basic needs of most of the world's population. This problem also exists in Uzbekistan.

An urgent challenge in global health ethics is to specify the actions that wealthier countries should take, as a matter of global justice and solidarity, to promote global

health equity. The problem of limited access to health care in resource-poor countries has been exacerbated by a "brain drain".

Health professionals trained in resource-poor countries are commonly recruited to work in wealthier countries, resulting in a severe shortage of health care workers in the former. This raises questions about the ethical acceptability of such recruitment and the incentives that might be used to discourage emigration. This is another case of a moral conflict – between the freedom to relocate and associate freely and the need to improve the health of some of the most vulnerable people.

Another set of ethical issues in global health is related to cultural relativity. It is sometimes asked whether ethical standards are universal, given that different people in different countries may hold different values or place different weights on common values. For example, some practices that are widely condemned by the international community, such as female genital mutilation, may still be carried out by certain social groups in accordance with specific religious or cultural beliefs. While some people may argue that condemning such practices as human rights violations constitutes a form of ethical imperialism, others strongly argue that we must stand up for the women and children who are at risk of being harmed.

A third challenge in global health ethics concerns international research, especially where investigators from wealthy countries conduct research in impoverished settings where participants are especially vulnerable or where language and cultural barriers make informed consent difficult. One of the most hotly debated issues regarding international research ethics during the past two decades has been about standards of care: what level of care should be provided to participants in the control arm of a clinical trial in settings where the usual standard of care is especially low? And what level of care or other benefits should be provided to participants or participating communities at the conclusion of a trial?

Conclusion: We think there still might be is a solution to the problem. Firstly, it is necessary to create conditions that are advantageous for the life of healthcare workers at the state level. To do this the governments need to raise wages, provide conditions for professional growth and career expansion, access to modern equipment, information and communication recourses, long-term and stable employment. Secondly, during the student years at medical schools, it is necessary to bring up patriotic feeling to motherland in future doctors.

IMPROVEMENT OF HUMAN RESOURCES IN THE HEALTH OF UZBEKISTAN

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Currently, one of the most important areas of health care reform - is the formation of a new management system. In recent years, in the lexicon of professional activity and the term 'management' - sustainable management of modern production to achieve its high efficiency and optimum use of resources. In other words, management - is an activity for the effective use of material and technical, financial, human and other resources to the task.

"Management" should be used as a complex control technology of modern health care organizations (regardless of ownership) and personnel working in them, and

the term “management” - in relation to health systems at the national, regional and municipal levels.

Management - a function organized systems of different nature (biological, social, informational and other) to ensure the preservation of their particular structure, maintenance of the activities, the realization of their objectives and programs. Management is a multifaceted and systematic human activity that determines the presence in it of many of its functions.

The control system is required to present two units: the control and manageable. Those upravlyaet- management subjects, and what run - control objects.

Thus, the subject of management - a control unit in the control system, performing meaningful impact on facility management and facility management - controlled unit control system, sensing the control action on the part of the subject of management.

The object of the control in health care may be the health care system in Uzbekistan, the subjects of the Republic of Uzbekistan, municipalities, healthcare organizations and their structural units, medical personnel and others. The health management system subject of management at the same time can also be a manager, and managed by link, for example, controls the health of the subject the Republic of Uzbekistan in relation to the health authorities of the municipality or individual health organizations is the subject of management, at the same time in relation to the Ministry of Health of the Republic of Uzbekistan serves as a control object.

Basic knowledge of management is necessary, especially for nurses managers in the health system.

With the identity of the head is largely related management style as an individual method of management activities. The management style is largely shaped by the existing relations between the manager and the staff in the process of adoption and implementation of administrative decisions.

The most common management styles:

Authoritarian - a style of leadership absolutes power in the same hands. It involves a complete denial of collective decision-making. The authoritarian leadership style in their daily activities should not be confused with the administrative and authoritarian style, effectively used in extreme situations. For the authoritarian management style characterized by exaggeration of the role of command forms of leadership, centralization of power, the sole decision-making. The leaders of this style focuses primarily on the discipline and tight control over the activities of his subordinates, which is based mainly on the strength of power (coercive power). The initiative is not approved by subordinates, not stimulated, and even, in some cases, is suppressed. The exclusive right to new ideas, evaluation of the results has only the head. The head of an authoritarian style often blunt, straightforward, ambitious, suspicious, sensitive to criticism. Sometimes under this mask hides his incompetence and professional incompetence.

The liberal management style is called anarchist, connivance. The head of this style as it is away from his team. It is characterized by a minimum interference with the work of subordinates and staff in general, the low level of demands as employees and to yourself. He prefers neutral methods of influence on subordinates, whose initiative though not overwhelming, but do not actively encouraged. In this situation, the authorities tend to use opinion leaders.

Democratic style - it is characterized by the decentralization of management, par-

ticipatory decision-making; the initiative is supported by subordinate and actively encouraged. In relations manager with subordinates marked tact, endurance, kindness.

The dynamic style of modern conditions optimal for leaders recognize, in fact, an entirely new style of management. This style of leadership is characterized by having a clear position on any issue, the creative approach to problem solving, willingness to take reasonable risks, efficiency and entrepreneurial spirit, intolerance of shortcomings, sensitive and attentive to the people, the lack of subjectivism and formalism, based on the collective

Management methods - methods and techniques is the impact of the head of the organization department of health or on the team for a more efficient use of available resources in order to address, its tasks.

Organizational and administrative management practices allow, primarily compensating for shortcomings in the planning, to respond quickly to the changing situation and making adjustments to output the control object to the new parameters by the directives, orders, directives, orders, resolutions, regulations, etc. These techniques can effectively ensure the interaction between the individual structural elements of the system or the organization of health care.

Currently, the management of health care becoming increasingly common economic and mathematical methods of management, which include an economic analysis of the organization of health, planning and forecasting methods, statistical analysis. Of particular importance are the methods of economic incentives that allow the material of interest to health professionals, to create incentives for the provision of highly skilled, high-quality medical care.

Social and psychological methods of management can be seen as a set of tools of influence on the team, on the processes taking place in the team as a whole and on individual employees in particular. This ability to motivate employees to work effectively, partnerships, creating a favorable psychological climate in the team. That is why the task of the head of the management body, healthcare, individual units forming part of the psychologically compatible, professionally mature and cost-effective working teams.

RISK FACTORS IN THE DEVELOPMENT OF MALE INFERTILITY

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The structure of male infertility, according to WHO, is represented by numerous factors (about 30 at present). Among them should be allocated varicocele, which occurs in approximately 12-39% of patients who applied on the impaired fertility (T.S.Selivanov, 2008). Emotional stress and athletic training lead to functional changes in spermatogenesis and secretory activity of the accessory sex glands (S.V.Arshevsky, 2001). One of the factors that negatively affect semen parameters possible is obesity. In men with idiopathic infertility and obesity was significantly lower concentration and the number of mobile forms of sperm than those with a normal BMI. BMI has an inverse correlation with total testosterone, LH, FSH, and positive correlation with serum concentrations of estradiol (O.Kh.Tazhetdinov, 2012). It is proved that chronic intoxication, such as smoking and alcohol consumption leads to infertility. Even if the parents had bad habits like alcoholism or smoking before pregnancy or during pregnancy, it increases the risk of getting their children an-

drological diseases, which in turn can lead to the next generation of infertility (V.E. Mirsky, 2006) . High and low temperature, ionizing radiation and the effect of toxic chemicals killing acts on the male reproductive cells. A sedentary lifestyle, the failure of active exercise negatively expressed in the male reproductive system.

According I.A.Vaisov (2006) the cause of male infertility in 79.6% of cases are inflammatory diseases of the genital organs, caused in most of chlamydia, ureaplasma and their associations with other microorganisms.In the human population besides bacterial infections it is also common viral infections such as herpes simplex virus (HSV) and cytomegalovirus (CMV), which can be sexually transmitted and cause infertility in men. The negative impact on spermatogenesis herpes virus appears to suppress differentiation of germ cells, blocking meiosis and death spermatogenic cells (Y.A.Tyulenev, 2012).

Male infertility is not currently represents the demographic danger, as many families have two or more children. Despite the relatively high birth rate in Uzbekistan frequency of infertile marriages are not different from the index of the world. Infertility is a disaster for the Uzbek people, resulting with divorce of many families; it leads to social exclusion and economic damage of the patient. Due male infertility caused by more than 60% of infertile marriages and the relative level of male infertility exceeds the global average. Recently there were different methods of treatment to help eliminate the cause of infertility. Complex application in IVF, Intra Cytoplasmic Sperm Injection, anti-TORCH therapy and laser therapy improves the results of overcoming marital infertility by 6% (H.D.Asadov, 2008). Unfortunately, not all patients have access to the expensive medical procedures and drugs.

We need to examine the risk factors leading to male infertility and improve primary preventive measures considering the mentality and living conditions to improve the quality of life in our Republic.

OBESITY AS A RISK FACTOR MALE INFERTILITY

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According to WHO infertility suffers 10-15% of the families and with the proportion of male infertility is about 50%. In Uzbekistan, according H.D.Asadov proportion of male infertility is 60%.

The purpose of the study. To examine the relationship of abdominal obesity with male infertility.

Materials and methods. A total of 70 males were included in the total sample. The average age was 32.6 years (range 24 to 45 years), the average length of infertility - 4.05 years (range 1 to 18). The survey included men identify complaints, questionnaires to identify risk factors for infertility, medical history, physical examination. Measured height (m), body weight (kg), waist circumference (WC) (cm) and hip circumference (ON) (cm); body mass index (BMI) was calculated according to the formula: Ratio of weight (kg) by height squared (m2); at the value of BMI from 18.5 to 24.9 kg / m 2 refers to a group of men with normal body weight; from 25 to 29.9 kg / m 2 - overweight; 30 kg / m2 or more - to the group of obesity.

The results of the study. The highest frequency (40%) have the social risk factors such as emotional stress, alcohol, smoking. With a frequency of 15% found in

the emerging childhood varicocele and harmful production factors of labor - working with chemicals overheating or overcooling. Other risk factors, including cryptorchidism, occur with a frequency of less than 10%.

The proportion of men with normal body weight in the total sample (n = 70) was 32%; overweight -37.4% and obese - 30.6%. The prevalence of overweight and obesity among the male population over the age of 18 years, 38% and 11% (WHO, 2015). It is noteworthy that among the surveyed us infertile men the proportion of people with obesity above these values, which corresponds to the information on the association of male infertility with obesity.

Analysis of medical and social risk factors in infertile male groups showed that the incidence of congenital and acquired diseases, such as cryptorchidism, varicocele, scrotal trauma, epididymitis, orchitis or mumps, as well as sexually transmitted infections, do not differ between the three groups for men and match the frequency of occurrence these risk factors in the overall sample. In the analysis of the incidence of the production risk factors, such as contact with the vibration, ionizing radiation, chemical factors, overheating or overcooling, attention is drawn to increase the frequency of regular contact with harmful chemicals in infertile male group 3 compared with men in Group 1 (23 , 45% and 4.56%, respectively); on other indicators of significant differences between the groups was the frequency of their occurrence are as defined for the general patient population. A detailed analysis of the nature of the work of three groups of male attention is drawn to the dominating share of mental labor (56%) of the physical (44%).

Conclusions: The results and the available information from the scientific literature made it possible to define a category of men who have the highest risk of infertility. This is a man aged 30-40 years, having constitutional prerequisite to the top type of fat distribution and development of abdominal obesity, a high incidence of chronic prostatitis, engaged in intellectual work and experiencing frequent emotional stress, for the relief which he regularly uses alcohol.

EPIDEMIOLOGY OF WATER CAUSED DISEASES

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Water related diseases, pose a serious threat to the health of people around the world, especially in developing countries. During the last decade, Uzbekistan has made significant investments in the modernization of water supply and sanitation services. Despite this, the citizen of the country is still faced with problems of access to clean water and reliable water supply. Because of this, in the country are still high rates of certain diseases betrayed by water. Pollution arise mainly in areas where departmental water systems draw water from surface waters (rivers, canals, lakes, ponds, etc.), which may be contaminated with excretions from infected humans or animals.

The purpose of the study. Assess the possibility of adverse effects of water factor in the health of urban and rural population of the Republic of Uzbekistan in terms of infectious disease in order to optimize the system of preventive measures.

Materials and methods. Researched materials were statistics of the Republican Center of State Sanitary and Epidemiological Surveillance (CSES) of Uzbekistan on the incidence of water caused diseases in 2000-2016 years. In this paper we used

epidemiological and statistical research methods.

The results of the study. Established that the incidence of some water related diseases (paratyphoid and typhoid) in Uzbekistan over the past 17 years has tended to decline (Paratyphoid - from 27 in 2000 to 2 in 2015; Typhoid -170 in 2000 to 14 in 2015), although the observed oscillation data (Paratyphoid -22 in 2005 and 2009 for 9 cases; Typhoid- from 18 in 2000 to 0 in 2015). Despite the fact that both diseases, hepatitis A and dysentery tend to decrease yet have high figures (Hepatitis A – 49,330 in 2000 to 25,359 in 2015; Dysentery – 2,695 in 2010 to 2,050 in 2015) . Identified ways transmission – food (water), contact-household (by water 37% in 2015). The largest number of detected cases of water related diseases observed in some cities (Tashkent, Fergana) as well as in rural places (Jizakh). (Hepatitis A –in cities - 44,2% and in rural places - 55,8%; Dysentery – in cities - 46,8% in rural places -53,2%). This may be due to better diagnosis of cases of medical institutions of the city and potentially it is connected because of the restrictions on access of the rural population with quality drinking water.

Conclusions: Although there is a tendency to reduce both absolute and intense incidence of some water caused infectious diseases, in rural areas are higher than city regions of the country, it is probably due to restricting access of the rural population in some regions of the country to high-quality clean water, adequate water disinfection. Identifying the causes of the high incidence of water caused infectious diseases requires improved epidemiological surveillance and adequate preventive measures to them.

OVERVIEW OF CONTINUING PROFESSIONAL EDUCATION FOR NURSES

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Transition of the health system to the new principles of medical care, the introduction and development of the principle of family health care, improving primary health care to the population requires new approaches to the training of medical personnel, including nurses.

In Tashkent in 1995 was held the first meeting of head nurses with the participation of representatives of the WHO, which addressed the priority issues on the development of regulatory and legislative framework of nursing, review of professional structures of mid-level personnel with clarification of roles and responsibilities at each level, the reform of education, the creation of the Standard of nursing services. To perform the tasks for the preparation of nursing care provided in the Republic of phased transfer of existing medical schools to medical colleges - schools and a new type of academic lyceums, special departments were opened in medical schools. In September 1999 in Bishkek with the support of the American International Health Alliance delegation of nurses and nursing managers of Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan, there was an opportunity to exchange information on the problems and achievements in this field. Common opinion of the participants was that the Central Asian countries launch the reform of nursing and nursing education. As a result of the conference, Coordinating Council for Nursing was supposed to be established; and the "Bishkek Declaration" was supposed to be adopted.

The first organizational meeting was held on February 3-4, 2000 in Almaty at the

National College of Medicine, in the course of which was adopted the Regulations on the Coordinating Council with definition of its objectives, tasks and functions. The demand of modern society for quality nursing care leads to the need for training of nurses to gain knowledge on pedagogy and psychology for nursing work in the area of human health protection. Pedagogical and psychological knowledge give an idea of the methods of carrying out preventive work with the population. Based on the Decree of the President in the 1999-2000, schools for the first time carried out a set of Higher Education nursing sessions (CSE faculty) to this date. Preparing nurses with higher medical education (within the specialty "Nursing", qualification manager) have been conducted since 1999. During this period, the structure and content of educational programs in the health system were formed and worked out; so have been identified positions that graduates can take up higher nursing education departments. The reform of nursing education has led to the creation of a multi-level system of training of nurses: in the basic training, the increased level of medical colleges and nursing for higher education in higher medical schools. Graduate nursing education is one of the stages of a multi-level training of nursing personnel. Currently, in the Republic of Uzbekistan is established and are successfully functioning educational institutions and educational process providing continuous nursing education from the basic nursing education up to master's degree, followed by further training. The two universities are engaged in the preparation of masters on specialty "Organization and Management in Nursing". Postgraduate education system is going through a period of active development. The main objective of postgraduate education is training of specialists with advanced scientific knowledge, broad vision, organizational skills, ability to solve both standard and non-standard tasks in a constantly changing environment. Measures to improve the professionalism, quality of care, on the implementation in nursing of new organizational forms, training of nursing staff contributes to the formation of experts with a new style of thinking, motivation for active professional work and self-improvement.

FEATURES OF HORMONE THERAPY FOR METASTATIC PROSTATE CANCER.

Tillyashayhov M.N[1]., Yusupov SH.H[2]., Temirov O.O[3]., Yuldashev R.R[4].

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Goal: Studying the results of hormone therapy for metastatic prostate cancer(PCa).

Material: During the period 2000-2014, the hormone was conducted of 355 patients with prostate cancer stage T3-T4. All patients had PSA levels above 20 ng / ml, Gleason sum on a scale from 7-9, G-3-4. In regimens the patients were divided into 3 groups. Group 1. Monotherapy. Cyproterone Acetate 300 mg / m, weekly or Goserelin 3.6 mg, or 7.5 mg Leuprorelin Triptorelinatsetat 3,75 mg every 28 days. MAB (Group 2: The maximum androgen blockade). Goserelin 3.6 mg, or 7.5 mg Leuprorelin acetate 3.75 mg triptorelin every 28 days Cyproterone acetate 300 mg / m 2 every 1 week. Group 3: bilateral orchiectomy combined with cyproterone acetate 300 mg / m 1 every 2 weeks. Zoledronic acid 4 mg / 1 in every 28 days or clodronic acid of 400 mg / day per os.

Results. The results of the study showed the following: 1-c: clinical improvement (CG) occurred in 3-4 months, the reduction in PSA level after the start of hormone

therapy (HT) was noted after 1-2 months, and remission (BRP) lasted 1.5 up to 3 years.2-c .: clinic improvement and reduced PSA to normal occurs within 1 month after the start of HT, and BRP lasted from 1.5 to 5 years.3 x-c: CI decline in PSA occurred at 3 months after initiation of HT, and remission lasted from 2 to 4 years. . The use of bisphosphonates significantly reduced the degree of pain, the number of pathological fractures and lengthen the duration of remission.

Conclusion: The best results in the treatment of metastatic breast cancer patients were groups 2 and HT used in combination with bisphosphonates in patients with metastases in the skeleton bones showed significant advantage compared to other treatment regimens: faster CI, lengthening the period of remission from 3 to 5 years. We consider holding such treatment most appropriate for the entire time before the emergence of hormone or until disease progression.

HORMONE THERAPY FEATURES OF THE METASTATIC PROSTATE CANCER

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HEALTHY WAY OF LIFE AND HYGIENIC CULTURE

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At the concept analysis a healthy way of life finding out the general sides, "hygiene" inherent by the term and "culture", hygienic the culture is given different characteristics: «When we speak about culture of sanitary and hygiene is told it is necessary to understand thoughts of the person, its outlook, the knowledge influencing formation its inner world and on its hygienic condition» [1]. Considering resulted earlier teoretiko-methodological bases of studying of hygienic culture, we consider necessary to give it the interpretation. So, hygienic culture - being an integral part of the general culture, process directed on creation of the material and spiritual riches necessary for creation functionally convenient and healthy among for residing of the person naturally.

There are the objective and subjective factors forming hygienic culture. Mechanisms making responsible and supervising on a lawful and political basis are considered as objective factors. We consider that it is necessary to carry the following to them: 1. Public authorities. 2. Political parties. 3. Economic manufacturers. 4. Mass-media. 5. Not state uncommercial organizations.

Analyzing the thoughts expressed in given article and proceeding from an urgency of studying of historical genesis of hygienic culture and occurrence of additional relations it is possible to draw following conclusions: First, studying of values of concepts «the hygienic culture» and «a healthy way of life» has important scientific and practical value and expands possibilities of preservation of health and conditions of the future development; secondly, creatively to develop historical and modern bases of formation of hygienic culture, to provide health of the person, to serve the prevention of various illnesses and all it it is visually visible in the course of transition from "wildness" of a way of life in "a cultural" way of life; thirdly, during various historical epoch the mankind formed national hygienic culture peculiar to it. And it has got mental qualities in struggle for a survival in concrete conditions; fourthly, religious representations in hygienic culture leans against science development; Fifthly, it is possible to consider that development of hygienic culture grows out of scientific achievements and interrelations of civilizations. Historical development of hygienic culture has led to science formation «Social hygiene», directed on searches of the decision of the problems connected by daily household changes, and also developments a science and technicians; sixthly, though the mankind in a modern society masters hygienic culture, development of a science and the technicians connected with global problems, changes its paradigms and puts new problems before a science; seventhly, in the decision of problems facing mankind and connected with hygienic culture the important place occupies use of modern achievements of science and technology in overcoming of socially-hygienic problems.

CARDIAC FUNCTION IN ADULTS FOLLOWING MINIMALLY INVASIVE REPAIR OF PECTUS EXCAVATUM

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Pectus excavatum (PE) is the most common congenital deformity of the anterior wall of the chest, and occurs in 1 of 400 male live births with a male-predominance of four to six times. During the adolescent growth spurt, most of the chest depression increases in severity and many patients undergo surgery in their early teenage years.

Objectives: To study if minimally invasive repair of pectus excavatum (PE) in adult patients would improve cardiopulmonary function at rest and during exercise as we have found previously in young and adolescent patients with PE.

Methods: Nineteen adult patients (>21 year of age) were studied at rest and during bicycle exercise before surgery and 1 year postoperatively. Lung spirometry was performed at rest. Cardiac output, heart rate and aerobic exercise capacity were measured using a photoacoustic gas-rebreathing technique during rest and exercise. Data are shown as mean ± standard deviation.

Results: Fifteen patients completed the 1-year follow-up. No significant differences were found in neither cardiac output (14.0±0.9 l min at baseline vs 14.8±1.1 l min after surgery; P= 0.2029), nor maximum oxygen uptake (30.4±1.9 and 33.3±1.6 ml/kg/min; P= 0.0940 postoperatively). The lung spirometry was also unchanged, with no difference in forced expiratory capacity during the first second.

Conclusions: Correction of PE in adult patients does not improve the cardiopulmonary function 1 year after surgery as seen in children and adolescents.

THYROID HORMONES CHANGES IN CHILDREN WITH CHRONIC GLOMERULONEPHRITIS NEPHROTIC FORM

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Aim and tasks. Glomerulonephritis is a one of the most common kidney children's diseases , which leads to the development of chronic renal failure and early disability of children and adolescents. Number of patients with chronic glomerulonephritis increased during the recent years. Important value in the pathogenesis of chronic process is attached to violations of the endocrine system, in particular, changes of thyroid hormone levels. The aim is to study the condition of the thyroid hormone thyroxin general (free T4) and thyroid stimulating hormone (TSH) in the blood serum of children with nephrotic form of chronic glomerulonephritis

Material and Methods. Observing of 18 children with nephrotic form of chronic glomerulonephritis treated at the children's department of Nephrology Clinic I of the Tashkent Medical Academy. Age of children from 7-16 years. Boys 12 years old, girls 6 years old. The disease is 5-6 years. The frequency of acute 1-2 day a year at 13 patients, more frequently (2-4 day) at 6 children. Swelling observed- generalized in 10 children, local-in 8 children. Blood pressure increased at 2 children, 16 children

have normal indicators. Proteinuria 3.0 g/day- 7children at 1.5 g/day- at 6, more than 3.0 g/day –at 5 children. The level of urea and creatinine in the normal range at 12, increased at 6 children. Total protein in the blood expressed-gipoproteinaemiya 10, moderate- at 4. 4 children has Dysproteinaemia , 8 children has giperholesterinaemiya. Daily urine output of all children in the acute period was reduced glomerular filtering Speed Schwarz (GFR) reduced - in 16 children in the acute period. Pathogenic therapy in the form of a two-component system (hormones, antiplatelet agents) performed in 3 patients, three component (hormones, antiplatelet, anticoagulants) 5 patients, four component (three component system and cytostatic) -10 patients. Hormone-resistant forms of the disease were reported in 4 patients. 4 patients had Hormone-dependent . Complications of nephrotic crisis were observed in 2 patients, as a result of the treatment in all patients achieved clinical remission.

Along with conventional clinical laboratory, tests for all the children were determined thyroid hormones TSH, T4 free by ELISA reagent «HUMAN», Germany.

Results. all patients with nephrotic form of chronic glomerulonephritis in acute T4 levels were decreased in 2 times, TSH decreased in 1.5 times comparing with the norm (T4 = 0,8-2,2 ng/ml TSH = 0.3-4, 0mlU/1) During the remission the index of normalization wasn't observed.

Conclusion: Children with nephrotic form of chronic glomerulonephritis during the period of exacerbation and remission had thyroid disfunction. The duration of the pathological process of the expression of functional disorders of the thyroid gland as evidenced by reduced T4 and TSH as the period of exacerbation and remission.

VIOLATION OF PSYCHOSOMATIC STATUS IN CHILDREN WITH ASTHMA

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Bronchial asthma is an urgent medical and socio-economic problem. Bronchial asthma is a classic example of a multifactorial disease of conditionality, which interact with numerous somatic and mental factors.

Of particular concern is asthma in pediatric patients because it is the most common chronic disease among children, affecting up to 30% of the child population. The significance of the role of GABA-receptor complex in the pathogenesis of anxiety disorders has long been known. Study participation S-100 brain-specific proteins in causing anxiety disorders. S-100 protein involved in implementing basic functions of the neural systems such as the generation and conduction of nerve impulses, the flow of synaptic processes (plastic remodeling), regulation of energy metabolism CNS cells, proliferation and differentiation of neurons and glial cells, so the new direction of regulatory effects on the target - anxiety syndrome - is the use of antibodies in ultralow doses. . Containing ultralow doses affinity-purified antibodies to brain-specific proteins S-100 in a mixture of homeopathic dilutions C12, C30 and C200, was used to treat a wide range of anxiety disorders and neurotic disorders.

Materials and Methods: The study examined 24 children 7-12 years with a diagnosis of asthma, mild to moderate in the TMA in alleprgologii department, together with the neurologist of the hospital. The children were divided into two equal-size groups, depending on the method of therapy: basic, basic 1st and 2nd control

The study group included children receiving basic therapy combined with physical methods and course taking this medication tenoten children 1 tablet 3 times per day sublingually, regardless of the meal. Within 3 months, children receive two courses tenotenom therapy with an interval 3 months, receive a course for one child amounted to 270 tablets. Children in the 1st main group received basic therapy in combination with physical methods . Children 2 nd control group received only the basic therapy of bronchial asthma. The duration of observation in all the groups was 7 months studied parameters were evaluated at baseline and after 3, 6 and 7 months after the beginning of treatment.

Results and Discussion: Inclusion criteria: age 7-12 years; Asthma mild to moderate severity; Exclusion criteria were age under 7 and over 12 years; Intermittent asthma and severe degrees of severity; accompanying illnesses; The dynamics of all surveyed conducted clinical examination with asthma control assessment, autonomic regulation, psychological characteristics and quality assessment of children's lives. The individual map indicated patient clinical asthma symptoms, their dynamics, as well as criteria for tolerability.

In this way:

1.Changes of behavior, especially in children requiring hospital treatment are important characteristics in children with asthma.

2. Inclusion in the basic therapy and physiotherapy tenoten activities normalized psycho-emotional status, which is characterized by: balanced child's behavior and decreasing attacks with asthma, compared with the control group.

3. The normalization of life in the family, at school, with the exception of stress, excessive stress has a positive effect on the treatment of bronchial asthma.

4. In some cases, where there is a more pronounced violation of psychosomatic medicine, it is necessary to combine the basic therapy with a psychoanalyst.

THE IMMUNOTHERAPY OF MYOCARDITIS OF CHILDREN

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Objective. The aim was to study the effectiveness of medication "TSIKLOFERON" for children with myocarditis.

Methods. 20 children diseased with myocarditis were under our control (I group), with a decreased level of alpha- and gamma- interferons in blood. I group had a traditional therapy + Cycloferon. II group had only a traditional therapy. Comparison groups were correlated in accordance with age, sex and clinical course. Cycloferon 12,5% was put on all patients with dose size 6 mg for per kg of body mass, intramusculare, once a day. In acuity form the medicament was prescribed on 1,2,3,4,6,8 days of curing, then in 48 hours on 11,12,14,16,18 days of curing. In a chronic process the medicament was prescribed on 1,2,4,6,8 days of curing and, then in 48 hours on 11,12,14,16,18 and in 72 hours №5 more times of injection on 22,23,25,27,29 days of treatment.

Results. From the perspective of performed studies, children of 1 group after the full course of treatment have normalization of level of alpha- and gamma- interferons in blood, early subjective improvement of state of health, abatement in precordialgia (снижение боли в области сердца), reduction of general weakness, character dissolution of disturbed circulation, improvement of contractile force of heart,

earlier normalization of parameters of electrocardiography and echocardiography in comparison with the children of II group.

In none of the cases, during prescribing the medicament cycloferon, treatment-emergent adverse events occurred.

Conclusion. Summing up what has been said, administrating the medicament cycloferon in a complex therapy of myocarditis for children is an effective, harmless and advanced practice.

CHANGES OF PHYSICAL DEVELOPMENT OF SCHOOLBOYS IN DYNAMICS OF SUPERVISION

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Problem urgency. Physical development along with disease and death rate is one of the major indicators characterizing health of children in this connection, deviations in physical development give the grounds for the individual analysis and revealing of those or other deviations and changes in an organism of the child. The works devoted to studying of dynamics of physical development of schoolboys in modern conditions of an intensification of process of training are not present, as has induced to address to this problem.

The purpose of the given work. To study dynamics of physical development of schoolboys in

Modern conditions.

Material and research methods. The analysis of physical development in 270 pupils with 1 on 9 classes on the basis of school № 28 Almazar areas of Tashkent on «to the Unified technique of research and an estimation of physical development of children and teenagers» is carried out. From anthropometrical indicators were studied somatometric – length and weight of a body, a thorax circle. Estimation somatometric indicators are spent by comparison with local standards.

Results of research. Studying of physical development of children trained at schools of new type, has allowed to establish that the indicators characterizing dynamics of a condition of physical development of pupils from the first class to the termination of high school, had accurate dependence on a complex environmental school factors and the organization of educational process. Among children arriving in school, normal indicators of growth have 65,9% of children, to the fifth class there is an improvement on the given indicator and relative density of children having normal amounts of growth of a body makes 70,9%, in the seventh class it is marked considerable ретардация this indicator and slow increase is marked to the ninth class. The analysis of indicators of weight of a body shows that on the given parameter the situation develops slightly better, but at the same time, only 2/3 children at receipt in school have normal indicators of weight of a body. In the fifth and seventh classes half of children have normal indicators of weight of a body, and to the ninth class there is an improvement of this indicator to 67,2%. The analysis of dynamics of indicators of a circle of a thorax shows a similar tendency in changes: if at receipt in school of 73,8% of children had normal amounts of this indicator in the course of training at school their relative density decreases, the maximum decrease is marked in the seventh class where only 58,9% of children correspond to

norm under the given characteristic of physical development. Comparison of indicators of physical development of children with the data of 10-year-old prescription has shown their some deterioration to what reduction of number of children with normal physical development and increase at both floors of deviations of physical development at the expense of increase of the revealed persons with deficiency of weight of a body, children with excess weight and a growth inhibition testifies. It is simultaneously revealed that indicators of their physical working capacity and volume of performed work decrease.

Conclusion. Thus, studying of dynamics of physical development of schoolboys at the present stage shows that the number of children with дисгармоничностью physical development has increased, One of which reasons is the intensification of process of training, deterioration of a food of schoolboys.

DETERMINE OF THE FEATURE OF DISEASES COMPLICATING BY BRONCHIAL OBSTRUCTION SYNDROME IN CHILDREN

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Introduction. Currently, increasing allergic diseases in children is the cause flow bronchitis, pneumonia with obstructive syndrome. In early childhood this pathological condition is quite widespread, revealed that 10-30% of infants pneumonia, bronchitis and acute respiratory infections combined with broncho-obstructive syndrome, in children under 3 years, at every fourth observed bronchospasm in their lives least until once. This is due to the anatomical and physiological characteristics of the respiratory system, cause of edema and hypersecreting there is obstruction of the bronchi due to the narrowness of the respiratory tract. Periodical occurring of Broncho obstructive syndrome, later, being cause of the developing early bronchial asthma in children.

Aim. The study of the characteristics of the disease with bronchial obstruction syndrome in children and analysis of medical history.

Materials and methods: This study was carried out in the department of children's pulmonology of the 1st clinic of TMA in 2016 year at the patients age of 6 month to 14 years old which treating from disease complicating by broncho obstructive syndrome. Clinic course of the disease and case history was retrospective analyzed.

Results: The carry outing analyses determined that affecting many harmful factors during the pregnancy, birth and early neonatal periods is a causing of broncho obstructive syndrome in children. There was analyzed patients and case histories of the 42 patients in the age of 6 month to 14 years old, which occurred with the broncho obstructive syndrome. Defined that in the children that was born with severe preeclampsia during the pregnancy flowing of acute respiratory infections and pneumonia in 52.3% of cases complicating by broncho obstructive syndrome. Defined that in intranatal and early neonatal periods occurring allergic, exudative-catarrhal diathesis, effecting of the many harmful factors, acute respiratory infections and pneumonia at the 47,7% cases complicating by broncho obstructive syndrome. In disease complicating by broncho obstructive syndrome is consisting the acute obstructive bronchitis at the 18 children (42,8%), pneumonia with obstructive syndrome at the 6 children

(14,6%), acute respiratory infections with obstructive syndrome at the 5 children (11,9%), frequent obstructive bronchitis at the 4 children (9,5%). The acquired bronchial hyperreactivity constitute 6,7%, healing constitute 48,5%.

Conclusion: Frequent occurring of the obstructive syndrome is considered one of the rick factors at the passing of the condition to the bronchial asthma in the children at an early age.

The occurring pregnancy with the preeclampsia, during birth and early neonatal period influence many adverse factors, development of the diathesis, allergic rhinitis and allergic conjunctivitis is considered one of the rick factors at the passing of the condition to the bronchial asthma.

FEATURES FOR CLINICAL COURSE OF ATYPICAL PNEUMONIA IN CHILDREN

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The purpose of the study. Explore features for mycoplasma, chlamydia pneumonia’sclinical course in children of different ages.

Research objectives: clinical examination of patients with atypical pneumonia.

Results of the study: have been examined 25 patients, 12 of them with chlamydia pneumonia, 13 sick children with mycoplasma pneumonia. Age of sick children from 1 to 16 years. Mycoplasma pneumonia may have a somewhat different nature, often beginning of the disease is inherent temperature increase to a value of 38 ° C, and the antipyretics are not very effective in this condition, one characteristic symptom of atypical inflammation is rapid shallow breathing. Because of history has been revealed that the highest degree of disease with possible development in closed collectives epidemic foci characterized by mycoplasma pneumonia.

In the primary symptomatic, disease is very similar to symptoms of acute respiratoryviral diseases. An increase of body temperaturenoticed in the patient, in older children appeared aching pain in muscles and joints, runny nose, and they complained of weakness and chills. A feature of the disease is a shortness of breath and chest pain. On the X-ray in patients revealed inhomogeneous low-intensity areas of infiltration of lung tissue in the form of diffuse spots and shadows, as well as increased bronchial and vascular pattern. Complete recovery noted in 7-12 days.

The causative agents of chlamydial pneumonia of this kind are intracellular parasites - chlamydia. Infection occurs through airborne droplet infection and affects immune compromised people: children, adolescents. At the initial stage such atypical pneumonia symptoms are rather sluggishly, making it difficult to correct diagnosis. As and in acute respiratory viruses desiases (ARVD), the patient complained of malaise, sore throat and shortness of breath due to the common cold, and mucosal edema. In addition, up to 39°C can raise the temperature, and join dyspnea and nonproductive cough irritable after a couple of days. In 4 pathients chlamydial pneumonia complicated by obstructive bronchitis. In 2 patients the disease was detected (due to blurry symptoms) most often in the later stages, when the intracellular parasites had time to settle in both lungs.

Summary and conclusions. Atypical pneumonia (chlamydia, mycoplasma) in childhood is more severe, with delayed diagnosis and treatment may be complicated by respiratory failure.

CLINICS AND SYSTEMIC IMMUNITY IN SEVERE BACTERIAL INFECTIONSIN CHILDREN UNDER THE AGE OF ONE YEAR

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There are three variations of the system reactions: systemic inflammatoryresponse, systemic compensatory anti-inflammatory response and mixed antagonistic response. Differential diagnosis between these types of systemic reactions is in relation to the need to determine the orientation of the therapy - to strengthen the effectiveness of anti-inflammatory therapy, or, conversely, to stimulate pro-inflammatory response.

Objective: To determine the clinic and the state of the T cell and phagocytic links of immunity in severe forms of bacterial infections, accompanied by systemic inflammatory response syndrome in children up to one year.

Purpose. To investigate the severity of systemic inflammatory response syndrome (SIRS) in patients with bacterial infections, hospitalized in the intensive care unit, describe the clinical and laboratory features of SIRS, reflecting the severity of a bacterial infection, and investigate the state of systemic immunity in patients with severe bacterial infections, depending on the degree of severity of toxicosis.

Materials and Methods. In the intensive care unit TMA receives, as a rule, children with severe acute onset infectious disease with all the signs of systemic inflammatory response syndrome. The role of the immune system in this syndrome has been studied mainly in sepsis.

Results. In the initial period of high antigenic load in severe bacterial infections is increased phagocytic activity of neutrophils, monocytes phagocytic activity remains at healthy children. The functional activity of neutrophils, and spontaneous according stimulirovannogonitrosiny tetrazolium (NBT test) is reduced compared with healthy childre The study identified violations of immune homeostasis and immunopathogenetic laws for serious infectious diseases accompanied by systemic inflammatory response syndrome in infants.

Decreased activity of phagocytosis of monocytes and cytokine synthesis cytoplasmic CD3 + lymphocytes leads to reduced production of specific immunity. Clinical and laboratory features, predisposing to a longer course of bacterial infection in children from 1 month to 1 year.

Thus, children up to 6 months are at risk of developing complications and lingering forms of infection processes.

FEATURES OF THE IMMUNE STATUS OF CHILDREN WITH MYOCARDITIS

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Aim and tasks. Myocarditis is disease of the myocardium inflammatory genesis, arising under the influence of a variety of infectious agents, characterized by inflammatory infiltration of myocardial fibrosis, myocyte necrosis or degeneration. The inflammatory process may involve cardiomyocytes, interstitial tissue, blood vessels, cardiac conduction system and pericard. Myocarditis often occur against the back-

drop of the initially altered immune reactivity of the organism or virus while the immune system is damaged to the development of secondary immunodeficiency. Excessive production of TNF alpha causes hemodynamic disorder (reduces myocardial contractility, cardiac output of blood, diffusely increased capillary permeability), and cytotoxic effect on the cells of the body. We have studied TNF alpha levels in young children with viral myocarditis.

Material and methods. Research conducted in the department cardiorheumatology first clinic of the Tashkent Medical Academy. The study included 20 children with acute myocarditis in age from 1 year to 7 years. Diagnosis is confirmed by clinical and instrumental data. The first manifestations of myocarditis can be fatigue, excessive sweating, low-grade fever, cardialghia, palpitations and disruptions in the heart, shortness of breath with exercise, and at rest, arthralgia. Cardiomegaly diagnosed in 16 children (80%) (CThI 0,68 ± 5,1). Muffled heart sounds are found in 15 children (75%), functional noises was observed in all children, heart rhythm disorders in 2 children (10%). The control group of 20 healthy children of the same age. TNF alpha status was studied by enzyme immunoassay (EIA) for the first day of admission and 1 month. The studies were conducted using a set of test systems CJSC "Vector Best" (Russian).

Results. In all patients, TNF alpha levels were significantly higher than the control group (normal 0-8,21 pg / ml). A comparison of echocardiographic and electrocardiographic changes showed that the most a wide range of clinical disorders observed in children with high levels of TNF alpha in the blood serum.

Conclusion. Thus, elevated levels of TNF-alpha in the blood correlate with the severity of myocarditis. Defectiveness TNF alpha system in these children, possibly due to the quality of their inferiority of the immune system both innate and adaptive nature.

FEATURES OF CLINICAL CHARACTERISTICS OF PNEUMOCOCCOAL PNEUMONIA IN VACCINATED INFANTS

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Goal and tasks. Pneumococcal disease as a source of respiratory tract diseases is topical problem of health care. The most common clinical from of pneumococcal infection is community-acquired pneumonia. Experts call of pneumococcal pneumonia etiology the number one killer of children under 5 years of life.

The purpose of the research is to study the clinical course of pneumonia in children vaccinated against pneumococcal infection.

Materials and methods. It was conducted clinical observation of 15 children up to 2 years of patients with pneumococcal pneumonia and treated in children's pulmonology department of the 1st clinic TMA. The boys were 10 girls 5 children. 1 year were 3 children, up to 2 years-12 children. All children received the vaccine in accordance with vaccination calendar vaccine "Prevenar 13".

Diagnosis of pneumonia first raised 11 children, re-4 children. To control quality have been studied medical records of 15 patients of the same age who did not receive the vaccine Prevenar 13. It was found that the average length of the disease in unvaccinated children was 10+1,8 days, vaccinated 7,5+1,5 days. Acute course had

12 children, from prolonged-3. In unvaccinated children during the acute illness, diagnosed in 9, lingering in 6 children. Sings of respiratory distress were expressed for all the children in both groups, but the duration of 1-2 days in children 1 group (vaccinated). The second group of children was 3-5 days. Cough in children length of the first group of 7 days, the second group of 4-5 days duration. Chest radiograph-focal pneumonia in 10 children, segmental pneumonia-in 5 children. In the second group are mainly diagnosed polysegmental pneumonia (13 children). In the treatment of 1st group used antibiotic-1 course in 11 children, 2-course in 4 children. In the second group 1 course of antibiotic therapy in 4 children, 2 of the course is-11 children. It should be noted that in the group of unvaccinated children before admission rate for acute respiratory infections accounted for an average of 4 times a year, whereas in the group vaccinated-1-3 times a year.

Results. In children vaccinated with Prevenar13 was less frequent incidence of acute respiratory infection, a mild course of the disease with less severe sings of respiratory distress. Physical findings were normalized to 3 days earlier than in the second group. None of the first group of patients is not observed complications.

Conclusions. Thus, immunization vaccine Prevener13 contributes to a rare incidence of pneumonia in children under 2 years of age and more easily they flow.

MODERN DIAGNOSTIC AND TREATMENT METOHD IN THE CASE OF GRANULAMATOSIS WITH POLYANGIITIS IN CHILDREN

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Introduction. Granulomatosis with polyangiitis (Wegener's granulamatosis) - is a distinct clinicopathologic entity characterized by granulomatous vasculitis of the upper and lower respiratory tracts, eyeball with skin lesions. In addition, variable degrees of disseminated vasculitis involving both small arteries and veins may occur. Occurrence of the pathology in children is 1:1 000 000. Symptoms of the disease are very similar with other vasculitis. So, there are some difficulties to make diagnosis. The main role in establishing diagnosis plays biopsy of the damaged tissues and finding specific marker of the disease in bioptate.

Objective. Aim of the study is presenting rare signs of the disease and proposing adequate treating method for current pathology that can be illustrated by the case of 16 year patient with Wegener's granulamatosis.

Material and methods. The diagnosis based on the biopsy of the nasal mucous by finding antinuclear antibody against proteinase. First appearance of the disease was swelling of right side of face. Dentist, maxilla-facial surgeon, oncologist examined him and none of specific pathologies was confirmed. After this, he was cured by dermatologist because of ulcers and subcutaneous nodules. Then, he went to Israel and Germany in order to take treatment. In Germany, he was diagnosed as "Lymphedema" and Epstein-Barr virus was estimated. At the beginning of 2016th year, his temperature started increasing and necrotic ulcers appeared in his upper and lower extremities. He took treatment at the TPMI for 3 months without any effects. In April, hoarseness and labored breathing joined to symptoms of disease. He admitted to the 2nd clinics of TMA at the end of April, 2016. . There are necrotic ulcers on face, upper and lower extremities about 4-6 cm. From analysis: He-

moglobin 78g/l (↓), platelets 150*10^12/l (↓), WBC 7.2*10^12/l, common protein 57.4g/l, protein in urine 0.066%, ASLO-313, CRP-24. The treatment conducted by pulse-therapy with methylprednisolone 1000 mg three times, Cyclophosphamide 1000 mg, Pentaglobin 50mg three times, Plasmapheresis three times.

Results. After the first course of pulse therapy patient's general condition was being improved, enlarging of necrotic ulcers stopped. As a result of treatment, developing necrosis of the upper respiratory organs also ended up.

Conclusion. Granulamatosis with polyangitiis (Wegener's) is rare disease at the age of adolescence and diagnosis is confirmed by biopsy of the necrosing tissue and finding antinuclear antibody against proteinase. Effective treatment method consists of pulse therapy with methylprednisolone, taking Pentaglobin, Cyclophosphamide in high dose and conducting plasmapheresis.

THE ROLE OF DISORDERS INTESTINAL MICROBIOTA IN THE DEVELOPMENT OF SENSIBILIZATION ATOPIC DERMATITIS IN CHILDREN

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At present, the frequency of allergic diseases is increasing worldwide. A special role in the development of allergic sensibilization has microbiota violation of the gastrointestinal tract, manifesting in early children. The cause of atopic dermatitis is multifactorial origins, associated with the genetically determined defect of the immune response associated unfavorable effects of the environment. A significant factor in the development of AD is the pathology of the gastrointestinal tract associated intestinal dysbiosis, which is diagnosed in 89-94,1% of children, with atopic dermatitis.

Materials and methods: The material was conducted in allergy department of Tashkent Medical Academy Clinics №1 and ambulatory clinic. We examined 22 children, aged from 3 months to 3 years old with a diagnosis of atopic dermatitis - 10 (45%), which was included in the basic therapy with probiotics, the second group with atopic dermatitis - 12 (55%), which were not given probiotics. All children following surveys were conducted: in the definition of IgE, immunology, general analysis of feces, bacteriological examination of feces, the definition of specific allergens.

Results and discussion. From history we found out that the children of one or both parents suffer from allergies to varying degrees. Children in both groups following complaints: on moodiness, sleeplessness, loss of appetite, no tolerance of milk at an early age, children which is transferred to artificial feeding in early age, an early feeding of children, disturbance of diet. Of particular importance was noted in the manifestation of a polyvalent sensitization food and drug, household and trigger, and the presence of high titers Torch- infection. Also among the complaints, parents gave a special place in the presence of a defecation disorders, noted that as constipation or dyspepsia in children. in the development of the condition of particular importance mentioned polyvalent sensitization: food and drug, consumer and triggers, and the presence of high titers Torch- infection. Also of particular importance for the presence of the parents gave the violation of the chair, which was noted in the form of constipation or dyspepsia in children. A history of the development diathesis in early childhood, which transformed into atopic dermatitis.

Appointment of probiotics basic therapy led to normalization of intestinal flora

in 5-6 days and a decrease in cutaneous manifestations that contributed to the rapid recovery, and the group without probiotics noted more protracted course of the disease and later recovery of defecation in children.

Conclusion. In this way: The expression of intestinal dysbiosis in infants, so much the expression of atopy.

In a studying of anamnesis, that a history of one or both parents or their close relatives suffer from various types of allergic reactions.

Administration in the early perinatal period probiotics reduced the development of atopic dermatitis in half, which contributed to the production of IL10 and growth factor that regulates the immune response.

From the anamnesis revealed that atopy is more frequent in those children, which were noted lactose deficiency from an early age.

MANAGEMENT PLANNING OF INNOVATIVE METHODS IN DIAGNOSTIC OF NEPHROTUBERCULOSIS

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Implementation multispiralnoy computed tomography (MSCT) - innovative methods of radiation diagnosis of tuberculosis in practice of TB services need to optimize its use. The method is mainly used when examining adult patients for the detection of tuberculosis, including renal tuberculosis.

In terms of stabilization of the epidemic situation of tuberculosis at the highest level clearly increases the value of the implementation and management of the use of innovative methods of diagnosis of the disease with the purpose of early detection of the source of infection - a sick man. But MSCT work only in large specialized medical institutions (MPI), besides expanding and a network of private institutions using MSCT.

In such a situation requires precise coordination in the application of different methods of radiation diagnosis, to assess renal function in tuberculosis for the development of MDCT criteria for determining the tactics of treatment of patients nephrotuberculosis.

Objective. To analyze the effectiveness of the diagnosis of renal tuberculosis, by MSCT for planning its sustainable use.

Materials and methods. The analysis of efficiency of use of MSCT among 40 patients (men - 23 (57.5%), women - 17 (42.5%)) with various forms nephrotuberculosis, aged 20 to 68 years. The study was conducted at the clinic RSSPMC tuberculosis and pulmonology MoH Republic of Uzbekistan, on the apparatus Siemens SOMATOM Spirit and Siemens SOMATOM Definition AS.

Results. Diagnostic informativeness of MSCT in the diagnosis of various forms of tuberculosis of the kidneys showed them a different significance. So MSCT with contrast sensitivity in the diagnosis of limited forms of renal tuberculosis (tuberculous papillitis) amounted to - 48.7% in the diagnosis of obstructive and destructive forms nephrotuberculosis (cavernous forms, tubercular pyonephrosis, ureterohydronephrosis) amounted to - 98.2%.

Conclusions. Comparative analysis of the volume and efficiency of the survey nefrotuberkuleznyh patients by MSCT allows to predict its use as an additional survey, namely the method of the second stage, the algorithm determining the severity of tuberculosis pathology of the urinary system.

DIAGNOSTIC INFORMATIVENESS OF MULTISLICE COMPUTED TOMOGRAPHY IN RENAL TUBERCULOSIS

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Objective. Rate informative value of multislice computed tomography (MSCT) in the diagnosis of renal tuberculosis.

Materials and methods. We performed a retrospective analysis of the diagnostic informativeness of MSCT in 40 patients with renal tuberculosis who were in the clinic of the RSSPMC of Tuberculosis and Pulmonology MoH of the Republic of Uzbekistan. Among male patients was 23 (57.5%), 17 women (42.5%), with various forms of renal tuberculosis, aged 20 to 68 years. The study was conducted at the offices of Siemens SOMATOM Spirit and Siemens SOMATOM Definition AS.

Results. Diagnostic informativeness of MSCT in the diagnosis of various forms of tuberculosis of the kidneys showed them a different significance. So MSCT with contrast sensitivity in the diagnosis of limited forms of renal tuberculosis (tuberculous papillitis) amounted to - 48.7% in the diagnosis of obstructive and destructive forms nephrotuberculosis (cavernous forms, tubercular pyonephrosis, ureterohydronephrosis) amounted to - 98.2%.

Conclusions. Thus, MSCT showed low efficacy in the diagnosis of early destructive changes and MSCT is highly informative method in the diagnosis of obstructive and destructive forms of renal tuberculosis.

ANTIBIOTIC THERAPY OF COMMUNITY-ACQUIRED PNEUMONIA IN CHILDREN

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The choice of antibiotic and route of administration for at-disease in children has its own characteristics and to the present is for doctors challenge, despite the considerable arsenal of antibiotics, which has medicine. Preference should be given to preparations for oral administration and having children dosage forms. In the treatment of mild bacterial infections often used in clinical practice, antibiotics from the group of penicillins and macrolides. Among the innovative medical forms belong soluble (dispersible) Klamok dosage forms of antibiotics.

The aim of our study was to identify the clinical efficacy of the drug Klavomok in children with community-acquired form no complicational pneumonia.

Materials and methods. The study It included 40 patients aged from 1 year to 3 years, hospitalized with a diagnosis of community-acquired pneumonia in the Pulmonology Department of 1 clinic of the Tashkent Medical Academy, with whom therapeutic purposes Klamok administered 125 mg 3 times in a day.The course of treatment was 7-10 days. Among the comorbidities were recorded in 8 children the consequences of perinatal encephalopathy a hypertensive syndrome, and 4 – atopic dermatitis, 11 - dysbiosis in the stage of compensation, at 4 recorded frequent respiratory infections with recurrent bronchial obstruction, from 5 – secondary immunodeficiency caused by frequent infections and complicated obstetric history.

Results and discussion. During the study, patients not taking other antimicrobial drugs.

Effectiveness evaluation was conducted Based on the general state dynamics study sick children, the major clinical symptoms disease (dyspnea, cough, sputum production) Physical changes in the lungs and other symptoms, indicators of morphological picture of blood, dynamics of radiological data and other laboratory tests. Efficacy determined on the basis of comparative analysis the dynamics of the relief of the main clinical symptoms of the disease.

In children with acute pneumonia (With a light to medium heavy current) during treatment Klamok positive dynamics: 2-3-day improvement in general condition, reducing the temperature of the reaction, the disappearance of shortness of breath, decrease in respiratory symptoms (5-7 th day), the improvement of hematological changes, elimination of leukocytosis, neutrophilia, normalization of ESR and improvement of X-ray pictures (10-15 minutes day). All children with pneumonia in the treatment of drug Klavomok marked recovery. Established well tolerated antibiotic adverse effects were noted in children. Of particular interest to us presented no adverse effects from the gastrointestinal tract. In 11 children with dysbiosis in history after applying changes to Klamoka the gastrointestinal tract were noted.

Conclusions. The dosage form is easy to Klamok application, has good organoleptic properties, which makes its advantages pediatric use is different better tolerability.

REVELATION OF RISK FACTORS LEADING TO OBESITY OF CHILDREN AND TEENAGERS LIVING IN TASHKENT CITY

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About 22 million children from age 3 up to 18 suffer with obesity around the globe. Valuable feature of the last decade is the proportion between risk factors influencing to the health status of the children and teenagers is increasing and changing, and it will be helpful to prevent the progress of obesity when it revealed effectively.

The aim of the research: revelation of risk factors leading to obesity of children and teenagers living in Tashkent city.

Methods and materials of the research: We have researched 32 girls and 26 boys aged from 11 up to 15, with the diagnosis of exogenous constitutional obesity with 1-2 levels in three-four years, living in the Tashkent city. Initially children are examined in the polyclinics of "Research and development Center of Endocrinology" under the Ministry of Health of the republic. During the ambulatory examination, we have assessed the nutritional status and self-feeling, activity and mood of the patients.

Results of the researches: according to our data, exceeding of the weight revealed in 32 girls and 26 boys aged from 11 up to 15. During the examination, the weight of the girl's body was 61.8±6.9; and boy's body weight was 70.5±7.1. Among the children and teenagers of the school age, girls have a prevalence of obesity, and here a gender proportion reaches to 2:1. In this case, a predisposing factor is the apparent subdermal layer in girls, in the neonatal and in the periods of sexual development. About 42% of mothers of teenagers under of our observation had obesity with level two; in 18% cases, both parents had obesity with level two. About 20% showed exogenous constitutional obesity with levels 1 and 2, 20% of parents had

not shown the obesity. Examined 13 boys and 16 girls (aged 14 to 15) have shown the emotional disturbance with alimentary behavior. Among examined 12 boys and 21 girls has shown the disturbance of daily rhythm of eating, as they had the habit of nocturnal eating. It is known well, that there is "Family" types of obesity, where the coefficient of inheritance reaches up to 25%, which is the evidence of high percentage of congenital factors in developing of obesity syndrome. Among observed patients, 4% of them had the "family" type obesity, as in "constitutional exogenous obesity" type. All observed patients had some different nutrition qualities. High concentration of saturated fats, salt and sugar has been detected in daily ration, when the "Food standards" for fresh vegetables and fruits are not carried out (alimentary fiber deficiency in the ration contained 80%). Examined patients did not practice the physical exercises regularly. 55% of boys and 38% of girls were a fan of watching TV shows and movies, 23% did not practiced the physical exercises, 34% sat for hours in front of the computer. Majority mothers (78%), whose children suffered from obesity had a Secondary education. Therefore, according to the data of the research, congenital predisposition, obesity of parents, nutrition and nutritional behavior, the level of the physical development, family's financial status, educational level of the parents etc. must be included into the risk factors connected with the developing of the obesity.

Conclusion: congenital predisposition, obesity of parents, nutrition and nutritional behavior, the level of the physical development, family's financial status, educational level of the parents etc. must be included into the risk factors connected with the developing of the obesity.

SOCIAL ADAPTATION OF DEVELOPING HEALTHY GENERATION

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Social adaptation of developing personality, its inclusion in social and interpersonal relationships, in critical dependency with the community,staff and a real band, his involvement in social activities and motivational given its existing positive qualities, abilities and capabilities - is one of the the main tasks of parents, caregivers and teachers.

The aim of every parent, teacher, professor, teacher in continuing education,neighborhood committees and law enforcement agencies in a timely manner is to identify the causes that lead to an increase in the number of crime, deviant behavior among juveniles and search for ways out of the situation.

Finding solutions such paths problems such as social apathy, autism, aggression, anger, lack of skill and readiness to cooperate with adults, excessive emotionality, irritability, conflict, lack of-interest in learning and creativity - is also a major issue for us.

The purpose of research - the study of the features of suicidal behavior in adolescents.

Material and methods. Clinico-psychopathological method examined 15 adolescents.

Results of the study. Adolescents in 13.9% of cases in a family dominated by adversity in the form of alcohol abuse of parents - 9, 7 and 3% in the family scandal - 4, 17%.

Separation of the child with his mother at an early age causes severe negative emotional reaction, which can then lead to a stable personality distortions have matured child. These distortions may occur syndrome «affective stupidity.» In families, the apparent quite well, quite often there are psycho-traumatic situation for a child.

The basis of these Conflict can often be psychological problems of interpersonal relations of spouses and grandparents, both among themselves and in terms of the child's upbringing. Disharmonious relationship between adults (parents and other family members) usually manifested quarrels or permanent atmosphere of severe emotional stress, which is the result of strained relations. Children who have experienced parental misconceptions installation, also form distortion of personality that resemble the classic type of neurotic personality.

The formation of suicidal behavior greatly influenced by the lifestyle of the parents. Thus, the abuse of alcohol by parents can beconsidered as a risk factor for the formation of autodestruction. Teens regarded ratio his parents to himself as inadequate, and the lack of attention, care contributed to the fact that youths are left to themselves currently.

Thus, various types of improper education in childhood and adolescence (and neglect hypo custody , hypopatronage and hidden hypopatronage dominant hyperpatronage , indulgence hyper- or hypo patronage - «idol family «and raise the cult of illness, emotional rejection, violent relationships, increased moral responsibility, contradictory education) influence the formation of different types of personality.

FORMATION OF DEVELOPMENTAL ANOMALIES AT CHILDREN WITH CONGENITAL CYTOMEGALOVIRUS INFECTION

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Congenital cytomegalovirus infection is one of the most widespread in structure of pre-natal infections and meets at 0,4-3,5% of newborns in the world. The virus possesses high teratogenic potential, causing formation of congenital developmental anomalies. The most frequent consequences at survived are intellectual backwardness, spasms, a children's cerebral paralysis.

Research objective: the characteristic of developmental anomalies at children with congenital cytomegalovirus infection.

Materials and research methods: a work Basis the retrospective analysis of results of supervision of 108 children of early age with clinical manifestation forms congenital CMV has made the infections, diagnosed in branch of a pathology of newborns of 1-clinic TMA from 2010 for 2015 For diagnostics CMV infection was used the complex serological methods with definition CMV-specific IgM and IgG. Proof revealing CMV-specific IgG at dynamic supervision within a year was marked at 83,7% of children, CMV -specific IgM – in 16,3% of children. According to an archival material congenital CMV the infection is diagnosed for 108 children. Developmental anomalies are verified at 40,7% (44) children which have been included in the present research. In 80,3% (102) cases of anomaly of development are diagnosed at the age of 0–3 months, in 19,7% (25) by the end of 1st year of life. At children defeat CNS since a birth was characterized by nonspecific clinical semiology – oppression CNS (58,3%), signs hydrocephalic hypertension (54,2%) and convulsive (20,8%) syndromes. Hemorrhagic displays in the form of hemorrhages in scklera, petechial rashes on the person, a trunk, extremities took place at 13,6% of children. Specific defeat of respiratory organs with development cytomegalovirus pneumonia is noted at 48,8% of children. In 19,7% of cases for children it is diagnosed car-

dit, in 19,4% – toxic cardio pathology. Clinical signs to nephrites were registered in 13,4% of cases. The specific hepatitis is diagnosed for 26,0% of children with CMV infection. Hepatomegaly it is noted at 56,7% of children, splenomegaly – at 14,2%. The phenomena enter colitis were observed in 16,5% of cases. Deficiency of weight was registered at 18,1% of children, including hypotrophy the first (3,1%), the second (7,1%) and the third (6,3%) degrees. Developmental anomalies of an internal were marked at 54,9% of children. Congenital heart diseases(CHD) are diagnosed for 19,7% of children with CMV infection. Defect interatrial partitions in structure CHD has made 7,1%, defect interventricular partitions – 2,4%, an open arterial channel – 0,9%, fibrolelastosis – 3,1%. Congenital defects of a gastrointestinal part in CMV infection met in 11,0% of cases. At 10 from 14 children (71,4%), operated concerning congenital defects in GIS, there were postoperative complications in the form of poured serous-fibrinous or purulent-fibrinous peritonitis, a sepsis, a bacterial pneumonia that was at the bottom of a lethal outcome. Anomalies of urogenital system are established at 7,1% of children in the form of doubling of kidneys (0,8%), hypospadias (2,4%). In 61,4% of cases the condition of children with CMV progressively worsened with development respiratory and Cardiovascular insufficiency (51,2%), DIC syndrome (33,1%), a brain hypostasis-swelling (37,8%), poliorgan insufficiency (12,6%), toxic dystrophic conditions (7,1%).

The conclusion: Developmental anomalies are formed at 40,7% of children with congenital CMV infction. In structure CHD anomalies of development CNS with formation occlusions the internal and mixed hydrocephaly, microcephaly. Anomalies of development of an internal are more often formed at spread out to the infection form.

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The conclusion: Developmental anomalies are formed at 40,7% of children with congenital CMV infction. In structure CHD anomalies of development CNS with formation occlusions the internal and mixed hydrocephaly, microcephaly. Anomalies of development of an internal are more often formed at spread out to the infection form.

TO EVALUATE THE EFFECTIVENESS OF THE ANGIOGENESIS INHIBITOR IN TREATMENT AGE – RELATED MACULAR DEGENERATION

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The relevance: Exudative form of age – related macular degeneration(AMD) see the central leads to irreversible decline of vision and a major cause of disability (Ulitina A.Y., Izmaylov A.S., 2012). According to the World Health Organization (WHO), 161 million of population of the earth is suffering from AMD. Exudative form is found in 10% of the patients, in 90% central choroidal neovascularization (CNV) is the reason that can lead to blindness.

The purpose of the research. To evaluate the effectiveness of the treatment of patients with exudative form of AMD with angiogenesis inhibitor - ranibizumab.

Research Materials and Methods. 33 patients exudative form of AMD, were examined. The examination was carried out in "Sihat ko'z" private clinic.

In order to assess the effectiveness of the drug ranibizumab the patients were divided into 4 groups by the form of the disease: group I consisted of 10 patients (16 eyes) with the classic type of choroidal neovascularization (CNV), group II - of 6 patients (10 eyes) with covert type of CNV, group III - 10 patients (14 eyes) with mixed type of CNV, group IV - 7 patients (8) in the stage of fibrovascular scar CNV. All the patients in the group took in anti-VEGF therapy (ranibizumab intravitreal injection of 0.2 ml, 1 time in 1 month, to 3 months). All patients passed standard ophthalmologic musters - vizometria, perimetry, tonometry, Ophthalmoscopy, bio microscopy. Moreover, all patients were passed special musters, optical coherent tomography and fluorescent angiography.

Results. After 1 month of treatment of patients clinical research showed that in first group - 37.5% (6); in second group -10%(1), in third group-35.7% (5) improved the visual acuity and lighting sensitivity. 4-th group of patients didn't show positive results. After 3 months of treatment, clinical researches showed that 81.2% of the group 1 ($p < 0.05$) and 78.6% of the group 3 ($p < 0.05$) were with positive results. 50% of patients in group 2 ($p > 0.05$) were also showed the improvement of eyesight, but with statistics was not reliable information. In 4-th group, only 1 eye, 12.5% ($p > 0.05$), showed the improvement of eyesight in 0.03.

Conclusion. The investigation showed that ranibizumab drug effects well for eyesight and retina functional condition. This angiogenesis inhibitor is recommended for treating classical and mixed exudative forms of aging macular dystrophy.

COMPARATIVE ANALYSIS OF THE SEVERITY OF DRY EYE SYNDROME IN PATIENTS WITH DIABETES MELLITUS AND GLAUCOMA

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Introduction. Dry eye syndrome (DES), also called dysfunctional tear syndrome

is complex condition, which include symptoms of the scratching sensation, or feeling like there's grit in the eyes, stinging or burning eyes, excessive eye irritation from smoke or wind and visual disturbances. Decreased corneal sensation in diabetes mellitus may cause the tear deficiency. Also eye drops used to treat glaucoma have been identified as one of the leading risk factors for DES. Diabetes mellitus and glaucoma associated dry eye syndrome are actually very common.

Aim. To compare the severity of dry eye syndrome in patients with diabetes mellitus and glaucoma.

Materials and methods: This study was carried out in the department of ophthalmology of the 2nd clinic of TMA. The study involved three groups of people at the age of 50 to 82. In the first group there were 13 patients with diabetes mellitus type 2. The second group consisted of 13 patients who had glaucoma associated type 2 diabetes mellitus. And third group consisted of 14 patients with primary open angle glaucoma. All patients underwent ophthalmic examinations such as history taking, complete OSDI questionnaire (uzbek version by Bakhritdinova F., Makarova E.), Schirmer I tear test, visual acuity, tonometry, perimetry, laboratory analysis (blood sugar level).

Results. 23 (57,5%) are women and 17 (42,5%) are men, the mean age was 64±3,4 years old. All patients at the moment of examination had compensated blood glucose level. However in all the patients DE symptoms of different severity were found. Subjective evaluation of the severity of dry eye syndrome in terms of a history taking and the OSDI questionnaire. The OSDI scoring range is divided into degrees of severity: mild (13-22), moderate (23-32), and severe (33-100). In the I group the mean score was 16.8 (range of 11.4 – 20.8). In the II group -48.8 (range of 34.1 – 62.5), and in the III group the OSDI score was equal to 38.2 (range of 31.3 – 46.9).

From Schirmer I tear test obtained that, 6 diabetic patients (46,1%) have DES. In the I group Schirmer I test the mean value was 7,8 mm (range of 4-13 mm). 1 patient (7,7%) has severe DE, 2 patients (15,4%) have middle DE, 3 patients (23,1%) have mild DE. In the II group estimated the highest prevalence of DES – 10 patients (76,9%), which had both of diseases. The mean value of Schirmer I test in this group was 4,8 mm (range of 2-10 mm). The measurement showed that, 3 patients (23,1%) have severe DE, 5 patients (38,5%) have middle DE and 2 patients (15,4%) have mild DE. In 8 *glaucomatous patients* (57,1%) determined the DES. The mean value of Schirmer I tear test in III group was 5,7 mm (range of 3-10 mm). We estimated in this group 2 patients (14,3%) with severe DE, 4 patients (28,6%) with middle DE and 2 patients (14,3%) with mild DE.

Similar results were obtained by further examinations. In biomicroscopy the decreased marginal tear meniscus was observed in 6 patients (15%). In this examination obtained 1 patient (2,5%) with erosion and 2 patients (5%) with mucin filaments.

Conclusion. The severity of dry eye syndrome is supposed to be related to hyperglycemia, hypoinsulinemia and microvasculopathy, presence of glaucoma association. From our data we concluded that, the high prevalence of DES in patients with glaucoma associated type 2 diabetes mellitus. However the most pronounced signs of DES develop in patients with both of these diseases. It is important to assess patients with glaucoma and diabetes mellitus on presence of DES and treat in time.

THE ROLE OF REVASCULARIZATION OF EXTRACRANIAL CAROTID ARTERIES IN OCULAR ISCHEMIC SINDROM

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Objective. Evalution of prevalence of ocular ischemic sindrom (OIS) in patients with extra cranial arteries stenosis.

Materials and methods. The study was carried out from April 2016 to November 2016 in the department of ophthalmology of the 1st clinic of TMA. The study included 18 patients with stenotic lesions of carotid arteries. All the patients have undergone routine ophthalmologic tests: visiometry, ophthalmoscopy, perimetry, biomicroscopy, tonometry and duplex scanning for diagnosing carotid artery lesions.

Results. Among all the patients 14 (77.8%) were male and 4 (22.2%) female. The average age of the patients was 65,7±9,9 years. Unilateral lesion of carotid arteries was met in 15 (83,3%) patients (I group), bilateral lesion – in 3 (16.7%) patients (II group). Before revascularization surgery visual acuity in unilateral injured patients (83.3%) was equal to an average vis = 0,1±0,02, visual acuity in bilateral injured patients (16.7%) was equal to an average vis = 0,5±0.03; after the operation in the first group, the average visual acuity increased to vis = 0,6±0,06. Visual acuity improved in 11 patients. In the second group, the average visual acuity increased to vis = 0,4 ± 0,02. In the first group peripheral vision before surgery on average was equal to 360^0 ± 17^0, in the second group peripheral vision on average was equal to 320^0±25^0, after the operation in the first group it increased up to 420^0 ± 14^0 in the second group - up to 380^0 + 14^0. Ophthalmoscopy vessels on the retina stenotic up to 50% in the first group, the second group of blood vessels on the retina stenosis up to 70%. In the first group after surgery stenosed retinal vessels were found in 37% in the second group - in 38.2% of patients. Intraocular pressure was equal to an average of 12 ± 2.3 mm Hg in the first group, 9.2 ± 1.8 mm Hg - in the second group. Biomicroscopy determined in 9 patients cataract, 3 patients had degenerative changes in iris, in 1 patient neovascularization was found in 2 open-angle glaucoma patients.

Conclusion. After revascularization in patients with ocular ischemic syndrome restored blood flow in the eye improved visual acuity, peripheral vision and retinal vessel changes.

ANALYSIS OF THE EFFECTIVENESS OF CHOLINE ALFOSCERATE IN OCULAR ISCHEMIC SYNDROME

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Tashkent medical academy

Objective. To investigate the effectiveness of choline alphoscerate in patients with ocular ischemic syndrome (OIS) and coexisting cerebrovascular pathology.

Materials and Methods: We conducted a comprehensive survey of 11 patients aged 48-73 years (mean 55.8±7.2 years) who were diagnosed mild degree OIS (carotid arteries stenosis less than 50%) and had stroke in anamnesis. Patients were divided into two groups. In group 1 (study group, n = 5), the standard treatment was supplemented with choline alphoscerate 4mg with saline solution 200 ml intra-

venously #3. 2 group (control group, 6 cases) received standard treatment. All the patients have undergone standard ophthalmic examinations: visometry, perimetry, ophthalmoscopy, tonometry, biomicroscopy, special examination included electroretinography (ERG), as well as neurologic examination and duplex scanning with consultation of vascular surgeon.

Results: All the patients were recommended therapeutic treatment. Among both groups 72,7% of all the patients had cataract. All the patients suffered from arterial hypertension and were prescribed antihypertensive therapy. The clinical and functional examinations revealed that study group who were prescribed choline alphoscerate showed rapid visual acuity increase and sustained improvement of visual fields. Except this ophthalmologic findings showed that retinal microcirculation ameliorated during the period of research: arteries became less attenuated, veins less wide. ERG showed higher (1,4 times) photoreceptor sensitivity in study group after the treatment. Subjectively patients of the study group mentioned better vision and better general condition: better sleep, good mood and less increased blood pressure, less headaches.

Conclusion: Appropriate combination therapy for patients with ocular ischemic syndrome including choline alfoscerate leads to increased visual acuity, widening of visual fields, and retinal mean sensitivity, as well as ocular haemodynamic improvement and general condtion.

CLINICAL AND FUNCTIONAL DIAGNOSTICS OF "DRY EYE" SYNDROME (DES) WHICH HAS BEEN DEVELOPED AS A RESULT OF ADENOVIRAL OPHTHALMIC INFECTIONS.

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The actuality of the theme. Wide-spreading and high-level development of adenoviral ophthalmic infection is a serious problem in ophthalmic practice. In this case, it is not enough to become the reason only prophylactic measures, but distinctiveness of infection way of adenoviral infection and incubation (hidden) period or the first period of the disease without any clinic signs, can cause that. The basic positions of infection are contact way, dirty hands, ophthalmic instruments, a damaged eye drop or eyedroppers and common used things. "Dry eye" syndrome derives from 80% of patients who infected with adenoviral infection. There are 12% of people under 40 and 67% of people under 50 who have "dry eye" syndrome.

Aim. Evaluation of clinical and functional diagnostics of "dry eye" syndrome which has been developed as a result of adenoviral ophthalmic infections.

Investigation paper. In order to accomplish the goal, we've set for ourselves, we've analyzed 14 patients who got "dry eye" syndrome because of an adenoviral ophthalmic infection. Scientific investigation papers were collected in the ophthalmology room of the 2nd clinic of the Tashkent Medical Academy. All the patients were analyzed by the main ophthalmology checkups – visiometry, perimetry, ophthalmoscopy, biomicroscopy, tonometry and one of the additional analyses, Schirmer's test were applied. Standard Complex treatment were prescribed to all the patients.

Results. According to the results of inspections 10 days after complex treatment

of patients, we observed that lessening foreign body sensation and sense of dryness in eyes for 6 of them (42.8%) and not being complaints for 8 of them (57,1%) which belong to complaints about ''dry eye" syndrome. The results of visiometry, perimetry and tonometry, gave the same results as before treatment. According to analysis of Schirmer's test (mm/5min), we had 15mm (28,5%) for 4 of the patients,10-15mm (50%) for 7 of them and 5-10mm (21,4%) for 3 of them.

Conclusion. According to the results of inspections, Schirmer's test is the easiest objective method to diagnose "dry eye" syndrome and recommend for functional diagnosing.

THE ROLE OF REVASCULARIZATION OF EXTRACRANIAL CAROTID ARTERIES IN OCULAR ISCHEMIC SINDROM

Khikmatov M.N., Hodjaeva U.Z.

Tashkent medical academy

Objective. Evalution of prevalence of ocular ischemic syndrome (OIS) in patients with extra cranial arteries stenosis.

Materials and methods. The study was carried out from April 2016 to November 2016 in the department of ophthalmology of the 1st clinic of TMA. The study included 18 patients with stenotic lesions of carotid arteries. All the patients have undergone routine ophthalmologic tests: visiometry, ophthalmoscopy, perimetry, biomicroscopy, tonometry and duplex scanning for diagnosing carotid artery lesions.

Results. Among all the patients 14 (77.8%) were male and 4 (22.2%) female. The average age of the patients was 65,7±9,9 years. Unilateral lesion of carotid arteries was met in 15 (83,3%) patients (I group), bilateral lesion – in 3 (16.7%) patients (II group). Before revascularization surgery visual acuity in unilateral injured patients (83.3%) was equal to an average vis = 0,1±0,02, visual acuity in bilateral injured patients (16.7%) was equal to an average vis = 0,5±0.03; after the operation in the first group, the average visual acuity increased to vis = 0,6±0,06. Visual acuity improved in 11 patients. In the second group, the average visual acuity increased to vis = 0,4±0,02. In the first group peripheral vision before surgery on average was equal to $360^0 \pm 17^0$, in the second group peripheral vision on average was equal to $320^0 \pm 25^0$, after the operation in the first group it increased up to $420^0 \pm 14^0$ in the second group - up to $380^0 \pm 14^0$. Ophthalmoscopy vessels on the retina stenotic up to 50% in the first group, the second group of blood vessels on the retina stenosis up to 70%. In the first group after surgery stenosed retinal vessels were found in 37% in the second group - in 38.2% of patients. Intraocular pressure was equal to an average of 12±2.3 mm Hg in the first group, 9.2±1.8 mm Hg - in the second group. Biomicroscopy determined in 9 patients cataract, 3 patients had degenerative changes in iris, in 1 patient neovascularization was found in 2 open-angle glaucoma patients.

Conclusion. After revascularization in patients with ocular ischemic syndrome restored blood flow in the eye improved visual acuity, peripheral vision and retinal vessel changes.

COMPARATIVE ASSESSMENT OF EFFECTIVENESS OF SHAYLOK AND DICLOPHENAK DRUGS IN PATIENTS AFTER ANTIGLAUCOMATOUS OPERATIONS

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Relevance: Glaucoma is considered to be one of the actual problem in modern ophthalmology. It is known that the main factor that leads to the decrease of hypotensive effect after surgery is a considerable fibroblastic activity of eye tissues, that has direct link with the result of inflammatory reactions. Non-steroidal anti-inflammatory drugs (NSAID) are used as highly effective drugs after antiglaucomatous operations in ophthalmology for prophylactic treatment of inflammatory process and pain syndrome.

Purpose: To study clinical and laboratorial effectiveness of NSAID drugs Shaylok and Diclophenak to relief pain syndrome and prophylactics of over-scarring in patients after antiglaucomatous operations (AGO)

Materials and methods: Under our observation there were 30 (30 eyes) patients after AGO. All patiens underwent common ophthalmologic examinations (visometry, perimetry, biomicroscophy, ophthalmoscopy) and special methods such as cytological examination and inflammatory degree was assessed by 3-point system offered by Maychuk Y.F. Patients were divided into 2 groups:control and study.

Control group included 16 (16 eyes) patients who took 0,1% solution of natrii diclophenaci after AGO, whereas study one included 14 (14 eyes) patients to whom Shaylok was instillated.

Results: average visual acuity in patients of both groups before treatment was0,02±0,01. In control group after surgery this indicator increased to 0,04±0,02, that exceeded twice initial index. In study one visual acuity raised to 0,09± 0,02 that was 4,5 times more than initial index on the 10 th day of observation a decrease of desquamated epithelial cell and active neutrophils were observed in composition of the print-smear. In comparison with control group, there was a decrease of 1,5 times in the number of active neutrophils that made up 16,1± 2,1% on average. In contrast, the number of destructive leucocytes increased to 3,5times and made up 11,3± 1,73%on average. It should be noted that severity index of inflammation on the 20 th day of treatment was within scope 0,83± 0,09% instudygroupand 4,21± 0,08% in control one that pointed out a considerable decrease of inflammatory reactions and relief of pain syndrome.

Conclusion: Thus, the use of Shaylok after AGO considerably elevates the clinical effectiveness and reduces terms of postoperative treatment

ASSESSMENT OF EFFECTIVENESS OF PREPARATION OF BRIMOPTIC IN NEOVASCULAR GLAUCOMA

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Neovascular glaucoma (NVG) refers to severe prognostically unfavorable forms of eye diseases. Although the main method of treatment is fistulaizied operation, they

are distinguished by a high risk of a variety of hemorrhagic complications, reduction in IOP with medication in II stage of NVG or in the preoperative period.

Materials and methods: We examined the effectiveness of given preparation in II stage of NVG when the angle of the anterior chamber is open and IOP is high. Our results based on examination of 42 patients (44 eyes) with NVG . The study group included 22 patients (22 eyes), that took brimoptic, second group – 20 patients(22 eyes) took azarga (timalol+brimoptic). The standard ophthalmologic examinations were carried out, observation periods were 16 weeks.

Results: Indicators of average reduction of IOP in the first group was 8.9 mm Hg (30,1%) P <0.001 in the second group was 7,86mm Hg (26,9%) P <0.001. Average daily fluctuations of IOP after 16 weeks were 2.1 mm Hg in the first and the second 2.6 mm Hg group respectively. IOP raised at the end of 8 weeks more than 26 mm Hg in one patient of the first group and two patients of the second group.

Conclusions: Preparation of brimoptic considerably reduces IOP at patients with NVG compare to azarga. It is recommended to use it in medical treatment of patients with NVG II stage and preoperative period of all stages.

MEDOTILIN IN COMPREHENSIVE TREATMENT OF NON-PROLIFERATIVE DIABETIC RETINOPATHY

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Aim. The aim of this study is to evaluate the efficacy of Medotilin in the treatment of non-proliferative diabetic retinopathy.

Material and Methods.

The study included 16 patients (32 eyes) with non-proliferative diabetic retinopathy (9 women and 7 men). The average age of the patients was 57. Patients were divided into two groups. Control group- 8 patients (16 eyes) received conventional treatment including Sol. Emoxipini 1% - 0.5ml p/b and Sol. Pyracetami 10ml 20% i/v for 10 days. The main group- 8 people (16 eyes) received 1g of medotilin i/m instead of Sol. Piracetami for 10 days. All patients took antiglycemic drugs prescribed by an endocrinologist in order to reduce and maintain normal blood sugar level. To assess the condition of the patients` eyes, standart ophthalmic examination methods such as visometry, computer perimetry and ophthalmoscopy were used as well as a special examination method- electroretinography.

Results. In the analysis of the data obtained on the 10th day after the treatment a positive effect of medotilin on visual function in patients with early-stage non-proliferative diabetic retinopathy was observed. These included improvement of visual acuity, improvement in computer perimetry performance and normalization of oscillatory potentials of electroretinograph.

The improvement in visual acuity was observed in 75% of patients of the main group and only 12.5% of patients in the control group.

The computer perimetry showed increase in retinal sensitivity in approximately 62.5% of patients of the main group, while the rate in the control group was 37.5%.

Immediately after the treatment electroretinography data showed improvement in electrophysiological parameters of the retina and optic nerve, in the form of normalization of retinal oscillatory potentials in 87.5% of patients of the main group.

Patients of control group showed improvement in 25% of cases.

Treatment was well tolerated; none of the patients had any adverse reactions to the drugs.

Conclusion. Application of neuroprotective drug Medotilin in patients with non-proliferative diabetic retinopathy improves a number of clinical and functional parameters of the eye, which allows us to consider its use as a component of comprehensive rehabilitation treatment of eye complications in diabetes mellitus.

THE EFFECTIVENESS OF PHOTODYNAMIC THERAPY IN EXPERIMENTAL EYES BURNS

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At last years, was appeared the information about positive influence of photodynamic therapy (PDT), on the processes of epithelialization and tissue regeneration in eyes burns.

Aim. Study the influence of photodynamic therapy (PDT) on the processes of cornea epithelialization, on the model of eyes burns in rats.

Material and methods. The work has been done on 65 nonlinear adult rats. Was applied clinical examination of rats eyes, bacterioscopic and histological studies.

Depending on conducting therapy the animals were divided into 5 groups: 1 - control (intact animals) and 4 experimental groups with corneal burn: 2) was instilled 0.25% solution of laevomicetin (2 drops six times a day); 3) conducted photodynamic irradiation with native equipment - ALT "East", in a dose - 300 mJ, 3 min; 4) was instilled the solution of methylene blue (2 drops 3 times a day); 5) carried PDT in a dose 30 J, 3 min., after instillation of solution of methylene blue.

Results and discussion. In 7 days the phenomenon of neutrophil infiltration and bacterial contamination in all groups were significantly lower, however, was marked significant edema in 2nd and 4th groups. Bacterioscopic investigation showed the reduction of bacterial contamination in animals of 3nd and 5th groups 3, in 3.5 and 4.5 times, respectively, in compare with 2nd and 4th groups.

During all periods of observation the infiltrate of subcorneal zone in 5th group was less pronounced than in other groups and was represented, mainly, by round cell elements in the anterior chamber, iris, ciliary zone and retina.

Conclusion: using of PDT with a photosensitizer methylene blue in designed doses and strength has positive power epithelizing and bacteriostatic effect on processes of corneal repair in experimental burns.

THE USE OF SOME ANTIBACTERIAL DRUGS TO PREVENT POST-OPERATIONAL COMPLICATIONS AT EEC (EXTRACAPSULAR CATARACT EXTRACTION)

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Tashkent medical academy

Relevance: Inflammation, following uncomplicated EEC with IOL (intraocular linz)implantation is the result of direct trauma of the anterior vascular tract eyes,

resulting in cataract surgery, as well as a delayed immune response to the implanted IOL eyes.According to foreign colleagues, one of the most effective prevention methods of inflammatory complications is the introduction of antibiotics the cephalosporin group and aminoglycosides druing the pre- and postoperative period.

In our study, we compared the drugs Levoksimed (levofloksatsin 0,5%) and Tobramycin. Levoksimed antibiotics belong to the third generation of Ftorhinolon group, antimicrobial bactericidal drugs of broad spectrum. Tobramycin bactericidal antibiotic with broad-spectrum usage of the aminoglycoside group.

Materials and Methods: We observed 40 patients (40 eyes) with cataracts of varying degrees of maturity and etiology. The patients' age range from 50 to 80. The patients were divided into two homogeneous groups: I group (Control Group) - 20 patients received antibiotic therapy with 0.5% of the drug 0.3% tobramycin solution (Tobrex, Alcon-Couvreur). Patients of group II (Basic Group) - 20 patients were assigned to antibiotic therapy with levofloxacin 0.5% solution of the drug (Levoksimed World Medicine).

All patients underwent EEC surgery with IOL implantation. Before surgery, patients instilled antimicrobial eye drops on two schemes: the first 5 times per hour – on an operation day and the second 4 times a day - 2 days prior to surgery, and five times per hour – on surgery day.

Microbiological studies of conjunctival cavity were performed in all patients prior to surgery (seed 1), after a course of antibiotic prophylaxis (seed 2), as well as immediately after surgery (3 seed).

Results: In the microbiological examination of the contents of the conjunctival cavity of 40 patients diagnosed with cataract, before surgery 17 persons (42%) had various microflora residents.

Patients who were instilled levoksimed antibacterial eye drops according to the first scheme, experienced statistically significant reduction in conjuctional microflora just after one-hour instillation of the drug, from 50 to 23%.

In the group of patients who instilled Tobrex before surgery, the results revealed insignificant reduction in microflora, from 40 to 32%. On the other hand, a two-day course of antibiotic prophylaxis showed a significant reduction in conjunctival flora, which occurred in all treatment groups

Conclusion

1. The use of local antibacterial drugs before and after surgery, significantly reduces the bacterial flora of conjuctiva.

2. In the first case, where we used a one-hour antibacterial prevention scheme, the greatest effectivety results belonged to Levoksimed, and during a two-day scheme both two drugs had similar effectivety results.

DIAGNOSTICS OF VIOLATIONS OF BLOOD STREAM IN BRACHIOCEPHALIC ARTERIES DURING THE AGE-RELATED MACULAR DEGENERATION

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Actuality. Recently, the attention of ophthalmologists is directed into the diseases of eyes, conditioned by a chronic ischemia and hypoxia of organ of sight, indis-

solubly related to the stenosis defeat or pathological crimpiness of brachiocephalic arteries (BCA). To the displays of chronic ischemia of eye most authors take the age-related macular degeneration (AMD) along with other diseases of eye.

The aim of the study. To investigate the state of blood stream and estimate the degree of expression and the frequencies of exposure of pathological crimpiness in brachiocephalic arteries for patients with the different clinical forms of the age-related macular degeneration.

Materials and research methods. 70 patients were examined with the different forms of AMD in age from 50 to 85 (65,5±5,8 years). From them: 30 patients (50 eyes) with the early displays of AMD (hard and soft druse, defects and migration of pigmental epithelium of retina), 40 patients with the late displays of disease: 15 patients (25 eyes) with atrophic AMD and 25 patients (40 eyes) with the different forms of chorioidal neovascularization (CNV). Besides a standard ophthalmological examination, to all patients for the estimation of the state of blood stream in BCA was conducted full-duplex scan-out and colour Doppler carting with the use of multifunction ultrasonic diagnostic device of SonoAce R7 (SAMSUNG MEDISON CO., LTD., Republic of Korea) with the use of linear sensor with frequency 7 Mhz. Registered the spectrum of the Doppler change of frequencies and determined the basic quantitative and quality parameters of blood stream.

Results. As a result of ultrasonic research of BCA for patients with the initial displays of AMD in 48% cases the different types of deformations of vessels are diagnosed without signs hemodynamically meaningful acceleration of blood stream. From them C-form pathological crimpiness of artery was marked in 22% cases, S-form pathological crimpiness - 18%. In addition, a crimpiness is educed as keenking in 6% cases and koyling 2%. In the group of patients with geographical atrophy of pigmental epithelium of retina the pathological crimpiness of BCA was observed for 64% patients. Among them at 28% C-form crimpiness, S-form - at 20%, keenking - at 8%, koyling - at 4% and double bends - at 4%. In a group with neovascular AMD the pathological crimpiness of BCA is diagnosed in 60% cases. From them in 25% cases - C-form crimpiness of vessel, in 20% - S- form, 10% - keenking and 5% cases - koyling. Thus, results of research of BCA for patients with the different clinical forms of AMD showed that from 48% to 64% cases come to light pathological crimpiness of one or another form. It should be noted that as far as weight of flow of dystrophy of macular zone the increase of frequency of exposure of pathological crimpiness of BCA is marked.

Conclusion. The presented data testify that a change of blood stream on BCA as a result of stenosises or pathological crimpiness is a risk of development of AMD factor and confirm the important role of haemodynamic factor in pathogeny of this disease. Frequencies of met of pathological crimpiness of BCA are educed for patients with the different forms of AMD: with the early displays of disease marked in 48% cases, for patients with geographical atrophy of PE - 64%, for patients with neovascular AMD - 60%. From them C-form a crimpiness makes 25%, S-form crimpiness - 19%, keenking - 8%, koyling - 3,5% and double bends - 1,5%.

THE CHARACTERISTICS OF THE QUALITY OF LIFE IN PATIENTS WITH GLAUCOMA

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The purpose and objectives: To assess the quality of life in patients with open-angle glaucoma (OAG) and to identify the influencing factors on it.

Materials and methods: The study of quality of life (QOL) in patients with glaucoma was conduct by surveying using questionnaires of NEI-VFQ 25 (National Eye Institute Visual Function Questionnaire) and GSS (Glaucoma Symptom Scale). The questionnaire was made in 38 patients with OAG with different stages of the disease. They were examined and treated in the 2-clinic department of ophthalmology in Tashkent medical academy.

Results: During the study, 18 (47.36%) patients with OAG represented the state as "bad", 15 (39.47%) - as "indifferently", 5 (13.16%) - as "not bad ". On the most of the surveyed 28 patients (73.68%) eye drops was instilled only sporadically and 10 (26.32%) of the patients used drugs, which were prescribed in accordance with the prescribed mode and they do not felt relief subjectively and cannot see the positive effect of the assigned treatment. On the bulk of the 31 patients with OAG (81.58%), no one don't taught prescribed eye drops. 4 (10.53%) of patients responded that their ophthalmologist didn't teach them how to use eye drops. 3 (7.89%) of the patients are still not able to use eye drops. The vast majority of patients - 29 (76.32%) claim that the eye drops are their own, 6 (15.79%) patients reported that they periodically bury their own, but sometimes they asked someone from else.

Research has shown that sedentary lifestyle is a characteristic of the 27 (71.03%) patients. 8 (21.05%) of patients experiencing difficulties due to the state of their own, attempting to clean up, get dressed, 4 (10.52%) - while cleaning the apartment. 32 (84.21%) patients had trouble when they read books and periodicals (under optimal spectacle correction). The study found that 28 (73.68%) patients experienced restrictions when they watch TV. Execution of small domestic work is difficult to 33 (86.84%). 17 (44.74%) of patients experiencing difficulties in the going up by stairs, 26 (68.42%) - when crossing the road. 18 (47.37%) patients reported the presence of difficulties in reading the names of shops, 21 (55.26%) patients - when counting money when bills recognition. 31 (81.58%) have difficulty with reading price tags in stores. As a result of the disease, 23 (60.53%) patients had to increase the amount of time, which they spent on work or other business, the same number of patients indicated that they did not have time to do everything what they want.

Conclusion: 1. Low score of visual function on the vast majority of patients (86.84%) predominated among patients with OAG, and assessed the state of his vision as "indifferently" or "poor." This can be explain by the presence of psychological factor, since glaucoma was diagnose in a patient there is a place to sense of tension and fear.

2. Even the correct selection of the local conservative treatment is not always effective in view of the irregular use of eye drops (more than half of the patients - 73.68%), inability or the inability (due to the presence of comorbidity) proper use of prescription drugs as well as due to lack of motivation treatment in OAG patients.

3. Our study has once again confirmed that the glaucoma now is a social and eco-

nomic problem. Because persons suffering from glaucoma in many cases need in the care of another person because of the state of his vision.

THE EPIDEMIOLOGICAL BASIS OF GLAUCOMA AND QUALITY OF LIFE OF PATIENTS

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The purpose and objectives: To provide the necessary medical care for ophthalmologic patients improve their quality of life. Depending from the conditions of life and place of residence in remote locations, it can be said that they are not well informed about the disease.

Materials and methods: In 2015-2016 years, the survey was carried out in the ophthalmic branch of the second clinic of the Tashkent Medical Academy. There were conducted ophthalmic studies to refine the diagnosis of glaucoma. From special methods of research is survey by questionnaires NEI-VFQ 25 (Visual Function Questionary) and GSS (Glausoma Symptom Scale). The amount of patients admitted with diagnosis of glaucoma was 476, 255of whom diagnosed with open-angle glaucoma (OAG), 221 patients with diagnosis of close-angle glaucoma (CAG). First established with OAG 47, repeated 208 patients. For the first time established - 32 CAG, repeated -189 patients. On 103 patients were conducted anti-glaucomatous surgery. 19 patients suffered from congenital glaucoma, also observed observed 6 cases with teenage glaucoma. CAG was observed at 187, 255 at the OAG and secondary glaucoma in 9 patients. 208 of all the patients are male, 268 are female. The average age of men was 51,53±15,05, women 51,48±12,47. The survey was conducted in patients with primary OAG 1-3 stage, 22 patients (44 eyes) buried hypotensive drugs locally, and 21 patients (26 eyes) received 1-3 years ago hypotensive surgery at the age of 51-76 years, respectively.

Results: In this year's treatment with glaucoma decreased to 8.06%, but the anti-glaucomatous surgery increased to 0.3%. Negotiability of patients with congenital OAG glaucoma is decreased to 0.1% and 8.54% respectively. Number of admitted patients with diagnosed juvenile glaucoma grew to 0.6% and 7.9% respectively.

Treatment of male patients increased to 0.4%, the female decreased to 0.3%. The average age of males was 51,71±15,03, women 51,72±12,67 years. The majority of patients who admitted to the department were residents of Tashkent 57.35% (273 patients), Tashkent region 17.23% (82 patients), others were the residents of Karakalpak Autonomous Republic, Syrdarya, Bukhara, Khorezm, Namangan, Ferghana, Andijan regions, and together combined about 74% (14 patients). Patients with new diagnosed glaucoma accounted 79, and 67.1% of them had information about the disease. The factors, according to survey, influencing the decrease in the quality of life of patients with glaucoma were: decreased physical activity, psychological discomfort, decreased visual acuity, social constraints, fear of surgery, constant monitoring by ophthalmologist, difficulty with the regime of instillation of an eye drop, higher prices for medicines.

Conclusion: It is proved that both questionnaires are high psychometric, trustworthy and highly sensitive to changes in quality of life on patients with glaucoma, and this is due to the influence of the low quality of the organization of eye care and low-level of the drug supply.

THE CHANGES OF RETINAL ARCHITECTONOICS IN PATIENTS WITH CENTRAL SEROUS CHORIORETINOPATHY

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Actuality. Central serous chorioretinopathy (CSCR) in spite of the great number of researches, still remains to be one of the least studied ophthalmological diseases. According to data from different studies, this disease has multivariable etiology, difficult pathogenesis and it is characterized by the development of the local serous detachment of neurosensory retina or by the multifocal areas of filtration of liquid at the level of retinal or pigment epithelium with the primary damage of macular area.

The aim of research: the comparative analysis of the changes in the structure of retina, exposed during optical coherent tomography (OCT) for patients with CSCR.

Materials and methods: 44 patients with CSCR became research object, among them 24 men (55%) and 20 women (45%), middle age of patients was 24±5,3 year, duration of disease from 7 days to 6 months. As a method of research for all patients was used optical coherent tomography of retina (Stratus OCT Zeiss), in the mode - Macular thickness.

Results: Analysis of tomograms showed that CSCR is characterized not only by the detachment of retina but also by changes in the structure of retina. First of all, there is a tendency to the increase of thickness of the reticulated shell in central areas, here the indexes of OCT make: Centre 320±450 microns (thickness of central part), Total volume 7,2±1,1 mm (general volume) by comparison to a norm: Centre 150-170 microns; Total volume 7,0 mm. In addition, CSCR with the isolated detachment of neuroepithelium was observed in 36% of cases and with the isolated detachment of pigment epithelium was observed in 32% of cases. The mixed changes in retinal architectonics were observed in 32% of patients. It was further set that the detachment of pigment epithelium is always isolated from the detachment of neuroepithelium of retina and has following sizes: extent from 10 to 50 mic and height, as a rule, no more than 60 mic, on the average 50,6±12,67.

Conclusion: Results of this research, allow to describe in full degree the alterative processes that affect retina, and also allow to draw conclusion, that CSCR is pathology striking not isolated certain layers, but all the structures of retina.

NEW APPROACH TO VIRAL KERATITIS TREATMENT

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Today, viral infections have a special place among the inflammatory diseases of the eye being a serious social problem in practical ophthalmology. According to WHO, currently 66.7% of the world population suffer from viral conjunctivitis, 5% - from viral keratitis. The latter is often the cause of monocular blindness. Furthermore, these diseases cause temporary disability approximately in 80% of all cases (Jack J Kanski, Brad Bowling, 2011).

Nowadays, different drugs in the form of eye drops, ointments, subconjunctival injections are widely used in ophthalmology. However, these dosage forms have serious drawbacks: short term of action, the need for frequent instillation, a rapid change in therapeutic concentrations due to their elimination from the body with the lacrimal fluid. Injectable form is limited in application because of painfulness despite high bioavailability of the drug.

The disadvantages mentioned above have encouraged us to develop biodegradable ocular medicinal films "Glazavir" which have an active substance Celagripum deposited on a polymer film (Na-carboxymethylcellulose), which is reinforced with glycerol.

Objective: to study the effectiveness of "Glazavir" films in the treatment of ocular herpetic keratitis.

Materials and Methods: clinical trials of the drug "Glazavir" were conducted on the basis of the Institute of Immunology, Uzbek Academy of Sciences. The study involved 10 voluntary patients (10 eyes), 4 men and 6 women, with dendritic herpetic keratitis of acute and chronic recrudescent course. The diagnosis was based on routine ophthalmic clinical examinations: visometry, biomicroscopy and esthesiometry. Besides, the investigation included laboratory tests: ELISA of peripheral blood and lacrimal fluid, PCR and the main parameters of the immune status. The treatment was combined with the use of systemic antivirals (Zovirax), immunomodulators (Interferon), vitamins, epithelizing drugs (gel Solkoseryl).

Results: the new domestic drug "Glazavir" is proposed to treat patients with viral keratitis. All patients laid the films in their conjunctival sac twice a day regularly during 10 days. In 2-3 days corneal edema decreased, cornea brightened and infiltrates began to disperse in 90% of patients (9 eyes). Corneal sensitivity was restored on the 3-4 day, the process of epithelialization began, visual acuity has increased by 40%. On the day 5 the laboratory data and immunological parameters came to normal figures (90%).

Moreover, it was established that during the acute infection there were signs of secondary immune deficiency of T-cell type resulting from the relative lymphocytopenia, the deficit of the absolute amount of the CD 3+ lymphocytes and CD 4+, CD 8+ subpopulations, hyperproduction of IgM and decrease of

IgG synthesis. Chronic course of the disease is caused by a deep imbalance of immune regulation because of pronounced deficiency of CD 4+, superficial markers of T-helper cells during remission of recurrent course.

When studying the cytokine profile it was determined that acute infectious were characterized by increased spontaneous migration of interferon-alpha both in the tear fluid and blood serum against the background of TNF hyperconcentration

Chronic form was caused by the systemic and local deficiency of alpha-interferon, and imbalance of general and local production of TNF-alpha because of the moderate generation of cytokine in the tear fluid on a background of the virtual absence of serum.

Conclusion: 1. Antiviral ocular medicinal films are effective in treatment of viral keratitis and, more comfortable in use, which can increase patients' compliance.

2. There are complicated systemic immunopathological reactions in cellular and humoral immunity while the eye herpetic diseases, leading to changes of natural cytotoxicity factors, activation of markers and mediators of intercellular interaction with the development of secondary immunodeficiency, depending on the clinical course. Thereby, it is advisable to use a combined treatment for curing the viral ailments of eyes, including etiotropic and immuncorrecting therapy.

ESTIMATING OF THE EFFECTIVENESS OF PHOTODYNAMIC THERAPY IN COMPLEX TREATMENT OF EYES BURN DISEASES

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Relevance. Recently, among eye diseases the rate of burns of eyes with different etiology is significantly increased. According to information from different sources the portion of burns among eye traumas is about 6,1-38,4%.

The aim of the study. To estimate clinical and laboratory effectiveness of photodynamic therapy (PDT) in complex therapy of eyes burn diseases.

Materials and methods. To estimate clinical and laboratory effectiveness of PDT in complex therapy of eyes burn diseases there were studied 20 patients (40 eyes). All patients had the burns of eyes of 1st and 2nd degree. They were divided into 2 groups: basic group and control group. Basic group included 10 patients (20 eyes), control group included 10 patients (20 eyes). All patients were examined with general ophthalmological methods. Patients of control group received usual appointed therapy. Patients of basic group received additional PDT (with 1% solution of metilen blue, power 300 mDj and the length of wave 630 nm) on impulse mode 1 time per day during 5 days.

Results. It was observed that therapeutic measures lead to decreasing of pericorneal injection, pain and delacrimation on patients of basic group after 3 days. Moreover, after 4-5 days there was determined full passing of pericorneal injection, pain and delacrimation on these patients. 8 patients (80%) from this group had full epithelization of cornea in 6-7 days, 2 patients (20%) also had full epithelization of cornea in 9-10 days. As for patients of control group, it was observed that therapeutic measures lead to decreasing of pericorneal injection, pain and delacrimation on patients of basic group after 5 days. After 5-6 days there was determined full passing of pericorneal injection, pain and delacrimation on these patients. 7 patients (70%) from this group had full epithelization of cornea in 9-10 days, 3 patients (30%) also had full epithelization of cornea in 10 days and were sign out from hospital.

Conclusion. Was determined high degree of effectiveness of PDT in complex therapy of eyes burn diseases. The complex intensity of pericorneal injection, pain and delacrimation during therapy had a tendency to decrease rapidly, recovering of damaged tissues (cornea) developing faster and the duration of treatment in hospital becomes shorter.

OPTIMIZATION OF TREATMENT OF ALLERGIC CONJUNCTIVITIS

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Importance of investigation: Allergic Conjunctivitis allergic eye disease characterized with IgE - caused allergic inflammation of mucous membrane of eye conjunctiva that is the mucous membrane lining the eye on the outside and inner surfaces of the eyelids caused by contacting with significant allergen. Allergic conjunctivitis is the most common allergic diseases of the eye. As a rule, it combine with other manifestations of atopic (usually with allergic rhinitis), in connection with which it is dif-

ficult to obtain objective data on the prevalence of this disease (about 15 to 40% of the population) (R.M. Haitova 2005; P.V. Kolkhir 2010).

Purpose: the assessment of clinical efficiency of the native preparation Pallada "WM" in complex treatment of allergic conjunctivitis.

Materials and methods: We observed 50 patients (100 eyes). Of them 16 were males and 24 females. Patients` age ranged from 13 to 60 years, and the average was 36,5±1,5 years old. Patients were divided into two groups: I group (control) included 25 patients (50 eyes), which took complex therapy with drug Lekrolin (2% eye drops, "Santen" by 1-2 drops 4 times a day). Group II included patients (base) 25 patients (50 eyes) which took combination therapy which Pallada drug (1% -5 ml eye drops, «World Medicine") by 1 drop to 2 times daily.

Results: The disappearance of symptoms of main patients group occurred on average 1.5 times faster than that of control group. Dynamics of study of eyelids conjunctiva condition of the eyelids and the eyeball during treatment with Lekrollin (Group 1) showed that the swelling of the eyelids conjunctiva was observed in 80% of patients by the end of the second week remained 32.0%, and after treatment was maintained in 12.0% of patients. Swelling of the conjunctiva of the eyeball by the end of 2 weeks was maintained in 20.0% of patients after treatment was maintained at 4.0% of patients. Hyperemia of conjunctiva century end of 2 weeks was observed in 24.0% of patients, and after the treatment was maintained at 8.0% of patients. Hyperemia of conjunctiva of the eyeball was observed in 84.0% of patients by the end of 2 weeks remained 32.0% of the patients, and after treatment disappear completely. In a study of the state of the conjunctiva of the eyeball eyelids during treatment with palladium (group 2) showed that the swelling of the conjunctiva of the eyelids, observed in 80% of patients by the end of the second week remained 20.0%, and after treatment disappear completely. Swelling of the conjunctiva of the eyeball by the end of 2 weeks was maintained in 16.0% of patients, but disappeared after the treatment fully. Hyperemia of eyelids conjunctiva at the end of 2 weeks was observed in 32.0% of patients, and remained at 4.0% after treatment. Hyperemia of eyeball conjunctiva was observed in 88.0% of patients by the end of 2 weeks and remained in 24.0% of patients, and disappeared after treatment completely.

Conclusion: Our study showed that Pallada eye on back ground of general anti-allergic therapy drops is effective in reducing the of allergic conjunctivitis phenomenon, regardless the causal factor and the form of the disease.

ESTIMATING OF THE EFFECTIVENESS OF BRIMOPTIC ON HYDRODYNAMIC CHANGES IN PATIENTS AFTER ANTIGLAUCOUMATOSE OPERATION

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Introduction. In resent years, there were great findings in ophthalmology. There is prognosis that for 2020 this number will increase with the glaucoma to 79,6 million and to 2030 it will grow 2 times. Also glaucoma is on the leading positions in reasons of blindness. Moreover, such changes as increase of intraocular pressure, glaucomatose atrophy of optic nerve and decreasing of vision field also took place in these patients. These patients receive different type of hypotensive drugs during

postoperative period. That is why the search of the most effective hypotensive drugs is still very important.

The aim of the study. to estimate the effectiveness of brimoptic (Brimonidine 0,2%+Timolol 0,5%) on hydrodynamic changes in patients after antiglaucoumatose operation.

Materials and methods. Patients were studied in the department of Eye disease in 2nd clinic of TMA. There were 20 females and 28 males with middle age from 47 to 73. For the therapy before operation all patients were divided into 2 groups: basic group 24 patients and control group 24 patients. The patients of basic group instilled Sol. Brimoptici by 1 drop 2 times, control group instilled Sol. Fotili by 1 drop 2 times. All patients were examined with common necessary ophthalmological methods and by needs they also received appointed therapy. To measure eye hydrodynamic was used Maclacov tonometry with 5,0; 10,0 and 15,0 gramm weights.

Indicators	Hydrodynamic results			
	(n = 24)	Brimoptik	(n = 24)	Fotil
IOP (Po)	26,12±2,68	17,52±0,78	25,12±2,15	18,52±0,34
MS (Db)	11,3±1,82	15,6±1,13	12,5±2,34	16,45±1,44
MD (Db)	13,9±2,12	9,7±1,24	14,9±1,12	10,5±2,1
Daily variation of IOP	6,34±0,74	4,26±0,41	7,12±1,74	5,54±0,5
C, mm^3/min/mm.Hg	0,14±0,011	1,22±0,01	1,4±0,038	1,47±0,08
F, mm^3/min	2,89±0,14	2,62±0,08	3,94±0,56	2,76±0,1

Results and discussions: Intraocular pressure during preoperative period in the treatment group was 31,9±3,21. IOP was 23.29±2.03 and 18.52±1.40 after 1 and 2 hours respectively. Moreover, IOP decreased down to 18.52±1.74 after 4 hours and slightly increased to 20.67±0.90 after 8 hours and remained stable until the operation. IOP in the control group was 31.3±3.37. It decreased to 26.00±3.45 and 22.8±1.73 after 1 and 2 hours respectively and remained at 20.29±1.20 after 4 hours and 22.74±1.42 after 8 hours.

IOP (mm Hg)					
Fotil	before dripping	after 1 hour	after 2 hour	after 4 hour	after 8 hour
	31,3±3,37	26,00±3,45	22,8±1,73	20,29±1,20	22,74±1,42
Brimoptik	31,9±3,21	23,29±2,03	18,52±1,40	18,52±1,74	20,67±0,90

Conclusion: According to the investigation, Brimoptic showed prompt, effective and stabile decrease in intraocular pressure in glaucoma patients during preoperative period.

ESTIMATING OF THE EFFECTIVENESS OF BRIMOPTIC IN PATIENTS AFTER ANTIGLAUCOUMATOSE OPERATION

Qushnazarov Q.R., Oralov B.A.

Tashkent medical academy

Introduction. In resent years, there were great findings in ophthalmology. Furthermore, some diseases despite the fact of their deep study, don't fully described yet. Glaucoma is one of such diseases. The rate of cases with glaucoma is increasing ev-

ery year. In 2015 according to information there are 66 millions patients. There is prognosis that for 2020 this number will increase to 79,6 million and to 2030 it will grow 2 times. Also glaucoma is on the leading positions in reasons of blindness. Moreover, such changes as increase of intraocular pressure, glaucomatose atrophy of optic nerve and decreasing of vision field also took place in these patients. These patients receive different type of hypotensive drugs during postoperative period. That is why the search of the most effective hypotensive drugs is still very important.

The aim of the study. to estimate the effectiveness of brimoptic (Brimonidine 0,2%+Timolol 0,5%) on hydrodynamic changes in patients after antiglaucoumatose operation.

Materials and methods. Patients were studied in the department of Eye disease in 2nd clinic of TMA. There were 20 females and 28 males with middle age from 47 to 73. For the therapy before operation all patients were divided into 2 groups: basic group 24 patients and control group 24 patients. The patients of basic group instilled Sol. Brimoptici by 1 drop 2 times, control group instilled Sol. Fotili by 1 drop 2 times. All patients were examined with common necessary ophthalmological methods and by needs they also received appointed therapy. The intraocular pressure was measured with Maklakov's tonometer (10 g load) every 1st, 2rd, 4th and 8th hours.

Results and discussions: Intraocular pressure during preoperative period in the treatment group was 31,9±3,21. IOP was 23.29±2.03 and 18.52±1.40 after 1 and 2 hours respectively. Moreover, IOP decreased down to 18.52±1.74 after 4 hours and slightly increased to 20.67±0.90 after 8 hours and remained stable until the operation. IOP in the control group was 31.3±3.37. It decreased to 26.00±3.45 and 22.8±1.73 after 1 and 2 hours respectively and remained at 20.29±1.20 after 4 hours and 22.74±1.42 after 8 hours.

Conclusion: According to the investigation, Brimoptic showed prompt, effective and stabile decrease in intraocular pressure in glaucoma patients during preoperative period.

DISTRIBUTION OF OCULAR DISEASES AMONG ELDERLY POPULATION OF UZBEKISTAN

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Relevance: Eye diseases are common among all the diseases of human being and comprise more than 258 mln people all around the world. Every year about 246 mln people complain to doctors about the disorder of vision ability.(WHO 2016)

The aim of our research was to analyze distribution of eye diseases which are often met in elderly people in Uzbekistan.

Materials and methods: We have reviewed 150 medical records of patients over 50 years old who were treated in the eye diseases department of the 2nd clinics of Tashkent Medical Academy in 2016.

Results: The average age of patients was 67±8,3 years old. There were 51.33% women and 48.67% men. Distribution according to the region of living was as following: Tashkent city-64%, Tashkent region-20.68%, Surkhandarya region - 4%, Djuzakh region - 2.66%, Kashkadarya region-4.66%, Samarkand region -1.33%, Andijan region - 0.66%, Navoi region -0.66%, Namangan region - 0.66% and Karakalpakstan Republic-0.66%.

Distribution according to the ocular pathology was following: glaucoma-34%, cataract-29.33%, optic nerve atrophy – 13,33%, myopia – 6, 66%, iridocyclitis – 4,66%, pterygium – 2,66%.

We have also explored average expenditure on 1 patient with these pathologies. So for glaucoma average cost for treatment was 1052000 sum, for cataract treatment it consisted 1555000 sum, for optic nerve atrophy - 793000 sum, for myopia-170700 sum, for iridocyclits-662000 sum, pterigium-505000 sum (all the prices for surgical treatment and medications were actual for 11.10.2016).

Conclusion. 1. Most of the patients were from Tashkent and Tashkent region which is explained by geographical location. Then goes Surkhandarya and Kashkadarya regions.

2. As we can see elderly people may have a lot of ocular pathology and it costs much money to treat them and the best way is to perform regular screenings to prevent ocular diseases and for early diagnosis which provides more adequate and successful treatment. Prophilactic medical examinations must be strengthened in Surkhandarya and Kashkadarya regions.

THE IMPROVEMENT OF THERAPY OF PATIENTS WITH SECONDARY CATARACTA AFTER LASER CAPSULOTOMY

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Introduction. The technique of facoemulcification is used from 90s and it resulted in development of intraocular correction. Every year over 2 million of different methods of cataract extraction are performed around the world. Secondary cataract is one of the most common complications of cataract extraction and it leads to recurrence of blurred vision. Recently, according to Balashevich and Tahtayev, the blurring of posterior capsule of lens has become less frequent. However, it is still an actual problem.

The aim of the study. To evaluate the clinical and functional effectiveness of "Vobenzym" in the therapy and prevention of complications after laser capsulotomy in patients with secondary cataract.

Materials and methods. We performed the therapy on 11 patients with secondary cataract after laser capsulotomy. They study included 7 males and 4 females with the average age of 45 years. We divided all the patients into 2 groups: 1st (control) - 6 patients (4 males and 2 females), 2nd (main) – 5 patients (3 males and 2 females). The patients of the 1st group received "Serrata" by 1 tab. 3 times a day during 1 month; the patients of the 2nd group received "Vobenzym" by 3 tab. 3 times a day during 1 month.

Results: After the therapy 70% of the patients of the 1st group have visual acuity of 0.6 ±0.1, 80% the patients in main group have visual acuity of 0.8 ±0.1. Objective and subjective symptoms decreased. 76% of the patients of the 1st group has shown improvement during biomicroscopy and 83% of the 2nd group has shown these improvements.

Conclusion: It can be said that the use of Vobenzym in patients with secondary cataract after laser capsulotomy is effective.

LABORATORY DIAGNOSTICS AND PROGRESSION CRITERIA OF DIABETIC RETINOPATHY

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Purpose. To study the correlation of clinical manifestations nonproliferative diabetic retinopathy (NDR) from nitric oxide (NO) indicator level and level of oxidative stress in patient's tear fluid.

Materials and methods: We examined 36 patients (69 eyes) with NDR . The average patient age 62,1 ± 1,9 years. Women- 29, men- 7. Patients were divided into 3 groups according with three stages NDR pursuant to Early Treatment Diabetic Retinopathy Study (ETDRS). Patients underwent general eye examination and biochemical tear fluid study.

Results. Researches showed a gradual decrease of NO level by aggravation DR. Thus, if in patients with 1a degree of NDR the NO level statistically decreased by 22.3% ($p<0.001$), then in 1c stage this decrease was by 66.7% ($p<0.001$) relative to standard values and by 57.1% ($p<0.001$) relative with data of patients with 1a degree of NDR. Results of researches showed that level of MDA (malondialdehyde) statistically increases at 2.6; 2.8 and 2.9 times respectively to the stages 1a, 1b, and 1c of NDR relative to standard values. Superoxide dismutase (SOD) and catalase activity progressively reduced by aggravation of pathological process, this shows strengthening of imbalance in POL-AOS system and abatement of natural issues of eye protection level from aggressive effect of hydroperoxides.

Conclusions. Severity level of NDR is directly depended on the NO level in patients' tear fluid. The imbalance in POL-AOS system is correlated by stages and leads to progression of retinopathy.

Clinical and functional diagnostics of "Dry eye" syndrome (DES) which has been developed as a result of adenoviral ophthalmic infections.

THE DEPARTMENT OF OPHTHALMOLOGY OF THE TASHKENT MEDICAL ACADEMY

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The actuality of the theme. Wide-spreading and high-level development of adenoviral ophthalmic infection is a serious problem in ophthalmic practice. In this case, it is not enough to become the reason only prophylactic measures, but distinctiveness of infection way of adenoviral infection and incubation (hidden) period or the first period of the disease without any clinic signs, can cause that. The basic positions of infection are contact way, dirty hands, ophthalmic instruments, a damaged eye drop or eyedroppers and common used things. "Dry eye" syndrome derives from 80% of patients who infected with adenoviral infection. There are 12% of people under 40 and 67% of people under 50 who have "dry eye" syndrome.

Aim. Evaluation of clinical and functional diagnostics of "dry eye" syndrome which has been developed as a result of adenoviral ophthalmic infections.

Investigation paper. In order to accomplish the goal, we've set for ourselves, we've analyzed 14 patients who got "dry eye" syndrome because of an adenoviral ophthalmic infection. Scientific investigation papers were collected in the ophthal-

mology room of the 2nd clinic of the Tashkent Medical Academy. All the patients were analyzed by the main ophthalmology checkups – visiometry, perimetry, ophthalmoscopy, biomicroscopy, tonometry and one of the additional analyses, Schirmer's test were applied. Standard Complex treatment were prescribed to all the patients.

Results. According to the results of inspections 10 days after complex treatment of patients, we observed that lessening foreign body sensation and sense of dryness in eyes for 6 of them (42.8%) and not being complaints for 8 of them (57,1%) which belong to complaints about ''dry eye" syndrome. The results of visiometry, perimetry and tonometry, gave the same results as before treatment. According to analysis of Schirmer's test (mm/5min), we had 15mm (28,5%) for 4 of the patients,10-15mm (50%) for 7 of them and 5-10mm (21,4%) for 3 of them.

Conclusion. According to the results of inspections, Schirmer's test is the easiest objective method to diagnose "dry eye" syndrome and recommend for functional diagnosing.

NEUROLOGY

DYNAMIC INDICATORS OF LEBETOKS TEST IN EXPERIMENTAL INTRACEREBRAL HEMORRHAGE AND HEMISPHERIC ISCHEMIC STROKE

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Purpose and Objectives. Changes in blood's coagulation properties play an important role in the development and progression of stroke. The pockets of decay of brain tissue in stroke result in tissue thromboplasts and other substances with pro-coagulant properties flow to blood causing deep and multi-directional shifts in the hemostatic system. The purpose of the study was to evaluate the state of the calcium-dependent coagulation in experimental intracerebral hemorrhage and hemispheric ischemic stroke in different periods of the disease.

Material and Methods. The experiments were carried out on 250 outbreed male rats weighing 200-240 g. 10 white rats remained intact and were used as a control group. A simulation of the operation was performed in 50 rats which constituted sham-operated group (SO). An experimental model of acute hemispheric ischemic stroke (AHIS) using the method of Gerstein et al. (1996) was carried out in 80 rats, and an experimental model of intracerebral hemorrhage (ICH) by a modified method of Asadullaev et al. (patent № IDP 2001 0814/DF) was carried out in 100 male rats.

Results and Discussions. Showed that the clotting time in intact rats was 28,5±0,86 seconds in average. The calcium – coagulation time in SO and in rats operated 1 hour after the surgery has shortened, indicating the beginning of hypercoagulation process (the results were insignificantly different from those of the control group).

Conclusions. Thus, in accordance with the results in all groups of the rats a violation of the calcium- dependent coagulation was recorded which indicates the development of hypercoagulable process that evolves in response to the surgery and brain injure. The short clotting time showed by the lebetoks test indicates partial provisional activation of factor X and/or II and the failure of physiological activity of anticoagulants.

SLEEP DISTURBANCES IN EPILEPSY

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Actuality: Currently, epilepsy is one of the most common diseases. From 7 to 11% of the population at least once in their life suffer an epileptic seizure. About 20% of the population at least once in their life had an attack similar to epileptic. From 1 to 5% of the population suffer epilepsy. Finally, during a year in 5 persons out of 1000 reappears disease with attacks, which requires differential diagnostics against epilepsy, and one of the diseases will be epilepsy. A third of all patients have only nightly epileptic seizures. However, there is currently insufficient data on sleep disturbances in epilepsy.

Objective: To investigate sleep disturbances, to study insomnia, sleep apnea, restless legs and narcolepsy syndromes often developed in patients with epilepsy.

Method: This study was conducted in the form of a survey and observation. To do

this, we chose a questionnaire developed by scientists at Emory University, Georgia, the USA. This questionnaire includes 34 signs which identify 4 basic syndromes of sleep disturbances in the subjects. We also had a video EEG monitoring, with a minimum duration of 60-80 minutes (one sleep cycle has a duration of 60-80 min, respectively), to determine the frequency of sleep disturbances with different localizations of focus.

Materials: The study group consisted of males (18) and females (12) aged 18 to 42 with a diagnosis of symptomatic epilepsy. The control group consisted of healthy males (16) and females (14) aged 18 to 45.

Results: Of the 30 patients with symptomatic epilepsy, only in 60% (18 people) insomnia syndrome was found, in 70% (21 people) was found sleep apnea syndrome, in 20% (6 people) was found restless legs syndrome and in 23.3% was found narcolepsy. Of the 30 healthy people, only in 20% (6 people) was found insomnia syndrome and in 3.3% (1 person) was found sleep apnea syndrome, none of the healthy subjects had restless legs syndrome and 3.3% (1 pers.) had narcolepsy. Video monitored EEG study has found that in patients with the localization of focus in the temporal section of the brain, sleep disturbance frequency is higher as compared with other parts of the brain.

Conclusion: For patients with symptomatic epilepsy, these 4 features (syndromes: insomnia, obstructive sleep apnea, restless legs and narcolepsy) do have increased rates in comparison with healthy people.

The most common ones are insomnia and obstructive sleep apnea

The frequency of sleep disorders is correlated with the localization of epileptic focus and most of all, develops if the localization of focus is in the temporal parts of the brain.

Sleep disturbances and seizures affect each other like a vicious circle; that is, various sleep disturbances lead to an increased risk of seizures and epileptic seizures lead to increased sleep disturbances.

PREDICTORS OF EPILEPSY AND THEIR VALUE IN PROGNOSTICATING OF THE DISEASE

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Tashkent medical academy

Purpose: Essence of study early predictors in development of epilepsy in adults.

Material and methods. We have observed 100 patients with epilepsy (average 33,44±12,55 years). Among them, 54 were male (54%), 46 women (46%). The patients were divided into two groups: The main group included patients with idiopathic epilepsy (IE), n = 42 (42%), and on the comparison group included patients with symptomatic epilepsy (SE) n = 58 (58%).

We have carefully collected all the patients anamnesis the transferred diseases in early childhood performed clinical and neurological and neuroimaging investigations (MRI, MSCT,EEG).

For the determination of gravity of seizures performed the test: NHS3 (National Hospital Seizure Severity Scale).

Results. Identified the following risk factors in IE n=42 : Febrile seizures 18 (48%), Prenatal pathology 2 (4,76%), Intranatal cranio cerebral injury 6 (14,28%), Infectious diseases of the CNS 2 (4,76%), Congenital malformations. AVM 2 (4,76%), Postnatal CNS injury 1 (2,38%), Other hereditary diseases 1 (2,38%), Abnormalities of the development of CNS 4 (9,52%), Risk factors are not determined 6 (14,28%).

Identified the following risk factors in SE n=42 : Febrile seizures 14 (24,13%), Prenatal pathology 4 (4,89%), Intranatal cranio cerebral injury 6 (10,34%), Infectious diseases of the CNS 6 (10,34%), Congenital malformations. AVM 1 (2,38%), Postnatal CNS injury 6 (4,89%), Other hereditary diseases 2 (3,44%), Abnormalities of the development of CNS 2 (3,44%), Risk factors are not determined 18 (31,02%)(P <0.01).

In carrying out tests to determine of gravity of epileptic seizures: NHS3 (National Hospital Seizure Severity Scale): The patients were divided into two groups: The first group which are not determined risk factors, the second group: having risk factors. Following results are obtained: 1 group collected from 12 to 19 points, 2-group from 20 to 27 points (P <0.01).

Conclusions: Among the risk factors prevailed febrile seizures (FS) 56.13%. As FS has hereditary character. As genetic predisposition plays a major role in the development of epilepsy. Patients with RF severe course of seizures than wit.

PSYCHO - EMOTIONAL AND BEHAVIORAL DISORDERS IN PATIENTS WITH TEMPORAL LOBE EPILEPSY

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Introduction: Amygdale - hippocampal part of the temporal lobe is a structural part of the limbic system, which plays a crucial role in the regulation of vegetative and psycho-emotional brain function. To investigate the value of psycho-emotional and behavioral disorders in amygdale- hippocampal epilepsy.

Material and Methods: We examined 42 patients, including 19 men and 23 women, aged 16-30, the average duration of seizures lasting from 4 to 30 years. A special attention was paid to the memory impairment, attention, autonomic dysfunction, psycho-emotional disorder and medical history. To identify memory loss, attention deficit and anxiety disorder criteria were used ICD-10 and to assess the degree of severity of the tests were applied: memorizing 10 words, Bourdon corrector, Schulte table and the scale of the Spielberger-Hanin.

Results: From the results in 35 of 42 (85%) patients revealed that there was a decrease of memory and attention disorders, motor automatisms in 25 of 42 (60%), autonomic aura – abdominalgia in 23 of 42 (54.7%). With regard to the degree of objectification of anxiety, the high level of trait anxiety was found in 26 of 42 (62.0%), high level of situational anxiety - in 19 of 42 (45.2%) patients and 28 of 42 (66.6%) patients had olfactory and gustatory hallucinations (P <0.01). However, one of the clearest manifestations is that most of the patients suffered from psycho-emotional and behavioral disorders.

Conclusions: Psycho-emotional, behavioral and psycho-vegetative disorders in patients with amygdala-hippocampal epilepsy is very different from other types of epilepsy, thanks to these changes, we can assume and predict this epilepsy without instrumental diagnostics.

EFFICIENCYOF CAROTID ENDARTERECTOMY IN VASCULAR PARKINSONISM IN PATIENTS WITH STENOTIC CAROTID ARTERY DISEASE

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Objective: to evaluate the effectiveness of carotid endarterectomy (CEA) in patients with vascular parkinsonism (VP) with stenotic lesions of carotid arteries.

Material and methods: There were operated 40 patients with VP, including 27 men (67.5%) and 13 women (32.5%), who had double-sided hemodynamically significant carotid stenosis. The age of patients ranged from 58 to 72 years (average age was 61,5±4,8). On the background of anti-parkinsonian therapy it was produced a bilateral CEA to all patients. Transcranial duplex scanning was performed before CEA and 6 months after it. The efficiency of CEA was evaluated by using of:Mini Mental State Examination, (MMSE), Barnes Scale (BARS), overall clinical assessment scale (Clinical Global Impression Scale - CGI) and extrapyramidal symptoms rating scale (ESRS).

Results: In most patients after CEA it was noted increased efficiency. The most significant changes were: improved memory, significantly decreased perseverations and contaminations ($p < 0.05$). Positive dynamics ($p > 0.05$) was found according to MMSE,BARS,CGI and ESRS scales. It should be noted that after CEA the levodopa dose (in complex treatment) decreased on 125-250 mg/day while the severity of dyskinesia decreased in 47.5% of patients.

Conclusions: On the background of anti-parkinsonian therapy carotid endarterectomy has a positive dynamics in patients with SP and improves quality of life. CEA allowed to reduce the dose of levodopa and decrease severity of dyskinesia in most patients at the same time.

PROGRESSIVE MYOCLONUS EPILEPSY IN UZBEKISTAN: A DIFFERENTIAL DIAGNOSIS FROM JUVENILE CHOREA HUNTINGTON DISEASE

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Huntington disease **(**HD) is a neurodegenerative, dominantly inherited genetic disorder caused by the expansion of a CAG triplet repeat (> 36 CAG) of the Huntington gene on chromosome 4p16.3. The juvenile variant of the disorder is rare (5 to 7%) and shows a phenotype with myoclonic jerks, seizures, behavioral disturbances, ataxia, dystonia, and parkinsonism. Choreatic movements are rare.

We describe a case of a female patient from Uzbekistan who was diagnosed with HD at the age of 10 years. The father's positive HD was not mentioned on presentation owing to the daughter's negative genetic results. Progressive myoclonic epilepsy had been suspected in Uzbekistan because of epilepsy and progressive myoclonic jerks in the presence of only mild and unspecific MRI changes. Valproic acid and levetiracetam led to amelioration of the epilepsy. However, the emergence and slow progression of other symptoms such as dysarthria, saccadic eye movements, tremors, and ataxia leading to a loss of free ambulation were also observed.

Owing to the suggestive clinical phenotype, it was decided to repeat the molecular genetic assessment to verify or exclude HD. This showed a triple nucleotide repeat expansion of 112 CAG repeats and confirmed the diagnosis, which was also double-checked at a second laboratory. At the same time, all relevant differential diagnoses with the leading symptom myoclonic epilepsy were considered and relevant diagnostic steps taken.

This case report demonstrates that a positive diagnosis in a father is an important hint regarding suspicion of juvenile HD in his child. Should a PCR-based test produce a negative result, southern-blot analysis is a valuable alternative method.

COMPUTER TOMOGRAPHY AND MAGNETIC RESONANCE IMAGINING FEATURES IN PATIENTS WITH JUVENILE HUNTINGTON DISEASE IN UZBEKISTAN

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We aimed to describe the clinical and radiologic manifestations of juvenile Huntington disease and to determine whether adult imaging criteria for Huntington disease are helpful for pediatric patients.

Six patients (3 to 18 years of age; mean age, 9.8 +/- 5.6 years; 3 female, 3 male) with juvenile Huntington disease were studied with CT (n = 6) and/or MRI (n = 3). CT and MRI studies were evaluated for frontal horn distance/intercaudate distance and bicaudate ratios, which were compared with those of 24 age-matched healthy children and 12 age-matched patients with Leigh (n = 9) or Wilson (n = 3) disease.

Atrophy of the caudate nuclei was identified in all Huntington patients. The frontal horn distance/intercaudate distance (1.64 +/- 0.39) and bicaudate (0.205 +/- 0.060) ratios of the patients with juvenile Huntington disease were found to be significantly different from those of healthy children and that of those patients with Leigh/Wilson disease. The 3 patients with Huntington disease who underwent MR evaluation were noted to have increased proton density- and T2-weighted signal in the caudate nuclei and putamina.

As in adult patients, the use of frontal horn distance/intercaudate distance and bicaudate ratios are helpful for the diagnosis of Huntington disease in pediatric patients. On MRI, increased proton density- and T2-weighted signal in the atrophic caudate nuclei and putamina are additional features of juvenile Huntington disease.

PSYCHOEMOTIONAL DISORDERS AT DISEASES OF THE GASTROINTESTINAL TRACT

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Actuality: Diseases of the digestive tract are on the first place among all diseases of the therapeutic unit. Among them, a common condition - chronic intestinal diseases. It is known that, the syndrome of chronic diarrhea is more common in women aged 20-40 years. The disease occurs with pain and diarrhea and also psycho-emotional disorders, to which patients often complain.

Purpose: to examine the psycho-emotional disorders at diseases of the gastrointestinal tract.

Materials and methods: We examined 30 patients with the syndrome of chronic diarrhea. The average age of patients composes 25±6.5 years, from them 12 men and 18 women. It was made common clinical diagnostic methods: the objective status, psychological status, a general analysis of blood and urine,esophagogastroduodenoscopy, colonoscopy, abdominal ultrasound. Psychoemotional disorders were examined by determining the scale of depression by Sung, level of anxiety by Spielberger Hanin.

Results: This study showed that by scale Sung at 14 patients occurred an average degree of depression (66%), the overall score was 72±4,5; severe degree was observed at 4 (22%) patients, the overall score was 63±2,5; the remaining patients had subclinical depression (12%). In the analysis of the results of Spielberger Hanin's test we noted that the personal anxiety occurred at 7 patients (23%) (overall score of 33±2,4), while situational anxiety was at normal degree (average score of 15±3,5). The high level of personal and situational anxiety noted only 15 patients (50%). The low level of personal anxiety and normal reactions to situational anxiety observed in 8 patients (27). When we was comparing the results of two tests the patients who noted a high level of situational and personal anxiety, observed subclinical depression (p≥0,05).

Conclusion: based on the results of the study, it can be concluded, that the patients with syndrome of chronic diarrhea occurs psycho-emotional disorders, with this group of patients is more suitable manifestation of personal and situational anxiety with subclinical depression.

FEATURES OF EPILEPSY AND CEREBRAL PALSY IN CHILDREN

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Objectives: Identifying features of epilepsy in children with cerebral palsy and optimization of diagnostics based on clinical electroencephalographic studies.

Methods: A total of 70 patients under 17 years with various forms of cerebral palsy and epilepsy, who were in the neurological department of Tashkent Medical Academy Hospital. All patients underwent a clinical study, electroencephalography, including video-EEG monitoring, computed tomography (CT) or magnetic resonance imaging (MRI).

Results: The group of children (70 patients) with cerebral palsy and epilepsy of all children with epilepsy accounted for 7.3%. The most common epilepsy in children with cerebral palsy was detected in age from 9 months to 3 years - 31.4% (22 children). At the age of 5 to 7 years it turned 22.9% (16), from 7 to 10 years - 20% (14), from 10 to 15 years - 14.2% (10 children) and teenagers from 14 to 17 years - 11.5% (8). With a little epilepsy prevalence was recorded in boys with cerebral palsy - 50.8%. Among all patients with cerebral palsy revealed a high incidence of epilepsy with spastic forms (double hemiplegia, spastic diplegia) to 69.7%. In children with hemiplegia and found 18.8% with other forms of cerebral palsy (atonic-astatic, hyperkinetic, mixed) - 11.5%. There were prevailed myoclonic seizures, tonic axial symmetric tonic spasms, multifocal, secondary generalized seizures in infants and early childhood.

Conclusions: Diagnostics optimization taking into account features of epilepsy in children with cerebral palsy has led to the achievement of rapid detection of seizures in 72.5% of patients, which made it possible to provide the rehabilitative treatment of children with cerebral palsy.

PERIPHERAL NEUROPATHY AND DEPRESSIVE SYMPTOMS IN PATIENTS WITH DIABETES

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Objective: To examine the association between severity of diabetic peripheral neuropathy and depressive symptoms and investigated the potential mediators of this association.

Materials and methods: The Hospital Anxiety and Depression Scale (HADS) was used to assess depressive symptoms in 492 patients (mean age 62 years; 70% male; 72% type 2 diabetic) with diabetic neuropathy diagnosed by the Neuropathy Disability Score (NDS) and the Vibration Perception Threshold (VPT). Diabetic neuropathy symptoms, activities of daily living (ADLs), and social self-perception were measured by the neuropathy and foot ulcer-specific quality-of-life instrument, NeuroQoL; perceptions of diabetic neuropathy symptom unpredictability and the lack of effective treatment were assessed by the revised Illness Perception Questionnaire.

Results: Both the NDS and VPT were significantly associated with the HADS after controlling for demographic and disease variables. Although diabetic neuropathy symptoms mediated this association, with unsteadiness being most strongly associated with HADS, the relationship between foot ulceration and depression was non-significant. The association between diabetic neuropathy symptoms and HADS was partially mediated by two sets of psychosocial variables: 1) perceptions of diabetic neuropathy symptom unpredictability and the lack of treatment control and 2) restrictions in ADLs and changes in social self-perception.

Conclusions: These findings establish the association between diabetic neuropathy and depressive symptoms and identify potential targets for interventions to alleviate depressive symptoms in persons affected by diabetic peripheral neuropathy.

ENTEROVIRUSES NEUROINFECTIONS IN CHILDREN IN UZBEKISTAN

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Objectives: We aimed to study epidemiological and virological surveillance of enteroviruses in children with neuroinfections in Tashkent, Uzbekistan.

Methods: The virological and bacteriological laboratory of Tashkent Medical Academy Hospital provides a CSF analysis, serum and faeces of children with neuroinfections with different etiology, in order to determine enterovirus antigen by an express method, based on a modification of the complement-fixation.

Results: Long-term monitoring enterovirus causing neuroinfections children in Tashkent revealed shifts strains with the creation of landscape map, highlights the emergence of 5 dominant virus cycles and determine the value of their virulence in epidemic process. The beginning of each cycle was characterized by the emergence of a new dominant virus of low virulence that causes an increased incidence of serous

meningitis occurring mainly in the medium and the prevalence of severe enterovirus detection of antigen in the blood of the patient. 2-3 years from the start of a new cycle of increased virulence of the dominant virus enterovirus antigen detection in the cerebrospinal fluid, increased registration of a heavy flow of serous meningitis and the percentage of detection of other clinical entities with nervous system. Currently observed changes in the epidemiological features of serous meningitis offset peak incidence in the autumn and seasonality prolongation until January.

Conclusions: The peculiarity of the clinical manifestations of serous enteroviral meningitis in children is multi-organ lesions with the severity of inflammation in the central nervous system and involvement in the infectious process of the cardiovascular system.

PROFILE OF INTERHEMISHPERE ASSIMETRY NEUROBEHAVIOR REACTIONS IN INSULT OF FRONTAL PART OF BRAIN

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Objective: Purpose of our work was observe the specific disturbance of cognitive reactions, and also profile of hemisphere asymmetry in insult of front brain artery in the pool.

Materials and methods: 26 patients with disorders of blood supply by ischemic type in brain artery anterior were observed.

Results: There was revealed that the fluency of speech suffers inlesion of left frontal part of brain, whilst disorders of non-verbal speech distinguished in impairment of right part. In left frontal part lesions fluency of speech disturbed and perseveration of words appeared. Because of high quantity of information the patients can not choose the main information, purposeful actions replaced with perseveration. Observing the choose reaction showed disorders of performing rhythm and ordinary and complicated in lesion of right frontal part. According to the results of MMSE revealed that the more reducing degree of intellect due to decreased word skill occurs in lesion of left frontal part then right one. Tasks for identifying ability remembering visual- dimensional shapes revealed in lesion of right frontal par. In 12 patients in spite of sight of lesion was revealed multiply repeating the same actions or words. Several decline of memory reveled due to disorders of mental observation , which is required for remembering and performing.

Conclusion: The study showed that different lesion of right and left frontal part of the brain demonstrating interhemishpere asimmetry cognitive disorders which is not specific for lesion any sight of frontal part.

ADMINISTRATION OF ONABOTULINUMTOXINA A (DISPORT) AS PRINCIPAL NEW APPROACH TO THERAPY OF COMPLICATED FORMS OF MIGRAINE

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Relevance: By World Health Organization migraine is included in the list of 19

chronic diseases as the most disturbing social adaptation of patients through. Patients with migraine suffer for years, trying to relief the state by using the existing traditional analgesic agents, despite its side-effects, and yet, do not get the desired effect. Maladjustment, leading to the sharp decline in performance and isolating the patient from society requires a quest of innovative, effective and analgesic drugs. One of the fundamentally new directions among therapeutic methods is the use of botulinum toxin type A (BTA). Botulinum toxin is a protein that is a potential neurotoxin which is produced by anaerobic bacteria Clostridium botulinum. For headache relief and treatment in complicated forms of migraine (migraine status and chronic migraine) has been administered the drug -Dysport in m. Processus, bilaterally in mm. Frontalis, Corrugator supercilii, Temporalis, Occipitalis.

Methods: Injections were performed as described in "fixed points" depending on the intensity and localization of the headache. 42 patientswere selected: 23 with chronic migraine and 19 with migraine status.The intensity of pain before and after the use of a neurotoxin Dysport was assessed by subjective data, duration of pain, frequency of headaches and a 5-point verbal rating scale, which is based on the semantic content.

Results: According to the verbal rating scale patients with chronic migraine headache was estimated on average about 2-3 points and at the time of the attack - 4 points while migraine status. Patients in 1- group differed by constant head heaviness and periodically strengthens hemicrania attacks, decreased ability to work, marked emotional instability, insomnia and duration of headaches lasted up to 1 week. Patients of the second group mentioned suffering from pain during attack, patients could not lift the head from the pillow, photophobia and phonophobia, the attacks lasted up to 3 days, appeared maladjustment to the environment, the drowsiness was observed after attack. After dysport administration the pain has been removed within 7-10 minutes right after the injection and the effect was held for an average 6-7 months. In patients with chronic migraine the effect lasted up to 3-4 months, in patients with migraine stroke up to 7-8 months. It was noted an improvement in working-capacity and relative stabilization of the emotional background. According to the verbal rating scale the intensity of headaches in attack period after Dysport injections was evaluated in the 1-group as 0-1 score, in the 2nd group as 1-2 points, which stopped after sleep or conventional antianginal drugs.

Conclusion: Thus, our own experience shows that treatment with BTA was well tolerated by patients. For practitioners who regularly face with the problem of chronic headache, the drug of BTA is a new valuable drug for the treatment of patients with severe pain syndromes.

MANAGING EPILEPSY IN WOMEN

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Purpose of review: Caring for a woman with epilepsy requires familiarity with the implications of antiepileptic drugs (AEDs) for pregnancy and contraception as well as an understanding of the effects of female hormones on epilepsy.

Recent findings: AED pregnancy registries and prospective studies of cognitive development continue to confirm that valproate poses a significantly increased risk

of structural and cognitive teratogenesis. In contrast, data thus far suggest that lamotrigine and levetiracetam are associated with a relatively low risk for both anatomic and developmental adverse effects, although further studies are needed for these and other AEDs. The intrauterine device is a good contraceptive option for many women with epilepsy as it is highly effective and not subject to the drug-drug interactions seen between hormonal contraception and many AEDs. Hormonal-sensitive seizures are common among women with epilepsy; however, highly effective treatments for refractory catamenial seizures are limited.

Summary: Women with epilepsy should be counseled early and regularly about reproductive health as it relates to epilepsy. AED selection for women of childbearing age should take future pregnancies and contraceptive needs into consideration.

MANAGEMENT OF HYDROCEPHALUS IN POSTERIOR CRANIAL FOSSA TUMORS

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Introduction: Treatment of hydrocephalus in posterior cranial fossa tumors in children is still a matter of controversy. The child with hydrocephalus in a primary brain tumor may be considered to have two distinctly different diseases which complicate one another and contribute to the complex picture of increasing intracranial pressure (ICP): 1) tumor itself, and 2) hydrocephalus . Changes in cerebral blood flow that result from an increase in ICP and ventricular dilatation must also be considered in the pathogenesis of disease. Here we present the result of our experience in the management of hydrocephalic posterior fossa tumors in children.

Materials and methods: Our observation of all infants and children with posterior cranial fossa tumor that were treated in Republican Center of Neurosurgery, Tashkent, during the period of 2015-2017 were reviewed. Descriptive analysis was performed to determine the frequency of shunting procedures and postoperative complications in different groups. Comparison between the rates of postoperative complications in different shunting groups were analyzed The outcome variables used in this study were postoperative complications including CSF leak, septic meningitis, persistent hydrocephalus and pseudomeningocele.

Results. A total number of 108 children with posterior cranial fossa tumors were studied. Ages ranged from 1 year to 18 years at the time of diagnosis. male: female (M:F) ratio was 1.5. The tumors composed of 48 cerebellar astrocytoma (CA), 29 medulloblastoma (MB), 14 brainstem glioma (BSG), 12 ependymoma, 2 cerebello-pontine angle (CPA) tumors, 2 cerebellar dermoid cysts and 1 cerebellar cavernous hemangioma.

Of 99 hydrocephalic patients, 81 underwent preoperative shunting and 18 did not. Of these preoperative shunting procedures, 77 were ventriculo-peritoneal (VP) and 4 were ventriculoatrial (VA) shunts. Of those 18 patients who did not have preoperative shunting, 13 needed preoperative external ventricular drainage (EVD) and 5 did not. Five cases diagnosed to suffer from hydrocephalus prior to definitive surgery did not undergo preoperative shunting or EVD. Corticosteroids were administered at least a week preoperatively. Two of 5 cases who had CA and did not undergo any shunting procedure met major postoperative morbidity (hemorrhage in the operative bedroom, CFS leak, septic meningitis). Another CA patient

had a multitude of postoperative complications and a resultant delayed persistent hydrocephalus in the follow-up period, which needed a VP shunt. Two patients (one CA and one BSG) received prophylactic postoperative shunting prior to radiotherapy to hinder a probable future hydrocephalus. We also determined the percentage of CSF leak, septic meningitis, persistent hydrocephalus and pseudomeningocele in the postoperative period in different shunting groups. Persistent hydrocephalus or pseudomeningocele in the preoperative shunting group was significantly lower that the other two categories.

Conclusion: Insertion of VP shunt before operation considerably decrease amount of post operative complications and the time of rehabilitation of patient.

EPILEPSY DURING PREGNANCY

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Background: On average, female patients with epilepsy have 0.9 children, which is below the birth rate of healthy women. One reason is insufficient counselling.

Objectives: To summarize the current data relevant to counselling pregnant women with epilepsy.

Materials and methods: Discussion of research and recommendations concerning seizure control during pregnancy, pregnancy and birth complications, congenital malformations, and breastfeeding.

Results: Changes in seizure frequency during pregnancy are variable and partly due to changes in the serum concentrations of antiepileptic drugs. Epilepsy patients have a slightly higher risk for some pregnancy and birth complications including spontaneous abortion, pre- and postpartum bleeding, induction of labour, and caesarean section. In particular, the administration of valproic acid can lead to congenital malformations and a lower IQ of the child. Folic acid seems to have a protective effect. Data concerning breastfeeding are insufficient.

Conclusions: If possible, epilepsy patients should be treated with a low-dose monotherapy during pregnancy and valproic acid should be avoided. Treatment with lamotrigine requires frequent control of serum concentration. Supplementary folic acid (5 mg daily dose) is recommended.

TRENDS AND PROGNOSIS OF THE INCIDENCE OF CEREBRAL STROKES IN THE WESTERN REGIONS OF UZBEKISTAN

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Objective: The study of the dynamics and prognosis of the incidence of cerebral strokes in the western regions of Uzbekistan.

Materials and Methods: In Uzbekistan, every year 60,000 new cases of stroke is registered. There was conducted Statistics of 4100 patients with cerebral stroke of age from 55 to 75 years (mean age was 65±1.7) in the city of Nukus over the last 4 years (2012- 2015). Of them 2052 were men and women - 2048. There were performed studies by the least quadrants using the correlation and regression analysis. Identification of the basic features of cerebral stroke (CS) was based on a study of

the statistics of the National NTSEMP Nukus, hospitals and clinics in Nukus.

Results and Discussion: The incidence of CS for 4 years varies widely from 0.98 to 1.9 per 1000 population. In general, the level of incidence of CS in 2012 increased by almost 2-fold (P <0,001).

If in 2005 the figure was 0.98 per 1000 population, then in 2015 - 1.9. However, there is no stable growth of this indicator. The changes of the incidence of CS have a wavy character. When comparing the levels aligned in the dynamics there is revealed a clear pattern of increasing incidence from 2005 to 2015, amounting to 0.78 for men - 1.7, and for women 1.09 - 2.07, just 0.98 and 1.9, respectively. Thus, in our study in 2020 predicted a slight increase in cases of stroke in general among the population, as men and women separately, and will be, respectively, 2.09; 1.95 and 3.15 per 1000 population.

Conclusion: Thus, the data of regression analysis show the expected steady increase in the incidence of brain stroke among both men and women, which is of great socio - economic importance. In addition, when the occurrence of cerebral stroke in the western regions of Uzbekistan holds the Aral Sea problem and arterial hypertension arise. The data indicates the need in depth study and evaluation of factors and reasons affecting the development of cerebral strokes and their complications.

RANDOMIZE STUDY OF THE COGNITIVE IMPAIRMENT IN PATIENTS WITH RHEUMATOID ARTHRITIS: RELATIONSHIP OF THE COGNITIVE DEFICIENCY WITH THE DURATION OF DISEASE AND WITH AGE OF THE PATIENTS

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Objective. We aimed to study cognitive impairments, its relationship with duration of disease and age of patients with rheumatoid arthritis.

Material and methods. The Clinical research was carried out in the department of rheumatology of the first clinic of Tashkent Medical Academy. We studied 50 patients with RA aged 18-65 years (mean age 48 ± 1,6 years), of them 36 women and 14 men, 71.1% and 28.9% respectively. Cognitive functions were tested using the Mini-Mental State Examination (MMSE).

Results. Patients aged 30-50 years were the most common of all patients we studied. The duration of the disease lasts from 1.5 months to 25 years. The average duration of the disease is 10.5 years. We studied cognitive function of patients by MMSE scale. The mean MMSE scale was 25,9. Mild cognitive disorders were the highest in 21 patients (42%), whereas in 12 patients (24%) we found the mild dementia, by the way in 17 patients (34%) cognitive deficiency wasn't found. Depending on the duration of RA (<2 years - > 20 years), MMSE scale decreased from 28.3 to 25 (P <0,001). Depending on the age of the RA (<30 - > 65) MMSE scale decreased from 28.4 to 26 (P <0,001).

Conclusions. We concluded that cognitive deficiency is common in patients with RA. The severity of cognitive impairment is higher than the RA is longer and the age of the patients greater.

FEATURES OF C3435T MDR1 GENE POLYMORPHISM IN CHRONIC MYELOID LEUKEMIA

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Actuality. According to numerous studies, increase in the gene expression level of MDR-1 and its protein product Pgp-170 is associated with a high risk of cancerogenic potential. MDR-1 gene is expressed on the cells of adrenal gland, liver, kidney, intestine, hematopoietic stem cells as well as tumor cells derived from the tissues. A series of meta-analyses suggest that the presence of mutations in this gene is associated with increased risk of neoplastic processes.

Purpose of the study. To evaluate the prognostic value of C3435T polymorphism of MDR1 gene for evaluating risk of mutant clone generation and development of chronic myeloid leukemia (CML).

Materials and methods. The study included 109 patients with CML in the Research Institute of Hematology and Blood Transfusion. The diagnosis of CML was verified in accordance with the International Nomenclature (ISCN). All patients included in the study received therapy including tyrosine kinase inhibitor of BCR-ABL – "Gleevec" under the GIPAP program, as recommended by the ELN, and were in clinical and cytogenetic remission. PCR with standardized real-time was performed on a thermocycler Rotor-Gene 6000 using "Quantum AmpliSens Leukemia M-bcr-FRT" reagent kit. The control group was composed of 86 apparently healthy individuals. DNA was isolated from peripheral blood using Ribo-sorb kit. The concentration and purity of the isolated DNA was determined on NanoDrop 2000. Analysis of the polymorphic locus C3435T MDR1 gene performed on a programmable thermal cycler, using the branded "Liteh" test systems in accordance with the manufacturer's instructions. Statistical analysis of the results was performed using "OpenEpi 2009, Version 2.3" statistical software.

Results. We investigated the distribution of C3435T MDR1 gene polymorphism by PCR method. The frequency of C and T alleles in the test and control groups was 48.6 / 51.4 vs. 62.8 / 37.2% respectively. Differences in these alleles in the examined groups were statistically significant ($\chi 2 = 7.8$; $P = 0.005$; OR = 1.8; 95% CI 1.186, 2.68). Distribution of genotypes of the gene was in turn as follows: wild version of the C / C significantly prevailed in the control group 39.5 / 25.7% in the group of patients, ($\chi 2 = 4.2$; $P = 0.04$; OR = 0.5; 95% CI 0.2874, 0.9725). The heterozygous genotype C / T, on the contrary, was slightly more common among the CML patients than in the control group – 46.5 / 45.96%. ($X2 = 0.01$; $P = 0.9$; OR = 1.0; 95% CI 0.5528, 1.718.). At the same homozygous mutant genotype T / T was detected in 28.4% of patients with CML, and T / T in the control group was detected in 13.9%. As can be seen from the above, carriage of homozygous mutant genotype T / T leads to statistically significant increase in the formation of CML for more than twofold ($\chi 2 = 5.9$; $p = 0.01$; OR = 2.4; 95% CI 1.171, 5.128).

Conclusion. We found a statistically significant association between carriage of the mutant genotype T / T polymorphism of MDR1 gene in patients with CML. The risk of the disease increases significantly by 2.4. At the same time, total carriage of

unfavorable genotype C / T + T / T also significantly increases the risk of CML development by 1.9 (OR = 1.9, $\chi 2$ = 5.9;.P = 0.01).

PERCEPTION INPUTS ALTERATION IN CORTICOBASAL DEGENERATION

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Bakground: Patients with corticobasal degeneration (CBD) have well known difficulties in praxis and may experience alien limb phenomena (ALP). While cases of alien limb syndrome (ALS) with vascular or surgical aetiologies have received much attention, less is understood about ALS in CBD despite this being a diagnostic criterion.

Objectives: To investigate the roles of visual and tactile information in a dyspraxic patient with corticobasal degeneration (CBD) who showed dramatic facilitation in miming the use of a tool or object when he was given a tool to manipulate; and to study the nature of the praxic and neuropsychological deficits in CBD.

Materials and methods: The research was conducted in medical school of Valencia (Cardenal Herrera).We have studied the cases of 30 patients with CBD and 25 with the closely related tauopathy progressive supranuclear palsy (PSP) at a specialist neurology clinic. Consultations included a structured examination of praxis and 14 questions designed to elicit symptoms of ALS. General neuropsychological evaluation focused on constructional and visuospatial abilities, calculation, verbal fluency, episodic and semantic memory, plus spelling and writing because impairments in this domain were presenting complaints. Four experiments assessed the roles of visual and tactile information in the facilitation of motor performance by tools. Experiment №1 evaluated the patient's performance of six limb transitive actions under six conditions: after he described the relevant tool from memory, after he was shown a line drawing of the tool, after he was shown a real exemplar of the tool, after he watched the experimenter perform the action, while he was holding the tool, and immediately after he had performed the action with the tool but with the tool removed from his grasp. Experiment №2 evaluated the use of the same six tools when the patient had tactile but no visual information (while he was blindfolded). Experiments 3 and 4 assessed performance of actions appropriate to the same six tools when the patient had either neutral or inappropriate tactile feedback—that is, while he was holding a non-tool object or a different tool.

Results: Symptoms of ALS are common in CBD, but do not occur in PSP. Our results cast doubt on the assumption that ALS in CBD is a manifestation of severe apraxia. Miming of tool use was not facilitated by visual input; moreover, lack of visual information in the blindfolded condition did not reduce performance. The principal positive finding was a dramatic facilitation of the patient's ability to demonstrate object use when he was holding either the appropriate tool or a neutral object. Tools inappropriate to the requested action produced involuntary performance of the stimulus relevant action. 83% of CBD patients reported at least one possible ALP, 57% reported more than four. Only one PSP patient reported any ALP. Commonly reported ALP included spontaneous limb levitation (50%), the sense that the patient's hand did not belong to them (50%), and reaching for objects against the patient's will (30%). CBD patients with ALS rarely experienced a delusion of external control (17%). Importantly, no correlation was

found between limb praxis and alien limb questionnaire scores among CBD patients.

Conclusion: Tactile stimulation was paramount in the facilitation of motor performance in tool use by this patient with CBD. This outcome suggests that tactile information should be included in models which hypothesise modality specific inputs to the action production system.

ABNORMALITIES OF OPTOKINETIC NYSTAGMUS IN PROGRESSIVE SUPRANUCLEAR PALSY

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Objectives: To measure vertical and horizontal responses to optokinetic (OK) stimulation and investigate directional abnormalities of quick phases in progressive supranuclear palsy (PSP).

Material 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.

We analysed saccades and OK nystagmus from sixty patients (two women) diagnosed as probable PSP according to NIH Society for PSP criteria, age ranged from 64 to 74 (mean 72,5±0,4, 24male/ 36 female), 15 with Parkinson's disease (PD) (mean age 66±0,7, 10female/5 male, duration of illness 2-14years), and 10 healthy younger controls (mean age 35). Hoehn-Yahr disability score stage was 2. Horizontal and vertical gaze and head rotation were measured using the magnetic search coil technique with six foot field coils (CNC Engineering, Seattle, Washington, USA). The system was 98,5% linear over an operating range of ±20˚, the standard deviation system noise was less than 0,02˚, and crosstalk between vertical and horizontal channels was less than 2,5%. The OK stimuli were generated by a Cambridge Research Systems VSG2/5 visual stimulus generator and projecting using an Epson Powerlite 9100i video projector. The OK stimulus subtended 72˚ horizontally, 60˚ vertically, consisted of black and white stripes, and moved at 10–50˚/s. To avoid aliasing, coil signals were passed through Krohn-Hite Butterworth filters (bandwidth of 150Hz) before digitization at 500Hz with 16 bit resolution.

Results: All PSP patients showed slowed voluntary vertical saccades and nystagmus quick phases compared with PD or controls. The values for patients with PD lay within 95% prediction intervals for normal subjects, but those for patients PSP did not. Small, paired, horizontal saccadic intrusions (SWJ) were more frequent and larger in PSP during fixation. Vertical saccades were transiently faster at the time of SWJ and horizontal saccades in PSP. During vertical OK nystagmus, small quick phases were often combined with horizontal SWJ in all subjects; in PSP the vector was closer to horizontal. The average position of gaze shifted in the direction of vertical OK stimulus in PSP patients with preserved slow phase responses but impaired quick phases. Patients with PSP and Consequently, the median angle of movements for patients with PSP was closer to the horizontal than was seen in all controls and most patients with PD. Using equation, we calculated that, for the group of normal subjects, the median angle was 65.4˚(interquartile range, 45.7˚to 77.3˚). For all patients with PSP, the sizes of the angles were significantly different from controls ($p<0.001$), with median values ranging from 8.8˚to 41.2˚. In general, the sizes of

the angles for patients with PD were similar to controls, who had the poorest OK responses (median angles, 21.5˚upward stimulation and 37.7˚downward stimulation), and PD5 for upward stimulation (median angle, 41.7˚)($p<0.001$).

Conclusions: Vertical OK responses in PSP show impaired slow phase responses, and quick phases that are slowed and combined with stimuli to produce an oblique vector. The stimuli facilitate vertical saccades and quick phases in PSP, but it is unclear whether this is an adaptive process or a result of the disease. A large OK stimulus is useful to induce responses that can be quantitatively analysed in patients with limited voluntary range of vertical gaze.

SOME AGE-RELATED CLINICAL AND PATHOGENETIC FEATURES OF HEMORRHAGIC STROKE

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Purpose and Objectives. The widespread introduction of neuroimaging techniques into clinical practice has improved the diagnosis of hemorrhagic stroke (HS), by changing ideas about the frequency, severity and prognosis of cerebral hemorrhage. We examined some of the clinical and pathogenetic features of hemorrhagic stroke due to the age aspect. To systematize the clinical and neuroimaging findings in patients with hemorrhagic stroke.

Material and Methods. 40 patients with HS were involved to the study. Depending on the age, all patients were divided into the following groups: Group 1 - patients young and middle age (30-59let) - 40%, Group 2 - Patients elderly (60 and older) - 60%. Blood pressure on admission, severity of the condition, and expressed focal brain symptoms, the data of CT and MRI studies were studied.

***Results and Discussions*.** In the first group parenchymal type of hemorrhage were observed more frequently (75%), while in the second group - mixed hemorrhages of different localization were observed more frequently (80%). In patients with atherosclerosis, duplex scanning showed hemodynamically insignificant stenosis of brachiocephalic vessels (BCV), with prevalence of pathological deformation BCV. On the other hand, in young patients with HS speech disorders were more frequently (62.5%) than in the second group (50%). HS had subacute onset in 30% of the elderly.

Conclusions. The findings indicate that there are a number of anamnestic, clinical and neuroimaging features depending on the age in patients with hemorrhagic stroke, which must be considered in treating patients with this pathology.

FORECASTING THE RISK OF DEVELOPMENT OF STROKE IN REVERSIBLE CEREBRAL VASOCONSTRICTION SYNDROME (I67.841)

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Introduction. Reversible cerebral vasoconstriction syndrome (RCVS) characterized by acute-onset, severe thunderclap headaches, reversible segmental or multifocal vasoconstriction of cerebral arteries, with or without focal neurological signs

and symptoms. Reversible cerebral vasoconstriction syndrome most often occurs in women. Gender ratio of 1.8: 1 for women and men. RCVS may caused in 38% of cases of brain edema, in 16% cases of TIA, in 4-56% cases of ischemic stroke, in 34% subarachnoid hemorrhage, in 20% cases of intracerebral hemorrhage.

Purpose of the research: Forecasting the risk of development of stroke in patients with reversible cerebral vasoconstriction syndrome and to improve prevention measures.

Material and methods: We analyzed 20 patients with thunderclap headache The average age of patient was 54.7 (40 to 66) years, of them 7 men (35%) and 13 women (65%). All patients examined blood pressure and neurological status, biochemical analysis and radiological methods MRI, MSCT, MRA.

Results: The average duration of the pain was 50,25 minutes (15-180). Also, this pain attack was observed. in 5 patients -10 times, in 4 patients- 6 times, in 5 patients-3, in 4 – 2 times. In 12 patients (60%) occured local neurologic signs which all of them had mild hemiparesis , in 2 patients observed abnormal speech, The patients' average systolic blood pressure was 146.25 mm.Hg (110-170 mm.Hg) and the average diastolic blood pressure of 92 mm.Hg (70-110 mm.Hg). 11 patients examined by MRI and in 1 patient found picture of ischemic stroke. 7 patients checked by MSCT and did not find any pathological changes. In. Also, 2 patients examined by MRA and found multifocal vasoconstriction in the arteries of brain. In 19 patients all symptoms completely were disappeared, in 1 patient remained mild hemiparesis

Conclusion. The results of study shows us, reversible cerebral vasoconstriction syndrome is most common in women as in men; the main complain of patients with thunderclap headaches and MRA is the most effective investigation method; Also, we should be noted that RCVS may be the risk factor of the development of stroke.

STROKE-LIKE CLINICAL COURSE OF BRAIN TUMORS IN UZBEKISTAN

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Objective: We aimed to study the stroke-like clinical course of brain tumors based on clinical and neurological, pathological and imaging studies.

Material and methods: The study included 51 patients (mean age 48 ± 10.6 years, of whom 26 women and 25 men) with atypical (stroke-like) tumors of the brain. In the process of investigation there were used clinical, neurological, neuroimaging (CT, MRI of the brain) and morphological methods.

Results: Clinical and instrumental comparison of patients with Brain tumors (BT) that mimicked the vascular nature of the process showed that the complex of diagnostic complexity caused similar nonspecific symptoms that are observed both in cerebrovascular and neoplastic diseases. Stroke-like BT was characterized by the development of hypertension-dislocation syndrome (depression of consciousness up to coma, the growth of pyramidal insufficiency, stem symptoms (paresis gaze upward, hypertension, bradycardia, pathological types of breathing). 84.3% of the patients enrolled in the state of decompensated and were hospitalized to Neurooncology department for hemodynamic stabilization, relief of respiratory failure, after which they were carried out neuroimaging research methods to further address the issue of tac-

tics of treatment. Clinical symptoms in BT, which occurred in 45% of patients are often imitated strokes as hemorrhagic (74%), and ischemic (26%). Histologically, the tumor tissue was detected in a large number of newly formed blood vessels.

Conclusions: Priority methods of differential diagnosis of stroke and brain tumors are: evaluation of the dynamics of clinical and neurological parameters, CT and MRI of brain.

NEURO - PSYCHOLOGICAL ANALYSIS OF MIGRAIN

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Actuality: Migraine is one of the most common forms of headache. Large prevalence of migraine among young people of working age, socio-economic consequences associated with a reduction in patients' quality of life, and the difficulty of diagnosis and therapy is determined tremendous interest in this issue.

Objective: To investigate the neuro-psychological spectrum of patients with migraine.

Materials and Methods: The study included in the main group of 18 patients with an established diagnosis of migraine. 12 women and 6 men. The average age of 27±6,5. The control group of 8 healthy people. The average age of 25±3,5. To install the stress was used scale of psychological distress PSM-25, as well as to determine the "Evaluation of mental nerve tension".

Results: This study has shown, according to the scale of psychological distress PSM-25 in the study group a high level of stress was observed in 12 (66.7%) patients (average score 127±4,5), the average stress level in 6 (33.4%) (average score 113±8,6). At the same time at this category of patients according the assessment of mental nerve tension excessive "extensive" stress was observed in 13 patients (72.2%) - more than half of the patients; moderate "intensity" of mental stress observed in 3 (16.7%). In comparison with the control group, where the average stress level was observed in 2 (25%) patients; 6 patients a high level of stress resistance. Mental nerve tension was not observed in any of the probationer ($\rho \geq 0,01$).

Conclusion: The main role of the formation of a weak stress in patients with migraine plays mental stress. In turn, the level of stress in the body which arrives may be the determining factor in reducing the quality of life in patients with migraine.

NEURON NETWORKS AND ITS APPLICATION IN MEDICINE

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The work is attempted to highlight the issue of automating the process of medical diagnostics. Today, the standard methods of statistical data cannot adequately explain the numerous life science issues. Thus, neural networks and its application have gained special importance to the automation of scientific research problems. Particularly, in solving biomedical problems, neural network technology became versatile, efficient and quite effective tool. As a system of diagnosis and

treatment of diseases the neural network technology can be considered as an aid for biomedical cycle.

Neural networks are built on the principle of the biological neural networks which have huge potential to solve non-linear problems of statistical analysis. Therefore, they are important as the mathematical models with advantage of learning ability. Today, neural networks are applied to several application of data generalization, classification, and identification of complex relationship between input and output data. Because neural networks themselves are attempting to model the capabilities of the human brain. When the analyzed data relationship is unknown, neural networks are prevailing tools for modelling.

Presently, the neural networks are being applied various areas of medicine. Particularly, they have viable usage in oncological diseases diagnostics, the sharp non- lymphoblast leucosis patients' immune status evaluation, in gastrointestinal tract pathologies, in cardiovascular diseases diagnostics, in ophthalmology and other areas of medical diagnostics.

In higher education system the neural network approach has potential to evaluate inclusive education quality. It can make possible to identify the competence level achievement by the disabled students in the education system as well as improving the education process organization quality.

Therefore, the neural network approach usage for medical problems solution has high potential to produce the accurate diagnostics and recommendations for specialists for work with disabled persons efficiency. The neural networks are regarded as the universal tool for various weakly formulated tasks where the classical mathematics and statistics methods are ineffective.

The further software sets on the base of the neural network approach will help to increase the diagnostics efficiency not only in the area of biomedical problems solution, but in various areas of psychological science as well.

Regarding potential of the neural networks in medical applications a large number of claims have been made about the modeling capabilities of neural networks, some are exaggerated and some can be justified. Even though neural networks have a enormous potential, we will only get the best of them when they are integrated with Artificial Intelligence, Fuzzy Logic and related subjects.

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±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±0,5 scores, MMSE 21,8±4,05 scores. In group II - GDR 2,0±0,5 scores, MMSE 27,0±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 (amnestic confabulation). At the stage of mild dementia clearly identified the most features of amnestic aphasia, amnestic 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.

COMPARATIVE ANALYSIS ON THE GENDER OF PATIENTS WITH MULTIPLE SCLEROSIS IN UZBEKISTAN

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Purpose of the study is to estimate the gender features of multiple sclerosis in Uzbekistan.

Materials and Methods. The study involved 38 patients with multiple sclerosis (MS) of Uzbek nationality. The age of patients ranged from 18 to 56 years, the average age was 36,0±0,12 years. Among the investigated were 16 men and 22 women. All patients were studied in detail the history of disease, the overall clinical and neurological status, laboratory and paraclinical data.

Results. The study debut of the disease revealed that in all men, the disease begins with weakness in the limbs and unsteadiness of gait, while the women, these symptoms have been observed in only 64% of patients. In addition, women are more likely debut of the disease has been a visual impairment (among men - 19% and women - 24%) and in men - dizziness (men - 25% and women 14%). At the same time, men have slightly less observed paresthesia (19%), headache (19%) and speech disorder (14%), while women - paresthesia, headache and dizziness consisted of 14%. Occasionally, both men and women, the disease begins with pain in the extremities (7 and 9% respectively), swallowing difficulties (6, 5%), and the speech disorder only in men (2%). In comparative MS analysis based on gender were found large differences, both men and women prevailed remitting type of disease (men - 56% and women - 55%), less primary progressive (19 and 23% respectively) and secondary progressive (25 and 23%). Furthermore, the average speed of the study of disease progression showed that MS progressed faster in women (4,9±0,5 years) than in men (6,8±0,8 years). At the same time, the average duration of first remission are about the same for men and women (10,8±1,5 and 11,0±1,4 years respectively). The average number of remission was about the same as (4.8±0.7 and 4.4±0.6 years respectively). Among MS patients regardless of sex more patients were from the city (men - 63 and women - 64%) than the village (men - 37 and women - 36%).

Conclusion. 1. The debut of MS in Uzbek nationality men often begins with a mo-

tor and cerebellar disorders, and in women in addition to these symptoms even with visual disturbances.

2. Patients of both sexes dominated by remitting type of the disease, at least primary and secondary progressive.

3. In Uzbekistan, MS progresses faster in women than in men.

4. MS in both men and women, more common in urban people than in rural.

COMPARATIVE ANALYSIS ACCORDING TO GENDER OF PATIENTS WITH MULTIPLE SCLEROSIS IN THE CONDITIONS OF UZBEKISTAN

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The purpose of this study was to assess gender characteristics of multiple sclerosis in the conditions of Uzbekistan

Material and methods: Were examined in 38 patients with multiple sclerosis (MS) of Uzbek nationality. The age of patients ranged from 18 to 56 years, average age was 36,0±0.12 years. Among the study were 16 men and 22 women. All patients were studied in detail by medical history, General clinical and neurological status, laboratory and paraclinical data.

Results: the study of the onset of the disease revealed that in all men the disease begins with weakness in the limbs and unsteadiness of gait, and in women these symptoms was observed in only 64% of patients. In addition, in women often the onset of the disease was impaired (at the husband's - 19% and women 24%), and men – dizziness (at the husband's 25% and the wives -14%). At the same time, men have slightly less than was observed paresthesia (19%), headache (19%) and speech disorder (14%), and women – paresthesia, headache and dizziness for 14%. Rarely, men and women, the disease began with pain in the limbs (respectively 7 and 9%), swallowing (6 and 5%), and speech disorders only in men (2%). Comparative analysis of the RS based on gender large differences could be detected in both men and women was dominated by remitting disseminated type of the disease (husband of 56% and women – 55%) and, less frequently, primary-progressive (respectively 19 and 23%) and secondary-progressive (25% and 23%). Further, the study of the average speed of disease progression have shown that MS fast progressed in women (4,9±0,5 years) than in men (6,8±0,8 years). The average duration of first remission in men and women is approximately the same (respectively: 10,8±1,5 11,0±1,4 years). The average number of remissions was also about the same (respectively 4,8±0,7 and 4,4±0,6 years). Among MS patients regardless of gender were more patients from the city (husband and wives 63 - 64%) than from villages (husband is 37 and women – 36%).

Conclusion. 1. Debut MS men of Uzbek nationality often begins with motor and cerebellar disorders, and women in addition to these symptoms even with optical disorders. 2. Patients of both sexes is dominated by remitting disseminated type of the disease, at least primary and secondary-progressive. 3. In the conditions of Uzbekistan MS progresses faster in women than in men. 4. MS as in men, and in women, more common in those of the urban population than the rural.

THE EFFECTIVENESS OF ABCD 3 SCALE PREDICTION OF THE CLINICAL RISK OF ISCHEMIC STROKE IN PATIENTS WITH TRANSIENT ISCHEMIC ATTACK IN TASHKENT MEDICAL ACADEMY

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Objective: The aim of this study was to examine the effectiveness of ABCD 3 scale for prediction of clinical risk of ischemic stroke (IS) in patients with transient ischemic attack (TIA). The objectives of the study was to use the scale in patients undergoing transient ischemic attack (TIA) and the further observation, and in patients with IS after TIA.

Material and Methods: The study was conducted in 17 patients TIA (I-group) and 14 patients with ischemic stroke after TIA (II-group), aged 57-76 years. There were 16 men and 15 women. . According to the scale the following parameters were evaluated in scores: blood pressure at the time of TIA, the patient's age, symptoms, duration of symptoms, a history of diabetes and dupleks scaning. The study was conducted in May 2016 to December 2016. Data were systematized and calculated the efficiency of the scale.

Results: According to the ABCD 3 scale from 31 patients: 13 (39.6%) - low risk, 10 (35.4%) - the average level of risk, and 8 (25%) - a high level of risk has been identified. In the I-group IS developed in 2 (17%) patients with low-risk, and 1 (10%) with an average level of risk, and 3 (37.6%) with a high level of risk. In the II-group 3 (23%) patients were in low risk, 5 (50.0%) - an average level of risk, and 5 (67.5%) - a high level of risk before IS.

Conclusions: The ABCD 3 scale is more efficient to evaluate the risk of ischemic stroke than its predecessors. It is reliable to distinguish between the risk of early recurrent stroke, identifying patients with stenosis. But the criteria for risk assessment should be complemented with other clinical signs and use of laboratory to more accurately determine the risk of IS after TIA.

THE USE OF A NEW DIAGNOSTIC METHOD IN PATIENTS FOR DIFFERENTIAL DIAGNOSIS OF ALZHEIMER'S DISEASE

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Alzheimer's disease (AD) - a widespread disease throughout the world, which is the most common cause of dementia in the elderly and senile age. Currently, no known biomarker for self-use in the clinic may not be a decisive factor in establishing the diagnosis of AD. In this regard, we have comprehensively used the most important biomarkers (dehydroepianderosterone sulfate (DHEA-S), apolipoprotein E4 (ApoE-4) and beta-amyloid protein (Aβ1-42) for the early detection and identification of risk groups in AD.

The aim of the present study was the validation of new diagnostic complex biomarkers for differential diagnosis in patients with Alzheimer's disease and chronic brain ischemia with vascular dementia.

Material. Study involved 147 patients verified diagnosis of Alzheimer's disease (n = 17), early Alzheimer's disease (n = 30) and chronic cerebral ischemia vascular dementia (n = 100).

Results. The average age of patients with AD was 71,05±1,15 years, with early

AD - 57,2±0,92 years, with chronic brain ischemia - 67,18±1,06 years. In AD, women accounted for 47,1±12,1% of the number of studied patients with the diagnosis of AD, for early AD - 50,0±9,1% and chronic brain ischemia - 61,0±4,9%. The level of Aβ1-42 increased by 25.4% compared with the content of the marker in the blood serum of healthy persons (normal concentration - 250.0 ng / ml); ApoE-4 standard - 41.3% (concentration rate - 15.0 ng/ml); the level of DHEA-S decreased by 43.8% (concentration in norm - 2.6 mmol / l). The level of Aβ1-42 in patients with early AD increased by 57.2% compared with the content of the marker in the serum of healthy humans, the level of the ApoE-4 - 107.3%, the level of DHEA reduced with more than 17 times. In AD patients, levels of Aβ1-42 increased 1.9 times compared with the content of the marker in the serum of healthy humans, the level of the ApoE-4 - 2.9 times, and the level of DHEA reduced more than 15 times.

Conclusions. The high diagnostic efficiency of complex biomarkers were ascerted for the early diagnosis and monitoring the effectiveness of therapy and to identify high-risk groups of Alzheimer's disease, and chronic brain ischemia: increase in serum levels of markers Aβ1-42 and ApoE-4 in patients within 50,0-100,0% and DHEA-reduction with more than 10 times allowed to establish the early development of AD; in already developed AD, serum concentration Aβ1-42 markers and patients ApoE-4 and increased by several times, while DHEA declined more than 10 times.

INSOMNIA IS ONE OF THE MASK OF MASKED DEPRESSION

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Sleep disorders are a major and sometimes the only manifestations of latent depression. Insomnia as a stand alone version of somatic depression consists of waking up early and reducing the duration of a night's sleep. During this period, early waking appear intrusive thoughts about the coming day worries, doubts, fears. Some patients slept during three to two hours, again fall asleep, but sleep is sensitive, surface , reduced the duration of nocturnal sleep, and in the absence of the effect of sleeping pills.

Purpose of the study. Early diagnosis of masked depression in the form of insomnia

Materials and methods. There were examined 46 patients with insomnia.All patients were divided into 2 group.The main group consisted of 23 patients who received standard therapy with psychopharmacotherapy. In comparison group included 23 patients treated with standard therapy .For identifying masked depression and evaluate the results of therapy were used psychological tests Spilberg- Hanin, Tsung. As psychopharmacotherapy was used psychological conversation and antidepressant mirtezalin.

Results. According to the results of psychological tests were detected in 83% moderate degree of depression and 17% had mild depression. After treatment, good results were seen in 82.3% of patients in the study group patients during psychopharmacotherapy. All of these patients had improvement and reduction of depression and anxiety on psychological tests Spilberg- Hanin, Tsung.

Only 14.3% of patients in the group receiving standard therapy without psychotherapy marked improvement.

Conclusion. Obviously, in the treatment of patients with insomnia psychopharmacotherapy has high positive effect, characterized by improvement of the patients, the improvement of sleep.

ASSESSMENT OF RISK FACTORS OF THE DEVELOPMENT OF DEMENTIA OF ALZHEIMER TYPE

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The urgency of the problems of dementia at old age and in the first place - dementia of Alzheimer type (DAT), united now in the diagnostic category "Alzheimer's disease" (AD), has steadily increased. This is due to the frequency of AD / DAT, prolonged disabling disease course and large economic costs for treatment and care of patients who at an advanced stage of the disease.

Purpose. To investigate risk factors for the development of AD and protectors factors, presumably reducing the risk of disease.

Material and methods. Clinical-anamnestic study of 40 patients were held to study the effect on morbidity indicators of biological, constitutionally-personal and psychosocial (environmental) factors. The work was based on the assessment (by the standard questionnaire) of occurrence of family history or personal history of individuals included in the study, presumably for AD risk factors.

Result. Study suggested more frequent occurrence of AD / DAT in the female population older, respectively, for women is 5.1% and 2.9% for men ($p < 0.05$). Frequent individuals with low levels of education (0-4 years) as compared to the surveyed older people without mental disorders ($p < 0.005$) were significantly more among patients with AD / DAT. Analysis of the results of the study showed that in the total group of patients with DAT most significant risk factors of the disease is the presence of secondary cases of dementia in the aged in first-degree relative. According to the application, the method of statistical analysis significant factor- protector for DAT turned a history of acute and including frequent, stressful situations. The value of the CDF smoking factor was on the borderline level of reliability as an RF. This allows us to consider smoking as the only conventional risk factors for development of DAT. For the group DAT at presence of a history of chronic inflammatory diseases of the biliary tract proved the value of the relevant risk factors for the DAT. The significance of the presence of a history of coronary heart disease with angina was on the borderline level of statistical significance as risk factors for the DAT.

Conclusions. This research shows us that the brain damaging effects of environmental factors increase the risk of DAT. At the same time, environmental factors involved in any way in the mechanism of neuroprotection or activation in pathogenesis of the disease involved neurotransmitter systems, can obviously reduce the risk of disease.

STRUCTURE OF SLEEP IN CHILDREN WITH EPILEPSY AND COGNITIVE IMPAIRMENT

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Objectives: We aimed to study a method for evaluating the maturity of integrative sleep aids for children with age-appropriate.

Methods: Polysomnographic studies were conducted in 60 children: 40 patients with neurological disorders (syndrome deficiency of attention and hyperactiv-

ity (SDAH), obstructive sleep apnea syndrome (OSAS), dysphasia and 20 healthy children aged 6-11 years. Nighttime sleep study was conducted with parallel video-monitoring for 8 hours, with enhanced awakening, using hardware and software Neuronsectr-4/EP. Polysomnograms analysis carried out in accordance with international standards (A.Rechtschaffen and A.Kales).

Results: Based on the analysis of polysomnography options we offered maturity index of integrative sleep aids (MIS) in children (The method for determining the quality of nighttime sleep in children.

MIS was calculated using the formula MIS=SRS/FRS, where MIS is - maturity index integrative sleep aids, SRS - the phase of slow REM sleep as a percentage of total sleep duration, FRS – quick REM sleep as a percentage of total sleep duration. In the group of healthy children the value of MIS was 1,20±0,1. In patients with SDAH, MIS was significantly higher than in healthy children and amounted to 2,6±0,2 ($p < 0.05$). For children suffering from obstructive sleep apnea index is 2,3±0,1 ($p < 0.05$).

Conclusions: Thus, an indicator of a physiologically optimum of sleep patterns in healthy children aged 5 years is the value of the maturity sleep index less than 1.5, while the pathology it increases than 1.5 times more.

CLINICAL FEATURES OF DEPRESSIVE DISORDERS IN PARKINSON'S DISEASE. POSSIBILITIES OF THEIR CORRECTION

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The aim of our study was to examine the effectiveness of the antidepressant Venlafaxine (venlafaxine hydrochloride) in PD patients with depressive disorders.

Material and methods: We observed 35 patients with PD (16 men and 19 women) aged 49-76 years (mean age 61,6±8,7 years). Diagnosis according to the Brain Bank criteria Company UK Parkinson's disease. Surveyed patients with stage of disease at scale Hyun-Yar 2,5-3 (2,47±0,44), disease duration ranged from 4 to 10 years (mean duration 6,5±1,7 years). Patients were evaluated on a scale non-motor symptoms of PD (NMSS), a questionnaire evaluating sleep quality (LSEG), Hamilton Depression Rating Scale (HAM-D), the scale of the Clinical Global Impression (CGI).

On NMSS scale results revealed the following violations: cardiology - in 18 patients (51.4%); sleep disturbance and fatigue in 20 (57.1%); cognitive and mental disorders in 15 (42.8%); memory and attention in 21 patients (61.0%); gastro-intestinal disorders observed in 19 patients (54.2%); genitourinary system - in 11 (31.4%).

The results: According to the results of the questionnaire assessing the quality of sleep was broken LSEG awakening during sleep, fall asleep, sleep quality in 22 patients (62.8%). According to the questionnaire HAM-D in 18 patients (51.4%) was identified depression: in 7 (38.9%) - mild (12-16 points), 11 (61.1%) - average (19- 21 points).

To correct the depression was appointed antidepressant Venlafaxine (venlafaxine hydrochloride) 75 mg 1 hour before bedtime for 6 months follow-up. After 3 weeks from the initiation of venlafaxine (Venlafaxine hydrochloride) three patients (16.6%) the dose was increased to 50mg. All patients received standard antiparkinsonian therapy with levodopa.

After a course taking Venlafaxine (venlafaxine hydrochloride) for data NMSS significant improvement was noted in 14 patients (77.7%): sleep / fatigue - 2.2 points,

mood / cognitive activity - 3.4 points, memory / attention - 1.5 points; decrease in urination disorders - 1.5 points. In assessing sleep parameters by LSEG questionnaire reported an improvement in sleep quality, decrease of awakenings during sleep and fall asleep all patients treated with Venlafaxine. As a result of HAM-D scale of the average total score decreased in patients with mild depression to 4,6±1,2 points, with a mean depression to 6,3±2,2 points. In the CGI condition has improved significantly, according to how the physician and patient. In general, the drug was well tolerated, one patient had a headache (about 2 weeks), two showed a slight nausea in the early course of treatment venlafaxine (about 1 week). Within one year of follow-up, patients treated with Venlafaxine, there was no need for a correction antiparkinsonian therapy.

Conclusions:

1. The use of Venlafaxine in PD reduces not only the symptoms of depression, but also some non-motor symptoms of the disease, which improves the quality of life of patients.

2. Venlafaxine helps restore the normal circadian rhythm of sleep-wake in patients with PD, 2.5-3 stage for Hyun-Yar.

3. The drug Venlafaxine in combination with standard antiparkinsonian therapy is well tolerated by patients with PD, 2.5-3 stage for Hyun-Yar, depression of mild to moderate severity.

ASSESSMENT OF THE QUALITY OF LIFE OF PATIENTS WITH PARKINSON'S DISEASE WITH CHRONIC PAIN SYNDROME

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Introduction. One of the most frequent non-motor manifestations of Parkinson's disease (PD) is a pain. The frequency of chronic pain in PD for more than three months, according to different authors ranges from 40 to 70% higher than that in the General population (20 to 44%). Suggest that pain patients may be associated with the main symptoms of parkinsonism, especially muscular rigidity, concomitant skeletal-muscle pathology or may be an independent symptom, reflecting the dysfunction of the nociceptive system in PD. In patients with PD the pain may also depend on neurotransmitter changes occur in the background as hypodopaminergia and hyperdopaminergia States. Because of this, the development of pain syndrome may contribute to complications of long-term levodopa therapy, including both motor and non-motor fluctuations and dyskinesia. All these determines the heterogeneity of pain syndromes in PD and make it relevant to a comprehensive clinical analysis of chronic pain syndromes in PD patients.

The purpose: To assess the quality of life in patients with Parkinson's disease within chronic pain syndrome.

Material and methods. We examined 50 patients, who were 25 men and 25 women, average age was 63.5±9.1 years. The study of everyday activity and quality of life was conducted using a questionnaire European quality of life (EP - 50). The technique involves two parts: the first part is a visual analogue scale for global assessment of quality of life related to health, which is a drawn a scale (like a thermometer) on which the best state of health corresponds to a score of 100 and the worst 0.

The second part of the questionnaire reflects the health profile. The second part includes five domains: mobility, self-care, daily activities, pain and mood. For each

sphere there are three levels of violations. The questionnaire is filled in by the patient. For each sphere there are three levels of violations. To assess the quality of life scale was also used ROS 39, consisting of 39 questions, consisting of 7 Pascal.

The results: In patients with pain syndrome in PD assessment according to the visual analogue scale to determine the quality of life related to health was significantly lower than patients without pain. In the patients with pain in PD was below the levels of daily activity, and increased levels of anxiety and depression, pain and discomfort. Thus, in patients with pain syndrome in PD quality of life, evaluated on a scale EP — 50 was lower than patients without pain.

Assessment of quality of life scale EP — 50 in patients with pain syndrome was correlated with the assessment of UPDRS part III (D=0,42, p<0,05) and also with the severity of hypokinesia and rigidity. Dependence between intensity of pain measured PA YOUR and indicator EP-50 (D= -0,43; p<0.01).

Patients with greater severity of depressive symptoms demonstrated lower scores of quality of life according to visual scale EP-50 (D= -0,5; p<0.001), and higher levels of anxiety depression scale EP-50 (D= 0,5; p<0.01).

Patients with a pain score on a scale of ROS-39 was higher (of 53, 05±21,3) than patients without pain (41,03±17,4), reflecting a lower quality of life. Assessment of the level of quality of life in PD patients with pain syndrome on a scale of ROS-39 were correlated with the assessment of UPDRS part III (1=0,33, p<0,05) and also with the severity of hypokinesia and rigidity.

Conclusion. Thus, the quality of life of patients affected severity of pain, duration of disease, severity of Parkinsonian symptoms and depressive symptoms.

THE DIAGNOSTIC DILEMMA OF OLIVOPONTOCEREBELLAR ATROPHY AND SPINOCEREBELLAR ATAXIA, A COMPARATIVE ANALYSIS OF CLINICAL CASES

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Background and objectives. Modern scientific literature is growing rapidly as the jungle, where many secrets and rare treasures are hidden. The trend of development of medicine requires a doctor's daily analysis and processing of a dozen of new articles and abstracts. Clinical practice often confronts us with ambiguous and conflicting data from the "western" and "eastern" publications, which leads to misunderstandings and disagreements, so we set out to bring on a common state dilemma of contradiction in respect of hereditary ataxia.

Material and methods. A 54 years old man, an accountant, admitted to our clinic, with a diagnosis of "Essential hypertension, Chronic brain ischemia, Sensorineural hearing loss, Organic amnestic syndrome ", with complaints of tinnitus, which progressively grew last 5 years and has led to hearing loss. The disease began with low intensity noise, which grew over the last 5 years. No harmful habits were detected. No family history. After detailed examination we revealed saccadic pursuit, violation of postural reflexes, retropulsion, light spasticity in the legs, swallowing disorders, dysarthria. Audiometry - sensorineural hearing loss (3-4 degree) with violation of the perception of high frequency sounds. MRI - MR signs of vascular en-

cephalopathy. Funduscopy, OS - without features, OD - glaucomatous optic nerve atrophy. The preliminary diagnosis - "Olivopotnocerebellar atrophy, sensorineural hearing loss." We have reviewed and analyzed 22 articles from highly cited journals, as well as data located on the official websites of National Organization of Rare Diseases (NORD), National Ataxia Foundation (NAF), National Institute of Neurological Disorders and Stroke (NINDS). We searched data by following keywords: olivopontocerebellar atrophy (degeneration) and spinocerebellar ataxia.

Results. Our analysis showed that, in our patient more accurate diagnosis is spinocerebellar ataxia type 36, however, olivopontocerebellar atrophy with its 5 subtypes to date are included in spinocerebellar ataxia taxonomy and multiple system atrophy, in addition olivopontocerebellar atrophy is observed in many other diseases: non-hereditary ataxia, intoxication and vascular degeneration, inflammatory diseases and etc. Requesting olivopontocerebellar atrophy code in ICD-10 in Russian revealed codes G11.8 or G11.9, and while requesting in English, we got the code G 23.8. The reason for this difference, we believe is lack of motivation among doctors in establishing final complete diagnosis, as code G 23.8 sets familial form of olivopontocerebellar atrophy, while G11.8 – other hereditary ataxias. Hopefully this differences will be revised in the ICD 11.

Conclusion. Proceeding from the above, it is clear that the diagnosis of olivopontocerebellar atrophy is in the most syndromic, and requires a doctor's deeper view into patient's progressive ataxia. The question of necessity in verification of exact diagnosis remains open, as in bears no tactical value. But, tracking such cases and the description of them is preserved in science as one the most relevant methods for the studying of rare diseases. In our opinion the doctor should solve clinical problem of "multidiseased" patient under guidance of Occam's razor principals, one of which states - "Diversity should not be assumed without necessity."

LATERALIZING SIGNS DURING SEIZURES IN INFANTS IN TASHKENT

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Objective: To identify lateralizing features during seizures in infants and assess their reliability.

Methods: Infants were included if they had video-EEG monitoring at our institution, and were seizure-free for at least 12 months after epilepsy surgery. Lateralizing signs and seizure symptomatology were classified based on blinded video review.

Results: We analyzed 100 seizures from 19 infants (1 to 32, mean 13 months of age) (1 to 14 seizures per patient). Potential lateralizing signs were seen in 58 seizures from 12 infants, including unilateral clonic jerking (8 patients); forced, sustained tonic version of the eyes to one side (7 patients); predominantly unilateral infantile spasms (5 patients); unilateral tonic stiffening of an arm and leg (2 patients); nystagmus (2 patients) and postictal hemiparesis (1 patient). Except for tonic eye version, each of the signs was contralateral to the hemisphere of seizure-onset in all but one patient who had predominantly ipsilateral spasms and clonic arm activity. Tonic eye version was contralateral in 3 patients, ipsilateral in 1 patient, and toward either side in different seizures in 3 patients.

Conclusion: Reliable lateralizing signs included focal clonic activity and predominantly unilateral spasms. Focal tonic activity, nystagmus and postictal hemiparesis were also consistently contralateral but were observed only in few patients. Tonic eye version was unreliable and could not be used to lateralize seizure onset. The sequence of eye and head version evolving to generalized tonic clonic convulsions was not seen in this age group.

LATERALIZING VALUE OF SEMIOLOGY IN MEDIAL TEMPORAL LOBE EPILEPSY

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Objectives. Analysing the clinical characteristics of seizures constitutes a fundamental aspect of the presurgical evaluation of patients with medial temporal lobe epilepsy and unilateral hippocampal sclerosis (MTLE-HS), the most frequent form of focal epilepsy accessible to surgery. We sought to retrospectively determine whether objective manifestations could have a reliable lateralizing value in a large population of MTLE-HS patients and if their presence could help to identify those patients who would be seizure free after surgery.

Purpose. To analyze clinical laterizing sings of medial temporal lobe epilepsy.

Material and methods. We analysed the frequency and predictive lateralizing value of objective ictal and postictal signs in 51 patients with MTLE-HS (23 left/28 right). Data were derived from chart review and not from blinded videoEEG analysis. Correlation between the presence of reliable lateralizing signs and postoperative outcome was performed in a subgroup of 42 patients who underwent surgery.

Results. Contralateral dystonic posturing was the most frequent and reliable lateralizing sign that correctly lateralized the focus in 96% of patients. Unilateral head/eye deviation was noted in 42% of the patients and predicted unilateral focus in 67%. Ipsilateral postictal nose wiping, contralateral clonus and hypokinesia correctly lateralized the focus in 75%, 81%, respectively, and 33% of patients but were less frequently depicted. Postictal aphasia was a strong lateralizing sign for left MLE-HS. The presence of reliable lateralizing signs was not a predictor of seizure freedom.

Conclusion. Seizure semiology is a simple tool that may permit reliable lateralization of the seizure focus in MTLE-HS. The presence of reliable lateralizing signs is not associated with a better postoperative outcome.

EFFECTIVENESS OF TREATMENT OF PULMONARY TUBERCULOSIS IN HIV – INFECTED PATIENTS

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The aim of this paper is to examine the assessment of the effectiveness of treatment of tuberculosis in HIV-infected patients.

Materials and methods. In this paper, we studied 108 patients treated in CTH №1 (City Tuberculosis Hospital №1) in Tashkent in 2015. The patients were divided into two groups: Group 1 (basic) - 58 HIV-infected patients with tuberculosis (TB / HIV), of which 9 (15.5%) patients with HIV infection is detected in the clinic CTH №1, Group 2 (control) 50 patients with pulmonary tuberculosis without HIV infection. All patients underwent a complete clinical, radiological and laboratory examinations.

Results. The age and sex composition in both groups was identical. In both groups dominated males - 47 (81%) and 38 (76%), respectively, at age 30 to 39 years - 27 (46.6%) and 27 (54%) and from 40 to 49 years - 20 (34, 5%) and 15 (30%), respectively.

Clinical and radiographic infiltrative tuberculosis in group 1 was installed in 20 (34.4%) patients, focal - in 13 (22.4%), disseminated - in 10 (17.2%), pleural effusion - in 10 (17, 7%), fibro – cavernous in 4 (6.8%), tuberculosis bronchoadenitis - in 1 (1.7%). In group 2 infiltrative tuberculosis is installed - in 28 (56%), pleural effusion 6 (12%), focal and fibro-cavernous tuberculosis 5 (10%) and disseminated and cavernous pulmonary tuberculosis 3 (6%), respectively.

Patients with HIV / AIDS-related TB has identified a number of opportunistic diseases, 43 (74.1%) patients with oropharyngeal candidiasis is set, in 3 patients (5.2%) - generalized candidiasis, herpes viruses (HSV 1 and HSV 2) identified in 9 (15.5%) patients, CMV - in 6 (10.3%), in two cases (3.4%) Pneumocystis pneumonia, one patient had - Kaposi's sarcoma (1.7%).

All patients received standard chemotherapy DOTS category 1 and 2, as well as pathogenetic and symptomatic therapy. All patients of the main group is assigned a daily intake of sulfamethoxazole / trimethoprim 160/800 mg before the end of a course of chemotherapy.

Treatment efficacy was assessed by bacteriological conversion and closure of cavernous lesions. In the main group in the sputum microscopy method BK detected in 24 (41.3%) patients in the control group - 32 (64%), but in the main group abacillary achieved only in 10 (41.6%) patients, compared with 28 (87, 5%) in the control group. Closure of cavernous lesions was not in any case. Reducing the cavities above splits the control group than in patients with HIV infection and is 20 (%) and 7 (%), respectively.

The outcome of treatment in the control group: treatment efficacy of 98%: improvement of 49 (98%), without the dynamics 1 (2%), as in the main group the efficacy of treatment was only 72%: improvement in 16 (27.6%), no significant improvement 26 (44.8%), without dynamics 5 (8.6%) treatment disorders mode 2 (3.4%), died 9 (15.5%).

Conclusions: Tuberculosis in HIV - infection becomes more severe clinical course,

accompanied by a number of complications and associated diseases, including AIDS - associated, and is characterized by high rates of mortality. The standard chemotherapy regimen is not effective enough, which is associated with severe immunodeficiency and the development of other opportunistic diseases.

MEDICAL-SOCIAL CHARACTERISTICS OF PATIENTS WITH TB/HIV

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The aim: Study the characteristics of health and social status of patients with tuberculosis and HIV infection in a tuberculosis hospital.

Materials and methods. On the basis of the City Tuberculosis Hospital №1 in Tashkent examined 58 patients with pulmonary tuberculosis combined with HIV infection. It was conducted medical history of the disease, the analysis of gender and age composition. It was assessed such factors as place of residence, conditions of living, having a family and children, the presence and type of education, professional activity and criminal record. Time on the bed was also analyzed.

Results. The average age of patients in the study groups was 40,48±0,8 years, with individual variations from 23 to 63 years. The study of sex ratio showed significantly prevail men - 47 (81.1%) - in contrast to the 11 women (18.9%). The average length of stay was 47.67 bed / day. It was studied conditions of stay of patients after admission to a specialized hospital. It was found that the vast majority of the patients lived in a separate apartment - 51 (87.9%), at least in the dorm - 5 (8.6%). Persons with no fixed abode were two (3.4%).

It was analyzed household contacts of patients immediately before hospitalization in a specialized hospital. It was found that the vast majority of patients had no family, lived in a living space with relatives 26 (44.8%) or one of 12 (20.7%). The majority of patients had a 46 educational degree (79.3%): secondary education - in 56 (96.5%) and secondary special - in 2 (3.4%) patients. Despite the availability of education, significantly, most patients studied had no job 47 (81.0%). Also pay attention to the existence of a criminal record in the past. It was found that most of the patients had a previous conviction 30 (51.7%), of which the conditional - in 7 (23.3%).

In the analysis of bad habits, found that 38 (65.5%) of the patients smoked, 35 (60.3%) - abused alcohol, and 21 (36.2%) patients used injection drugs.

Despite the social weights, all studied patients received TB treatment in a specialized clinic and received standard chemotherapy DOTS category 1 and 2, as well as pathogenetic and symptomatic therapy with the appointment of the daily administration of sulfamethoxazole / trimethoprim 160/800 mg before the end of a course of chemotherapy.

However, in 4 (6.9%) cases, patients had to be discharged from clinic various reasons of a social nature.

Conclusions: Patients with a combination of tuberculosis and HIV infection should be referred to the category of socially maladjusted individuals, as among patients with co-infection (TB / HIV) prevalent males, age group 25-45 years, Residential separate apartment with relatives, not having a family and children, with the presence of secondary education who do not have work. In 51.7% of patients with co-infection in the past had tried to be served in prison.

THE BEST OUTCOMES OF COMPLEX TREATMENT OF HAIRLOSS WITH CONSIDERING RISK FACTORS THE SKIN AND VENEREAL DISPANSERY

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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 goal of the work – to study the efficacy of complex treatment of alopecia with considering of risk factors .

Materials and methods- Clinical observations were performed in 90 patients with alopecia at the age of 20-70 ,who live in Tashkent city. 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 ELISA method with defining the Ig-M and – G association with protozoan (lambliasis, toxoplasmosis – in36 patients) and viral (herpes,simpler,cytomegalovirus – 14 patients)infections. Gastro -intestinal tract and (GIT) and hepatobiliar system (HBS) diseases -in 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 concentration Ca in 15 patients,Mg in 10 patients,Fe - in 15 patients was revealed. Decreasing the level of serumal concentration of microelements was more expressed in the group of patients with total, subtotal; condition.

As a result – The ELISA method is more useful than traditional method and calcium channel blockers affects to recovery of patients.

EVALUATION OF LESIONS OF THE HEPATOBILIARY SYSTEM OF THE LIVER IN PATIENTS WITH ULCERATIVE COLITIS

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The aim of the study: To evaluate the frequency of lesions of the hepatobiliary system of the liver in patients with ulcerative colitis of varying severity.

Materials and Methods: 40 patients were examined ulcerative colitis (UC). 10 patient of them was in a slight degree (distal Proctosigmoiditis), 25 patients - in an average degree (prevalence of the process from left-hand to the transverse colon Division), 5 patients - in severe degrees of severity (total lesion). Evaluation of patients included: clinical analyzes, biochemical blood tests, ultrasound of the liver and bile ducts, gallbladder motility study using ultrasound load of gallbladder, colonofibroscopy.

Results: with the increase in the severity of ulcerative colitis, beginning with mild, detected changes in the hepatobiliary system, as noted a moderate increase in liver size 8% of patients with mild, in 31.6% - with an average degree of severity, at 63.6% - with severe disease severity. The slight increase in bilirubin levels was observed only in severe ulcerative colitis, in 9% of patients. Transaminases increased in patients with moderate to severe degrees of severity, with 1.5 times the average and 3.2 times at a serious degree, 10 and 27.2%, respectively. The frequency increase of alkaline phosphatase was about the same at medium - heavy and heavy degrees and amounted to one-third of all cases.

Motility disorders of the gallbladder were observed in 76% of cases with moderate to severe, while at only mild in 34% of cases.

Conclusions. Clearly identified relationship between the severity and degree of severity of ulcerative colitis and an increase in the frequency and degree of damage of the hepatobiliary system. Therefore, in the treatment of ulcerative colitis should be considered a pathology of the hepatobiliary system.

SOME INDEXES OF LOCAL IMMUNE STATE AND (PH) REACTION OF ORAL CAVITY IN CHILDREN WITH TOOTH DECAY

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In pathogenesis of dental diseases an interaction of bacterial flora of oral cavity takes the important place with appropriate antibacterial protective factors of organism in all stages of development of disease. Organism reacts with production of antibacterial antibody to the colonization with bacteria of the surface of tooth. In the period of invasion or before colonization, besides antibody, important protective function fulfill nonspecific factors (lysozyme, secretory immunoglobulin and (pH) reaction of oral cavity). Based on this we carried out the complex study of protective mechanisms at mucus membrane level of oral cavity in patients with tooth decay.

In most cases while analyzing of clinical material the necessity of determination of patients' numberappears whose indexes reject from norm. In our work M±2δ is applied as a norm, computed in healthy children (control group),as in these limit 95% of all versions of variation series dispose. As it will be presented later in children tooth decay content of lysozyme, SIgA and pH was decreased by comparing with healthy children. Therefore positive samples are which are lower thanM-2δ. It was established that from 17examined children only one pH medium of oral cavity was lower than norm that it made up 5,9%. Recieved results of this research was given in the table.

Lysozyme contains from18 to 28 mg% in the saliva of healthy children, with middle indexes 22,4±0,68 mg%. The value of norm was within 6,8-28 mg%. In children with tooth decay sharp decreasing of lysozyme content in their saliva was marked (P <0.001).In patients of this group lysozyme content in saliva was from 16,6- 28

mg% with middle value 22,4±0,68 mg%. The number of positive samples made up 75%.In other words in 60 examined children with tooth decay in 45 children the content of lysozyme in saliva was lower than standard norm.

Determination of secretory immunoglobulin A in oral liquid in healthy children showed that middle level of SIgA content - SIgA 39,9±0,19 pg/ml.The boundaryM±2δ made up from34,6- 45,4 pg/ml.In children tooth decay content SIgA was decreased on average until 30.1±0.61 pg/ml with individual value from31,9 – 47,2 pg/ml,the difference between healthy children was significantly(P< 0,001).Increased percent was positive test -76,6%.

As is well known, that resistance of enamel to carious process depends on the state of pH medium of oral cavity. It was established by up to date methods, that in alkalescentpH of saliva the least going out Ca from enamel is observed. With the purpose of prevention of appearance of primary caries weparallel studied the state of pH medium of oral cavity in children patients. The results of study testify to ,that middle index of pH medium in saliva of healthy children composed 6,94±0.07with individual fluctuations from 6.1to 7.4. Normative boundary was in extreme cases from 6.34 to 7.54. with 5.9% the number of the tests. In patients К3 this index was decreased until 5.93±0.03. Difference was reliable by comparing with healthy children (P< 0,001). The number of positive tests was very high 91,6%.

Thus in study of microbial landscape of saliva the indexes of local nonspecific immunity and pH medium in children patients with tooth decay allow to suppose ,that the decreasing of lysozyme and SIgA are determinable factor in tooth decay and leads to depression of natural resistance of organism and promotes the development of disproportion between the content of non-cariesgenic and cariesgenic streptococci and sharp growth of the last one. And it leads to the accumulation of acid products of microbial origin. The decrease of pH medium in oral cavity promotes the processes of re – and demineralization of tooth enamel revealing of their low resistance to caries.

EFFECT OF PROBIOTICS ON GASTROINTESTINAL TRACT OF HIV PATIENTS

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In recent years the trends of fast spreading of HIV infections have been observed. Since its discovery in 1981, AIDS-related illnesses have claimed the lives of 35 million people worldwide. Currently there are 36,7 million people living with HIV globally. Approximately 2,1 million people were diagnosed with HIV in 2015. 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. In the early stage of HIV disease the level of gut CD4+ Th17 declines in response to the alteration of the gut in normalmicroflora. A study of model animal having inflammatory bowel disease showed that combination of probiotic bacteria can up regulate the Tregactivation, which suppress the proinflammatory immune response in the animals. Preliminary studies showed that probiotic supple-

ments enhance the growth and protection of CD4+ T-cells (Cunningham-Rundles et al., 2011). Therefore, it is assumed that probiotic bacteria can provide benefit in HIV treatment specially children who were infected before the development of their gut flora(Dicks, Fraser, ten Doeschate, & van Reenen, 2009).

The purpose of research. To study the condition of dysbacteriosis of intestinal microflora in HIV patients and to justify the use in this HIV patients probiotic bactosporulin to improve the treatment of HIV infection.

Scientific novelty. It has been studied for the first time the large intestine microbiocenosis and the possibility of reducing the severity of colon dysbiosis of HIV patients through the use of probiotic bactosporulin in Uzbekistan.

The tasks of research . To reveal the degrees of colon microbiocenosis condition and intestinal dysbacteriosis in patients with HIV and to assess the effect of application bactosporulin.

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. 30 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 14 (47%) – men, 16 (53%) – women, the age of them from 25-45 (average 35). 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 patients' faeces of dysbacteriosis was revealed in patients. *E. coli* 10^5 CMU/g, quantity of lactose negative *E. coli* >10^6, *Lactobacillus spp*.> 10^4 CMU/g, *Bifidobacterium spp.* >10^3 CMU/g, *Bacteroid spp.* >10^4 CMU /g, *Enterococcus spp*. decreased than in norm, condition – pathogen microbes: *Klebsiella spp., Enterobacter spp., Citrobacter spp., Proteus spp.* 10^6 CMU / g, *Candida* >10^7 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. Under the influence of a course of probiotic bactosporulin microbiocenosis colon is significantly improved: it is completely normal in 18,4% of patients and 71,5% in the degree of its severity is reduced.

MEDICAL DISCRETE PLASMAPHERESIS IN SEVERE FORMS OF PSORIASIS

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Introduction: Psoriasis is a common skin disease that occurs in 2-3% of patients with skin diseases. There are nervous, viral, endocrine, inflectional and allergic, and other theories of the origin of the disease. In psoriasis rash is monomorphic: red papules, correctly rounded shape, flat, of different sizes, covered with silvery white

scales plate (M.V.Melich, Lapchenko SN, 1984). Plasmapheresis (PPh) in psoriasis shows first of all patients suffering from a universal erythroderma lesions skin- and exudative form of the disease.

The goal of this study is to investigate the effectiveness of the application of discrete therapeutic plasmapheresis in psoriasis.

Materials Methods: The research involved 27 patients from the department of skin and venereal diseases. Among them, 14 women and 13 men aged from 17 to 43. The average age was 30,05±1,05. The patients were divided into two groups. The first group included 13 patients with traditional methods of treatment. The second group consisted of 14 patients, whom was carried out as discrete therapeutic plasmapheresis in paralle as well traditional methods. PPh was held by intermittent manner using disposable plastic containers "Hemasin-500/400" and a device for blood transfusion, blood products, refrigerated centrifuge (PC-6) by separating the blood into packed red blood cells and plasma. For one procedure let blood in the volume of 500 ml from the patient, the amount of separated plasma at each session was 220-250 mL. The treatment consisted of 5-6 PPh procedures. Monitoring was conducted in terms of the peripheral blood, protein metabolism and other factors. PPh was conducted in Sam-MI clinic № 1, at the department of hematology. As displacement fluid used 0.9% of sodium chloride by 500.0 ml. All patients underwent a detailed overall analysis, biochemical analysis, immunological blood test, ECG, hepatitis B and C and HIV infection.

Results: At 14 patients had been observed the reduction in activity of the process, reducing the infiltration in the plaques and the subsequent resolution of rash after the combined treament. The change in a positive way of immunogram that expressed in increase of the number of T-lymphocytes, phagocytic activity of neutrophils stimulation, a decreasing of CIC (Circulating Immune Compromise) in the blood. And 13 patients with traditional methods of treatment, change in the immunological analysis and improvement of skin rashes was observed insignificantly.

Conclusion: Thus, the use of the PPh in patients with severe forms of psoriasis facilitates their suffering, prevents further progression of psoriasis, significantly shortens the hospital stay and the onset of clinical remission. Against the background of the PD, we recommend only the outside of psoriasis therapy, and overall complex therapy conducted after the completion of plasmapheresis.

CLINICAL ASPECTS OF SALMONELLOSIS WITH COMORBIDITY

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Bacteria of the genus *Salmonella* are highly adapted for growth in both humans and animals and cause a wide spectrum of disease. The remaining serotypes (non-typhoidal *Salmonella,* or NTS) can colonize the gastrointestinal tracts of a broad range of animals, including mammals, reptiles, birds, and insects. More than 200 serotypes are pathogenic to humans, in whom they often cause gastroenteritis and can be associated with localized infections and/or bacteremia.

The aim of this study was: a study of salmonellosis associated pathology.

Materials and methods: we observed 16 (100%) patients with a diagnosis of salmonellosis with concomitant diseases of the gastrointestinal tract. 8 of 16 patients (50.0%) chronic cholecystitis, in 6.3% cases (1) chronic pancreatitis, 4 (25.0%) chronic colitis and in 2 (12.5%) with chronic hepatitis.

Results: The clinical aspects of salmonellosis found that 10 patients (62.5%) form of the disease was gastroenteritic form, at 25.0% (4) gastroenterocolitic form and 2 (12.5%) was enterocolitic form of the disease. At the same time 12.5% (2) patients had mild illness salmonellosis, in 14 (87.5%), a severe form. At 43.8% (7) of the patients the disease begins acutely with 38,5ºS increase in body temperature. The bed days was 12,4±0,6 days. All the patients in the clinic noted weakness (100.0%), nausea (100.0%), repeated vomiting and abdominal pain. In the analysis of abdominal pain revealed that in 6 (37.5%) patients noted pain around the navel, in 8 (50.0%) throughout the abdomen, in 2 (12.5%) in the right upper quadrant. The intensity of abdominal pain: In 81.3% cases were noted strong cramps in 18.7% cases, the mean pain. When survey in 3 (18.8%) patients had positive symptoms of Ortner and frenikus on the right side. One patient at the time of the underlying disease marked exacerbation of chronic hepatitis B in the clinic were symptoms such as jaundice of the skin, dark colored urine, increased total bilirubin, ALT and AST. In 75.0% of patients had liquid stools with offensive odor, mixed with mucus. In 87.5% of the patients stool frequency was 5 to 10 times per day, 12.5% of patients up to 5 times. On average, diarrhea continued to 9,2±0,6 days. In 9 (56.3%) patients in coprogram with the presence of inflammatory bowel changes are also found undigested cellulose, undigested muscle fibers and the appearance of the starch. In 4 (25.0%) increasing fat (steatorrhea) and bile acids in stool.

Conclusion. Thus, with concomitant diseases characterized salmonellosis heavier (87.5%) and long (12,4±0,6 days) course of the disease. Symptoms related diseases aggravate symptoms of the underlying disease.

THE STUDY SURVIVE BACTERICIDAL HAEMOPHYLUS INFLUENZAE HEALTHY AND SICK CHILDREN, LIVING IN THE REGION OF SOUTHERN ARAL SEA

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Scientific working the range of the researchers is estabelished that hemophilic infection is appeared typical anthroponoses, host of an infecting agent is Haemophylus influenzae. It is known that usual stamp Hemophyly inflluinza discharge from mucose to 90% health people, that hemophyl infection type b (Nib) revealed no more than 5%. The most susceptible age of people from several months before one year though the most high level of the demage from 6 months in a year. Origin to infections possible and injured from 5 years, and even adults, when hemophel infection develops on unfavourable background - heavy congenitale pathology, canceropathology immunodeffiensionsis deferent genisis, nonevropeans contries and others. More than expressing pathogenicity these stamp is associate with capsule able to destroy phagocytes. The found synergism of the action between hemophylies bacilli and some respiratory virus.

The Purpose of the study. The study and estimate point of hemophyles bacteria at bronchopulmonary disease beside children, constantly living in region ecological not favorable - Southern of Aral sea (the Republic Karakalpakstan).

The Problems of the study: 1.The study survival agents with sick bronchopulmo-

nary diseases with children, constantly living in region Southern Aral sea (on example of the Republic Karakalpakstan). 2. The Study of the fields hemophyls bacteria in structure of the agents bronchopulmonary diseases with and feature main taxonomic sign these microorganisms. 3. The study relationship the development bronchopulmonary diseases with children bacterial carrier Haemophylus influenzae.

The Material and methods of the study. For performing resolution purpose were examined more than 136 children to 15 age sick bronchopulmonary diseases, constantly living in region ecological not favorable- Southern Aral sea (RKK).

We were identified 84 stamp (61,7%) Haemophylus influenzae from 136 sick children bronchopulmonary diseases, more them 61 stamp (72,7%) depend to the type b. It is necessary to mark that examined contingent more often survival Haemophylus influenzae type b, which in 1,4 more than revealled, than other biovars. The getting results show that most of all the biological material sow stamps Haemophylus influenza (n=84), which have consist of 42,7% from all identified stamp (the rice. 3.1). The follow place were located such agents Streptococcus viridians (28,4%), Staphylococcus epidermis (12,7%), KIebsiella pneumonia (9,7%), Pseudomonas aeroginosa (3,5%), Staphylococcus aureus (2,5%) and Streptococcus pyogenes (0,5%). In two cases to identify the costive not to failure. The getting results have shown that the most often in the kind of monoculture to appear Haemophylus influenzae in 35,0% cases (n=69). Then in order of the destroy survival monoculture revealed by bacteriological methods cositive agents located as the follows (the rice. 3.2): Streptococcus virulens (11,2%, n=22), Staphylococcus epidermic (5,6%, n=11), Klebsiella pneumonia (4,6%, n=9), Pseudomonas aeroginosa (2,5%, n=5), Staphylococcus aureus (0,5%, n=1).

As can be seen from got given of finding dates in order with Haemophylus influenzae in most cases sow the gram-negative coccus (S.viridians, S.epidermidis, S.aureus), but germination rate gram-positive bacteria (K.pneumoniae, P.aeroginosa) was on order less, than pathogenic and conditionally-pathogenic coccus. It is necessary to emphasize that in the kind of monoculture identify Streptococcus pyogenes not to failure (0%).

EVALUATION OF QUALITY OF RESEARCH USING THE METHOD “DRY TEST TUBE”

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Nowadays objects of scientific and diagnostic biomedical laboratories all over the world are the nucleic acids:DNA and RNA.The studies are set task requiring not only detect the presence of the target nucleic acid in the sample, but alsoto determine its quantity and the original nucleotide sequence (sequencing).The most affordable,reliable,and highly sensitive method to detect DNA in a sample and to evaluate its amount,is the method of polymerase chain reaction (PCR).

Considering the period of preservation of the genetic material (6 and 24 hours) as well as the hot climate conditions and long distances between centers to implement this point PCR study with a conventional blood sample of the patient is not possible.

One way out of this situation would be to use an alternative method of “dry test tube”.

The aim of our research is to evaluate the diagnostic efficiency of “dry tube” method for quality control of PCR studies.

Research objectives: 1. Perform simultaneous molecular genetic analysis of clinical matter collected by traditional methods and alternative methods.2.Identify the degree of comparability and discordancy couples during determining the genetic material collected traditional methods and alternative methods.

Subject of research: the blood of patients with infectious diseases.

Methods: Laboratory-polymerase chain reaction,statistics.

Dryblood spots and whole blood samples were collected to conduct simultaneous investigations.There were 30 samples (15 blood samples and 15 dry blood spots) are positive for HIV infection .Testing was conducted in a Reference Laboratory of Virology Research Institute of Ministry of Health of the Republic of Uzbekistan by using of PCR in real time using a production test systems OOO "InterLabService".

It was found that the studied test conducted in accordamce with the manufacturer's instructions,showed a sensitivity in 90%.In this test samples of dry drop show the lower result 78%.Both results are statistically significantly different from the reference values.Including findings has been developed several approaches to change the standard procedure that have been tested in the experiment.So changes were applied to a set of nucleic acid extraction solutions for elution of the "dry drop",the exposition time of dry drop solutions.In the case of the results of the sensitivity of below 75%,the experiment in order to save money stopped at an early stage,further research is not performed according to the procedure.

In the test,an additional exposition was added over 60 min.at room temperature,resulting in improved sensitivity from 75% to 90%.

In our work we evaluate and the quality of diagnosis,ie,increase the sensitivity of the methodology for determining the DNA of HIV through the use of samples.Adding an additional time during the extraction,greatly improving the sensitivity of the method to acceptable.

CLINICAL AND LABORATORY CHANGES IN PATIENTS WITH VIRAL HEPATITIS A AND DISEASES OF THE DIGESTIVE SYSTEM

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Still one of urgent problems remains the viral hepatitis A (HAV), because its epidemics can have explosive character (large outbreaks) and to lead to substantial economic losses. On recovery of health of people for return to work, weeks and months can go to school and to everyday life. Person-to-person spread of HAV is enhanced by poor personal hygiene and overcrowding; large outbreaks as well as sporadic cases have been traced to contaminated food, water, milk, frozen raspberries and strawberries, green onions imported from Mexico, and shellfish. Intrafamily and intrainstitutional spread are also common. Early epidemiologic observations supported a predilection for hepatitis A to occur in late fall and early winter. In temperate zones, epidemic waves have been recorded every 5–20 years as new segments of nonimmune population appeared; however, in developed countries, the incidence of hepatitis A has been declining, presumably as a function of improved sanitation, and these cyclic patterns are no longer observed.

Diseases of the digestive system often diagnosed in children's at age 5-6 and 9-12 years, during the periods of the most intensive development of all bodies and systems (Kleymenov V. M., 2006).

The aim: to study features of clinical and laboratory indicators at patients with a severe form of the viral hepatitis A (HAV) against the background of diseases of the digestive system.

Materials and methods. Under observation were 30 (100%) patients with a severe form of HAV average age of which made 14,89±1,89 years receiving hospitalization on base republic infectious diseases hospital. The studied patients are divided into 2 groups: the first group consisted of 15(50%) patients with associated diseases from a GIT (gastritis, cholelithiasis, dyskinesia of biliary tract) and 15(50%) patients without associated diseases from a GIT.

Results. Level of the general bilirubin in the general group was 188,08±5,87мкмоль/л. ESR value in the general group made 11,46±0,94 mm/h. At 15(50%) patients of the first group with the advent of an jaundice visible mucous and integuments in clinic such symptoms as vomiting, a loss of appetite, unpleasant taste in a mouth, pain and feeling of gravity in epigastric area within 5,7±0,1 days proceeded to become perceptible. In ultrasound examination of a gall bladder at all patients the expressed revesical edema is taped. ESR value made 15,46±1,13 mm/h. Level of the general bilirubin in the general group made 212,77±7,30 μmol/l.

At 15 (50%) patients of the second group vomiting, a loss of appetite, unpleasant taste in a mouth, pain and feeling of gravity in epigastric area continued to become perceptible after emergence of an jaundice visible mucous and integuments within 3,29±0,15 days. In ultrasound examination of a gall bladder at 1/3 patients of this group the revesical edema is taped. ESR value made 7,46±0,37 mm/h. Level of the general bilirubin in the general group made 163,40±1,83 mkmoll/l.

Conclusion. It is established that at patients with a severe form of a viral hepatitis And, proceeding against the background of diseases of the digestive system prolongation of a dyspepsia syndrome, a delay of convalescence of the patient and existence in this group of more expressed intoxication syndrome becomes perceptible.

COMPETITIVE FLORA OF FACIAL SKIN AND SCALP

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1. The urgency of the problem: It is known that the microbiocaenosis of skin plays important role in homeostasis of an organism. Disorder in certain components of homeostasis changes the microsystem and leads to skin dysbacteriosis. Despite the numerous theories about the normal microflora, there are still continuous discussions about the factors, causing the development of diseases. With the progress in cosmetology and TV commercials about cosmetic products, mankind began to oftenly use cosmetics without paying any attention to the composition or to the side effects of these cosmetic items. As a result, this has led to problems in the field of dermatology. Various hygienic and cosmetic products, based on its composition, can disrupt the normal microflora, and this in turn makes it possible to develop pathogenic and opportunistic pathogenic microorganisms on our skin.

2. The goal of the study: The goal of the research is to study and define the microor-

ganisms, found on the skin of the face and scalp in healthy individuals (control group), as well as in patients suffering from disorders in these areas of the body. We chose these areas of the body, as there are plenty of lipid mixture, secreted (emitted) by the sebaceous glands, which are a good breeding ground for various microorganisms.

Materials and methods: A) Taking swabs from the folds of the ear and nose, for bacteriological and mycological examination.

B) Determination of the enzymatic properties of detected microorganisms.

B) Cultivation and detailed study of microorganisms comprising the normal flora of the facial skin and scalp.

Expected results: 1. To obtain the data on the ability of microorganisms of the normal flora of human to inhibit the growth and act against pathogenic and opportunistic bacteria.

2. To exclude all the factors that stimulate the emergence and proliferation of pathogenic flora on the face.

3. In the future, to develop an action plan to prevent disorder of the microflora of human facial skin and scalp.

Conclusions. While interpreting the results, taking into account their enzymatic properties, to identify which of the microorganisms affects favorably, thereby protecting our body, and which one affects negatively. After reviewing the data, we can understand how to protect ourselves in the future, without damaging the microflora of facial skin and scalp.

APPROACH TO TREATMENT IN PATIENTS WITH INTESTINAL DYSBIOSIS CHRONIC LIVER DISEASE

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Objective: to study the effect of pre- and probiotics on the course of the underlying disease and the impact on microbiocenosis colon in patients with chronic liver disease (CLD).

Material and methods. The study included 100 patients with CLD with dysbiosis colon varying severity aged 20 do71 years. Surveyed were divided into 5 groups of 20 people. Patients of the 1st, 2nd and 3rd groups received supplemental probiotics: Linex, laminolakt, biofank bio plus; Group 4-gepatoprotektor ursofalk a prebiotic effect, patients of Group 5, standard therapy. Monitoring of clinical, biochemical, immunological, bacteriological parameters was carried out after 1 month.

Results. Patients treated with pre- and probiotic therapy after 1 month showed normalization of intestinal microbiocenosis ($p < 0,05$). Restoration of the colon microflora occurred due to the growth of bifidobacteria and lactobacilli, the total number of E. coli, reducing the number of conditionally pathogenic strains (Klebsiella, Enterobacter, Proteus, Citrobacter), hemolytic organisms, yeast fungi of the genus Candida. B1 the first group, while taking lineksa, there was a decrease of severity of pain (analgesic effect) and the activity of ALT and AST ($p < 0,05$). In group 2, while taking laminolakta, decreased symptoms of cholestasis: the content of total, direct and indirect bilirubin, alkaline phosphatase, GGT ($p < 0,05$). B3 of the first group, while taking biofank bio plus, there was a decrease of total cholesterol, triglycerides, HDL, LDL, VLDL ($p < 0,05$).

Conclusions. The revealed features of the influence of study drugs have shown the effectiveness and purpose of an integrated approach to the correction of gut microbiota, the impact on individual clinical and laboratory manifestations in CLD patients with intestinal dysbiosis.

STATE OF PARAMETERS OF NUTRITIONAL STATUS IN LIVER CIRRHOSIS

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The aim of the study was to determine the sensitivity of the individual parameters of nutritional status in liver cirrhosis of viral etiology.

Materials and Methods: We examined 66 patients with liver cirrhosis of viral etiology in which the parameters of nutritional status were evaluated: body mass index (BMI), skinfold thickness over the three-headed arm muscle (STTH), circle the shoulder muscles (CSM), albumin and transaminase serum absolute lymphocyte count (ALC) peripheral blood. Integral indicator of nutritional status was determined by assessing each of the indicators in points and their summation. sensitivity index as the proportion of people with a positive test result in the group with impaired nutritional status with definition 95% CI, which is calculated on the basis of the criterion of z (z 0,05 = 1,96).

Results of the study. We have found that for most malnutrition often largely deviated parameter 4 - STTH, CSM, albumin and ALC. The highest sensitivity for the detection of nutritional deficiency in the total group had laboratory values - with the same frequency albumin (73.6%, 95% CI 66,8-80,5%) and BCC (73.7%; 95% CI 64.1% - 81.0%). From the anthropometric indicators showed greater sensitivity index WMD (61.2%; 95% CI 52.4% -67.5%) and the lowest STTH (35.6%; 95% CI 27,0-45,6%). In-selective the severity of malnutrition group analysis showed that for the assessment of mild nutritional deficiency low degree of sensitivity and moderate anthropometric tests - lab tests. The sensitivity of all tests increased with the increasing degree of malnutrition. Thickness STTH becomes significant only at 3 degrees of nutritional deficiency.

Conclusions: The most sensitive tests for the assessment of nutritional status in patients with liver cirrhosis are bovine serum albumin and the absolute number of peripheral blood lymphocytes, and anthropometric indices vary only in severe degree of malnutrition.

THE OPTIMIZATION THERAPY OF SCAR ALOPECIA OF THE SCALP WITH LICHEN PLANUS

Safarov X.X., Ismailova F.Z.

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Follicular form of lichen planus (flat hair lichen, lichen planus) - one of the most frequent causes of cicatricial alopecia of the scalp. According V.G Kornisheva and G.A Yezhov (2012) in 90% of cases psevdopelada Brock called lichen planus. The defeat of the scalp can be isolated and combined with nonscaled alopecia in the arm-

pits and pubic area, as well as follicular papules on the skin of the trunk and limbs (Little-Piccardi-Lassyuera syndrome) (Skripkin JK, Mordovtsev VN , 1999).

The purpose : The study optimization therapy of the scar alopecia of the scalp with lichen planus **.**Not always all the triad is represented, but two symptoms occur most often: follicular papules on the skin and scarring alopecia of the scalp (S.I Dovzhansky, Suvorov AP, 1976). Most scientists attribute the disease to atypical forms of lichen planus, as evidenced by the characteristic pathological changes.

Materials and methods.We observed 11 patients with follicular uncalcificated red lichen, 10 women and 1 man. The average age of onset was 49.3 years. Duration of disease averaged 3.8 years. One patient foci of hair loss appeared during pregnancy, the patient connects the occurrence of other diseases with the onset of menopause, one - with the wrong ingestion of bleach solution. Of the comorbidities in 7 patients were detected gastrointestinal disease (chronic gastritis, cholecystitis, pancreatitis, reflux esophagitis), from 5 - arterial hypertension, in 4 patients had hypothyroidism, in 2 - type 2 diabetes. Previously, 4 patients are not treated, the rest used only local therapy (D'Arsonval scalp, oils, shampoos, hair loss), without much effect.

When viewed on the scalp, especially in the parietal region, all patients had lesions of alopecia round and fancy shapes, with a diameter of 1 to 3 cm, merging with each other. The skin in these areas was smooth and shiny, the mouth of the hair follicles were absent, the majority of patients at the periphery of the foci of alopecia observed redness with blurred and there were some small follicular and perifollicular papules flat red color and in 2 patients - small yellowish spots. In 3 patients, the hair on the periphery of the alopecia areas easily epilate with necrotic inner root sheath. In 3 women studied, we observed alopecia in the armpits and pubic area. At 1 male skin anterior-lateral surface of the tibia revealed follicular papules red color, on the surface of the more recent elements were horny spines of the papules was excoriated and was located on the site of a linearly scratching. At 2 people on the side of the surface of the skin of the arms marked spinous small nodules without visible inflammation. Small flat shiny papules pink with a purple tinge on the skin loin were from women and 1 in radio-ulnar fold - a man. A typical form of lichen planus on the buccal mucosa was present in 3 patients. Subjectively, 5 patients worried about itching of the lesions, 3 - a burning sensation.

Dermatoscopic picture of the affected area of the skin of the scalp characterized by white perifollicular hyperkeratosis, the mouth of the hair follicles in the foci of alopecia were not determined. The histological study of biopsies in the areas of alopecia revealed atrophy of the epidermis, flattening of epithelial outgrowths on the periphery of the foci of follicular hyperkeratosis, gypergranulosis, at the lower pole of the follicle and around the hair follicle was observed dense lympho-histiocytic infiltrate the cells of which penetrated the outer root sheath. In the dermis determined by perivascular infiltrates and some parts of the characteristic infiltration by lymphoid cells of the upper parts of the dermis.

Results .In the complex therapy, along with drugs that improve the microcirculation (pentoxifylline), B vitamins and topical corticosteroids in lotion form and mackerel, the domestic selective immunosuppressant thymodepressin was used. The drug was administered daily by intramuscular injection of 2 ml for 10 days in two cycles with an interval of 10 days. Marked regression congestion in the lesions by an average of 5.2 days, the hair tension test turned negative by 6.1 day, a signif-

icant flattening of the blanching and color papules on the scalp and body observed by the end of the first cycle of administration thymodepressin in all patients.

By the end of the second cycle in 9 patients papular rash on the scalp and on the body 2 resolves, 2 people were kept isolated pale pink elements on the scalp. Subjective complaints of itching and burning stoped by 7.8 day.

Conclusion. Thus, the inclusion of the complex therapy of patients with hairy flat deprive thymodepressin possible to achieve marked .

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Safarov H.H., Ismailova F.Z.

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CLINICAL AND X-RAY FEATURES OF DESTRUCTIVE FORMS OF PULMONARY TUBERCULOSIS IN NEWLY DIAGNOSED PATIENTS

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The purpose was to study the clinical and radiological features of the destructive forms of pulmonary tuberculosis (infiltrative lung tuberculosis with disinteration, dissemination tuberculosis with disinteration, fiberotic-cavernous tuberculosis and cavernous tuberculosis) in newly diagnosed patients.

Material and methods: We examined 105 newly diagnosed patients with destructive forms of pulmonary tuberculosis (infiltration tuberculosis light with disaggregation, disseminated pulmonary tuberculosis, fiberotic - cavernous tuberculosis and cavernous tuberculosis), who underwent inpatient treatment in therapeutic department of Republican Specialized Scientifical Practical Medical Centre of Tuberculosis and Pulmonology and First City clinical tuberculous hospital within 2015 – 2016 years.

Results: Number of the male patients was as much as 71(67,6%) and the female patients number was equal to 34 (32,4%). In an age range the biggest proportion fell on young ages from 20 to 30 years - 29 (27,1%), followed by middle ages from 31 to 40 years - 24 (22,8%); then age group from 51 to 60 years - 19 (18,1%); senior than 60 years - 17 (20,3%) and from 41 to 50 years - 16 (15,2%) patients. Analysis of the subgroups of destructive forms of tuberculosis showed that more than fifty percents of patients (74 (70.5%)) diagnosed with infiltrative tuberculosis with disag-

gregation, in 11(10.4%) fibrous and cavernous tuberculosis, in 16(15.3) disseminated pulmonary tuberculosis, and in 4(3.8%) patients detected cavernous tuberculosis.

General health condition almost in all patients was estimated as moderate on admission - 103 (98,1%), beside 2 (1,9%) patients in severe condition.

General manifestations of the disease were presented in all patients. Intoxication usually was accompanied by weakness and was presented in 98 (93.3%) patients, weight loss - 81 (77,1%) patients, reduction of the appetite - 93 (88,5%) patients, increased perspiration - 73 (69,5%), fever - 69 (65,7%).

Bronho-pulmonary syndrome was presented with the productive cough and expectoration of sputum in 95 (90,4%) patients, dyspnea - 67 (63,8%) patients, pain in thorax - 33 (31,4%) patients.

The main disease complications were presented by cardiopulmonary deficiency - 12 (11,4%), respiratory insufficiency - 31 (29,5%), cachexia - 7 (6,6%), bloody expectoration - 6 (5,7%) and pleurisy in 4 (3,8%).

In 80 (76,1%) patient the process was unilateral, in 25 (23,9%) – bilateral o X-rays. In 89 (84,7%) patients the process was localized in one lobe of the lung, more than one lobe of the lung was involved in 16 (15,3%) patients.

Seventy six (72.3%) patient detected as MBT positive, 61.2% of them diagnosed by microscopy, 88% by bacteriological methods.

All patients were prescribed antituberculosis chemotherapy: isoniazidum, rifampicinum, pirazinamidum and ethambutolum. About 50% of the patients showed improvement - 48 (45,7%), insignificant improvement showed 54 (51,4%) patients and state of 3 (2,9%) patients with decompensated forms of diabetes mellitus did not change.

Conclusion. Analysis of data showed that destructive forms of pulmonary tuberculosis more frequently occurs middle age adults and proceeds with severe intoxication symptoms affecting one lung lobe and MBT positive smear tests.

THE COURSE OF VIRAL HEPATITIS IN PATIENTS CO-INFECTED WITH TB / HIV

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Andijon region

Objective: To study the clinical features of viral hepatitis in patients with pulmonary tuberculosis with HIV infection.

Materials and methods: In 2015, on the basis of GKTB№1 3-therapeutic department examined 32 patients with pulmonary tuberculosis in patients with HIV infection. All these patients were ELISA diagnosis of viral hepatitis C.

Results: Analysis of sex structure showed that the vast majority of patients were men - 24 (75%) and only 8 (25%) - women. In the study of social status was found that 20 (62.5%) patients suffered from drug addiction, 9 (28.1%), have been released from prison, and 6 (18.7%) suffered from alcoholism.

Clinical forms of pulmonary tuberculosis were presented mostly infiltrative - in 12 (37.5%) and disseminated pulmonary tuberculosis - in 11 (34.4%) patients. Less commonly encountered patchy - in 3 (9.3%) patients, fibrocavernous - in 2 (6.2%) patients with extrapulmonary tuberculosis - in 2 (6.2%) and in one case revealed caseous pneumonia.

Bacilli found in 13 (40.6%) patients, destructive changes in the lungs were de-

tected in 20 (62.5%) patients. Analysis of the results of our study showed that the most common pulmonary tuberculosis in HIV infection combined with bronchopulmonary mycosis - in 25 (78.1%) cases. In 5 (15.625%) patients with markers of viral hepatitis C was found

Treatment of tuberculosis process in HIV-infected patients was conducted in accordance with generally accepted schemes.

Efficacy of treatment was assessed by clinical and basic radiological and laboratory criteria: the disappearance of symptoms of intoxication, cessation of bacterial and fungal isolation, closure of cavernous lesions and normalization of the inflammation by the end of inpatient treatment.

As a result of the treatment achieved positive changes in 25 (78.1%) patients with no response - in 8 (25%), against a background of deterioration of the treatment was observed in 2 (6.2%) patients, and death on the background of complex treatment in 5 (15.6%) patients.

Conclusion: Thus, the feature of Viral Hepatitis Clinic in HIV-infected patients with pulmonary tuberculosis is difficult for TB since these patients are infected by three infections. Low efficiency of the treatment is associated not only with severe tuberculosis in HIV infection, but also with the addition of viral hepatitis, as this contributes to an even greater violation of immune homeostasis the body and great.

LABORATORY CHARACTERISTICS OF CHRONIC HBV WITH CONCOMITANT GIARDIASIS

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The problem of chronic viral hepatitis is the one of most important problem of the health care all around the world, including the Republic of Uzbekistan, despite great advances in its study. In recent years it is very interesting clinical and pathogenetic features of chronic HBV with other infectious and somatic diseases, such us chronic tonsillitis, ulcerative colitis, parasitic infections, acute respiratory infections, giardiasis. Giardiasis is an important problem in both children and adults. At the present time we have no enough published data on the incidence of intestinal parasites, including giardiasis in patients with chronic viral hepatitis. Not determined the level of interaction of viruses and parasites in the course of disease. Insufficient disclosure issues clinics and treatment of this type of co-morbidities. Most information in the literature on the clinical section refers to the period of the 80-90 years of XX century, and hasn't clear etiological connection with verification of viral hepatitis.

The purpose of the study is to identify the main laboratory patterns of chronic hepatitis B with giardiasis.

Materials and methods. The study was conducted from 2013 to 2015 years at the clinic of Epidemiology, microbiology and infectious diseases research institute. We studied the laboratory data of patients with chronic hepatitis B with giardiasis (main group) and chronic hepatitis B without giardiasis (control group). The thesis presents the results of a study of some laboratory parameters of 42 (100%) patients with chronic hepatitis B at the age of 16 to 73 years. 24 of them where male and 18 female. In 22 (52.4%) patients with chronic hepatitis B was combined with intestinal giardiasis.

Results and discussion. The duration of the chronic HBV infection of 42 (100%) patients varied widely. In 4 (9.52%) patients didn't exceed 12 months, in 15 (35.71%) patients 2-3 years, in 18 patients (42.86%) over 3 years. In 5 (11.90%) patients to determine the duration of the disease was not possible, because the patients were found incidentally during the laboratory examination or planned hospitalization to therapeutic or surgical departments.

Analysis of biochemical studies have shown that all patients chronic viral hepatitis run with minimal activity (ALT up to 2 of standard). Increased levels of bilirubin were significantly higher in patients with chronic HBV+giardiasis, representing 45.68±3.82, and in group without giardiasis the level of bilirubin was 29,5±3,68. Significant differences were observed in the group with chronic HBV+giardiasis when was studied common blood test. Thus, the level of eosinophils in the group with HBV+giardiasis was 5.77±0.518, and in the group without giardiasis was 1.75±0.204. The levels of hemoglobin in patients with chronic HBV+giardiasis was 101,2±3,747, and in the group without giardiasis was 117,9±3,745.

Conclusion. More pronounced of the cholestatic syndrome in the group with chronic HBV+giardiasis, than in the group without giardiasis. It is indicates a higher level of bilirubin in the blood serum. In patients with chronic HBV+giardiasis were lower level of hemoglobin and higher level of blood eosinophils.

THE INFLUENCE OF SOME INDICATORS OF CALCIUM METABOLISM IN PATIENTS WITH PSORIASIS

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Actuality of the theme. Psoriasis - a chronic immune-heterogeneous hyper proliferative 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 35 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. Onyhodystrophy 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 in the blood, calcitonin serum immunocardiology method.

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.

COMPARATIVE ANALYSIS OF THE INCIDENCE OF SALMONELLOSIS IN RECENT YEARS IN UZBEKISTAN

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In March 2007, around 150 people were diagnosed with salmonellosis after eating tainted food at a governor's reception in Krasnoyarsk, Russia. Over 1,500 people attended the ball on March 1, and fell ill as a consequence of ingesting Salmonella-tainted sandwiches. About 150 people were sickened by Salmonella-tainted chocolate cake produced by a major bakery chain in Singapore, in December 2007.

About 142,000 people in the United States are infected each year with Salmonella Enteritidis from chicken eggs, and about 30 die (Black, Jane; O'Keefe, 2009). In 2010, an analysis of death certificates in the United States identified a total of 1,316 Salmonella-related deaths from 1990 to 2006. These were predominantly among older adults and those who were immunocompromised (Cummings, PL; Sorvillo F; Kuo T., 2010).

The aim of this study was to: a comparative analysis of salmonellosis in 10 years.

Materials and method: To this, in 2015, under our supervision there were 20 patients diagnosed with salmonellosis (the first group). For a comparative perspective, we conducted a retrospective analysis of 30 medical histories of patients diagnosed with salmonellosis were in the clinic Research institute of Epidemiology, Microbiology and Infectious diseases in 2005 (the second group).

Results: Comparative studying aspects of both groups found that regardless of the year suffered from salmonellosis usually middle-aged people, the average age of patients in the first group was 38,0±1,4, the second group, 26,5±1,1 years. From medical history revealed: 50.0% (10) patients in the first group and 16.7% (5) of the second group of patients before admission to hospital was carried out self and taking various antibiotics.

The first group of 20 patients at 65.0% (13) was gastro-enteritic form of disease, in 35.0% (7) gastro-enterocolitic form of diseases. At 60.0% (12) patients the disease was of medium severe, at 40.0% (8) severe (P <0,05). At 30.0% (6) of the first group of patients with the disease begins acutely with fever to 37,5ºS. In the second group of 30 patients at 63.3% (19) was gastro-enteritic form of disease, in 26.7% (8) gastroenterokoliticheskaya and 3 (10.0%) compared with the first group was gastro-enteritic form of disease (P <0 , 05). Also, 10.0% (3) of the second group of patients compared with the first detected a mild form of the disease (P <0,05), in 27 (90.0%), medium severe. In the second group, 36.7% (11) patients with the disease

also began to increase sharply 37,5ºS body temperature. Bunk days the first group was 10.4±0.6 days in the second group 8.8±0.7 days.

Conclusion. Thus, 10 years ago, salmonellosis sick people of a younger age compared with those of recent years. In recent years, salmonellosis is characterized by more severe course of the disease (40.0%). In our opinion, this is due to the uncontrolled and indiscriminate use of antibiotics.

SIGNIFICANCE OF INDIVIDUAL RISK FACTORS IN THE DEVELOPMENT OF EARLY RECURRENCE OF PULMONARY TUBERCULOSIS

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Purpose of the research: Investigate causes and factors conducive to the development of early recurrence of respiratory tuberculosis.

Material and methods: Object of the research – 74 patients with relapses of pulmonary tuberculosis treated in 2016 year in Republican Research and Practical Medical Centre of Phtysiology and Pulmonology in Tashkent.

Results and discussion: 74 patients examined with relapses of pulmonary tuberculosis, treated in the 2016 year. In the working age population, proportion of unemployed patients amounted to 65 (87.8%) patients, 70 patients had secondary education (94.6%). Patients with relapse included less seniors and persons with disabilities – 17 (23%). According to our data, patients with early relapses comprised 54 (72.3%), late relapses 20 (27.7%); under 30 years old – 13 relapses (17.6%); from 31 to 40 years old – 39 (52.7%), from 41 to 50 years old – 15 (20.3%), 51 years old and older – 7 (9.4%).

In summary, recurrence of pulmonary tuberculosis occurs more often in men aged 31-50 years – 54 (73%) patients. Bacterioexcretion was identified in 46 (62.7%) patients. Early relapses of tuberculosis (compared with late course) frequently occured at the age of up to 40 years old. Women rarely had early relapses of tuberculosis 7 times less than men.

The main clinical form of early recurrence in 23 (42.6%) patients was infiltrative tuberculosis and in 17 (31.5%) cases of disseminated pulmonary tuberculosis. In early relapses focal tuberculosis was rarely detected – in 5 (9.3%) cases, and pleural effusion in 3 (5.5%) cases, fibrocavernous tuberculosis – in 6 (11.1%) cases.

More than 38 (70.4%) patients have co-morbidity. Most significant factors in the development of early relapse are the presence of hepatitis in 24 (44.4%) cases, narcomania in 11 (20.4%) cases and HIV infection in 14 (25.9%) cases.

Conclusions: The results indicate that a significant factor in lowering the risk of relapsing tuberculosis would be a change in the quality of life, optimization of treatment of concomitant pathology. Relapse of tuberculosis is characterized by the emergence of more common forms of tuberculosis with excretion of mycobacteria.

CHARACTERISTICS OF THE CLINICAL COURSE OF NEPHROTUBERCULOSIS WITH ASSOCIATED NONSPECIFIC PYELONEPHRITIS

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Purpose of the research: reveal the characteristic features of the clinical course of obstructive nephrotuberculosis with accompanying pyelonephritis.

Material and methods: Object of the research – 158 patients with tuberculosis of the urinary system, with nonspecific microflora in urine identified in 55 (34.8%) patients with predomination of Escherichia coli (38%) and Staphylococci of various types (29%) in Republican Research and Practical Medical Centre of Phtysiology and Pulmonology

Results and discussion: 158 patients were examined, 55 (34.8%) patients with concomitant nonspecific pyelonephritis, and 103 (65.2%) patients without concomitant nonspecific pyelonephritis. Proportion of patients with pain syndrome and disorders of urination proved to be roughly equal in both groups. At the same time, intoxication (general weakness, weight loss, low-grade pyrexia) and hypertension occurred significantly more frequent with a combination of nephrotuberculosis and pyelonephritis. The most frequent complications of nephrotuberculosis, complicated by obstructive uropathy without pyelonephritis – hydronephrosis (hydroureteronephrosis) (42.35%), tuberculosis of bladder (21.2%), nephrogenic arterial hypertension (23.5%), tuberculosis of urethra (0), and with concomitant nonspecific pyelonephritis – hydronephrosis (hydroureteronephrosis) (67.3%), tuberculosis of the bladder (31.6%), nephrogenic arterial hypertension (42.5%), tuberculosis of the urethra (2%).

Conclusion: It has been established that the presence of accompanying pyelonephritis in patients with nephrotuberculosis leads to a significant increase in the number of complications, i.e. arterial hypertension, hydronephrotic transformation, tuberculosis of urinary bladder, with its outcome to microcystis. In summary, severity of the clinical course of nephrotuberculosis varied depending on the presence or absence of pyelonephritis accompanying to the general diagnosis. It is arguable that the accompanying nonspecific pyelonephritis is complicating the clinical course of nephrotuberculosis, generally developing in patients with compromised urodynamics due to specific ureteritis, with its localization mainly in the lower third of ureter.

NEW TECHNOLOGIES IN THERAPY OF HUMAN PAPILLOMA VIRUS (HPV)

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One of the relevant problems in medicine nowadays are sexual transmitted infections (STI). Among these infections, important epidemiological meaning belongs to viruses, specifically to human papilloma virus (HPV). The recent years contamination of HPV increased in 10 times. Virus stimulates cell transformation and promotes cancer of cervix uteri, vulva, vagina, perianal area and genital condyloma acuminate.

HPV is divided into 3 groups: low carcinogenic risk (types: 6,11,42,43,44), high carcinogenic (types: 16, 18, 48, 56) and unestablished carcinogenic type (31, 33, 35, 39, 45, 51, 52, 58, 59, 68).

Aim of the research: to study comparative efficiency of CO2 laser vaporization, photodynamic therapy (PDT) and cryotherapy of condyloma acuminate of external genital organs and perianal area.

Materials and methods. 52 women with condylomas. CO2 laser vaporization was used in 21 patients. PDT was prepared in 5 patients, (with Healite II device and photosensitizers 10% Mild ALA) and in 26 patients was used cryotherapy.

Results of research. After single therapy: - laser vaporization provides (painless, noninvasive) total ablation of anogenital condyloma acuminate with full epithelization of erosions by 10 days.

- PDT provides painless and total clearance from condyloma acuminate by 30 days in average and complete elimination of virus from pathological area.

- cryotherapy with liquid nitrogen provides clearance from condyloma acuminate after 12-15 days, with painful stages of inflammation and necrosis.

Conclusion. Laser vaporization is efficient and economically profitable therapy, which can be used even in pregnant women . Benefits of PDT are noninvasive and selective for pathological tissue, and insure elimination of virus from affected area. Cryotherapy – procedure of choice in case of absence of laser methods.

THROMBOCYTES' AGGREGATION IN HYPERTHYROIDISM PHENOTYPE

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Introduction. Patients with hyperthyroidism have abnormalities of blood coagulation including an alteration of von Willebrand factor (vWF) levels. It is characterized that low concentration of the thyroid hormones affect tissue metabolism and developing hemostasis components such as vWF. Because vWF plays an significant role in initial hemostasis, it was hypothesized that heightened and decreased vWF levels in hyperthyroidism enhance and decrease platelet aggregation formation, respectively.

The Aim of the study is to investigate mechanisms of the development of hemostasis disorder in hyperthyroidism phenotype.

Method. Animal care and use were conducted according to established guidelines approved by the Tashkent Medical Academy and National Blood Transfusion Institute. Animals were housed in rooms maintained at 20ºC with a 12 h light-dark cycle. Experiment was performed over 28 male rats which mean weight was 180±17.56. Average age was 13-14 weeks. Animals were divided four groups and each group supported with 6 rats. 1st group animals were given 200 mg/kg L-thyroxin within 60 days in room temperature (20ºC). Second group was received 200 mg/kg L-thyroxin within 2 month, however, temperature was 40ºC. Next two group animals were intact (T=20ºC and 40ºC) or control groups and they were not given any drugs.

Results.TSH, T3, T4, fibrinogen, thrombocyte count, ADP-AG concentration changes were observed in all animals. TSH was 0.051±0.004 μEq/ml in first group of animals. In second and intact group animals, TSH was 0.062±0.005 and 0.037±0.002 μEq/ml respectively. T4 hormone concentration was 166.2±15.6 and 203.5±18.6 mg/dl in first and second groups respectively. However, in intact group animals T3 and T4 concentration were 110±13.59 mg/dl and 110±mg/dl. Fibrinogen was 2.17±0.19 g/l in first group; 4.51±0.30 g/l was in second group and 1.68±0.13 g/l in intact groups. Moreover, Thrombocytes count was 462±51x10^9/l in first group. In second group, it was 707±65x10^9/l, and 367±35x10^9/l in last control group animals. Analyses showed that spontaneous aggregation of thrombocytes were 8.9±0.7 percentage; 9.2±0.7%; 7.7±0.4% (1st, 2nd, and intact groups respectively). ADP-AG was 33.1±2.8 mmol/l*% in first group; 51.2±4.3 mmol/l*% in second group and 26.2±1.7 mmol/l*% in control groups.

Conclusion. Hyperthyroidism is commonly associated with hypercoagulability and hypofibrinolysis, whereas the hemostatic profile in hypothyroidism depends on the severity of the disease. Effects of thyroid hormone disorders to the platelet aggregation and secretion tests is necessary. Our study results showed that rats with hyperthyroidism reduce the platelet aggregation and decrease the secretion possessions of platelets. Hypothyroidism andautoimmunity may associated with a hypoaggregability and bleeding tendency.

THE STUDY OF YOUNG ATHLETS LIFE QUALITY

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The purpose and objectives. Life quality, as the concept of health is an integral characteristic of physical, psychological, emotional and psychosocial functioning of the person based on his subjective perception of the outside world. The study athletes QOL is one of the criteria of estimation to their potential in the process of its implementation to lead a healthy, productive, creative and active life.

The aim of this study is to examine the quality of life of young athletes with using Pedsql™4. 0 questionnaire

Materials and methods. Life quality has been studied among 237 athletes aged 13-18 studied , Chirchik College of Olympic Reserve using the international questionnaire Pediatric Quality of Life Inventory - PedsQL 4.0 Generic Core Scale. The questionnaire includes 23 questions on the following scales: physical functioning (PF), emotional functioning (EF), social functioning (SF), the life of the school (SchF). The number of points varies from 0 to 4 (0 — never, 1 - almost never, 2 - sometimes, 3 - often, 4 — almost always). Total score of the physical component of quality of life (including physical functioning scale). Total score of psychosocial functioning (PsF) (includes scales emotional, social, and life of the school). The mean of the scores on the 100 point scale is then calculated (sum of all items divided by number of items answered) and higher scores indicate a better quality of life. During the study was researched the training process and a training mode for each sport specialty.

Results. During assessment, all respondents most highly rated the "physical functioning" and slightly lower rated "social functioning". The lowest values in the "emotional functioning" and "life at school". Total score of QOL among young athletes is 86±4.1. Among them, the lowest rate in the turon discipline 79,0±5,0 and the highest rate among the judo 90,7±2,68 and boxing disciplines 90,1±3,4.

The study demonstrated the physical functioning (PF) among athletes in the discipline of wrestling was 88,0±10,0, turon 85.8±9,3, swimming 88,8±8 and 74, cycling 87,3±9,15, weightlifting 92.7±6,68, judo 93,8±6.2 and boxing 94.4±4,32. A comparative analysis of the psychosocial component (PsF) the average was equal to 84,6±4,4. The relatively high rates showed such sports disciplines as weightlifting 86,9, judo 89,6±7,67 and boxing 88,75±5.9. Athletes involved in cycling 84,6±10,0, swimming – 83,7±10,0, and wrestling 82.2±11.7 revealed average results. And only in the sports discipline turon 76,7±12,6 revealed a relatively low rate.

Discussion. The study athletes' life quality is necessary for the integral evaluation of their comprehensive functioning. Comparative analysis of performance in different sports disciplines demonstrate that, the most popular sports in the country have high. Special attention we should give for social functioning, which show low parameters. We have to compare and further examine the mental status of athletes and training competitive regime in a comparative perspective by sports types.

Conclusion. Permanent and balanced expansion of human possibilities adapt for changes in the external world gives sustain development of human potential. The study of quality of life of young athletes studying in specialized schools and colleges, gives an integrated assessment of their status.

Reveals the social, physical and psychological functioning as criteria of their adaptive capacity, which is especially important in achieving sports results.

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MEDICAL ASPECTS OF PROVISION FOR YOUTH SPORT

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Objective: Conduct a retrospective analysis of regulatory documents providing medical examination of children and adolescents involved in sports. Carry out a comparative analysis of outpatient's medical supervision. Develop a new optimized model of ambulatory e-cards for medical monitoring of the health of young athletes.

Materials and methods: Analysis of outpatient's form № 061/y; Retrospective analysis of regulatory documents for medical examinations of children and adolescents involved in sports of medical and sports clinic in Tashkent; Implementation of current and periodic medical examination of athletes on the example of young handball players and players; The survey of parents and analysis of results; Statistical analysis

Results: The results will allow to develop and introduce a new form of outpatient medical cards monitoring the health of young athletes, program monitoring the health of children and adolescents involved in sports. Results of the study are going to be introduced to the work of the sports physicians and trainers dealing with children contingent.

Conclusion: A retrospective analysis of regulatory documents of medical examinations of young athletes in specialized institutions will be performed. A model of the electronic health card of children and adolescents involved in sports in youth sports schools will be suggested. An electronic database for monitoring the health of young athletes will be formed.

PERFORMANCE INDICATORS OF FERROKINETICS AND EFFICIENCY OF COMBINED TREATMENT OF ANEMIA IN DIABETIC NEPHROPATHY

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The role of chronic hyperglycemia in the development of late complications of diabetes is generally acknowledged. Diabetes mellitus is a one of the most pressing problems of our time, given the prevalence of disease progression, severity and multiple organ lesions, early disability and greater mortality due to progression of microvascular complications (Dedov II, Shestakova MV, 2010).

The purpose of the study: to study iron metabolism and the dynamics of hematological parameters of blood in patients with diabetic nephropathy in diabetes mellitus during treatment of renal anemia.

Materials and methods. The study included 30 patients with type 1 diabetes mellitus complicated by diabetic nephropathy, including: boys- 16-and 14 girls. The average age of the patients was 15,16±2,7 years. To study the characteristics of anemia in

patients with diabetes mellitus were selected patients with symptoms of anemia. All patients had long-term illness, the duration of diabetes averaged 5±2,5 years.

The study included a survey of patients with a general analysis of the peripheral blood, the determination of the glomerular filtration rate (GFR), carbohydrate metabolism and iron metabolism, the calculated determination of serum erythropoietin (EPO). Diagnosis of iron deficiency in patients with diabetes was carried out on the blood count. Patients were treated with antianaemic therapy, Ferrat C and Epostim. 100 mg of Ferrat C was injected intramuscularly every day. Patients received 4000 IU Epostim subcutaneously two times per week. The course of treatment was 10-14 days.

Results. The initial value of iron metabolism parameters in the examined patients were reduced, since the concentration of serum iron was 8,2±0,6 mmol / l, and the ferritin level was found to be 14,8±1,1 ng / ml. Treatment with Ferrat C and Epostim led to the normalization of blood ferritin and amounted to 26,6±1,6 ng / ml ($P < 0.05$) . Serum iron increased up to 15,4±0,9 mmol / L ($P < 0.02$).

Positive dynamics was observed in patients with chronic kidney disease in second stage, and in patients with chronic kidney disease in third stage. In patients with chronic kidney disease in second stage serum iron increased from 8.6 mkml / L to 14.4 mmol / l. Ferritin of blood rose from 16.3 ng / mL to 24.4 ng / mL. In patients with chronic kidney disease in third stage serum iron increased from 7.6 mkml / L to 12.8 mkml / l. Ferritin blood rose to 15.3 ng / mL to 23.5 ng / mL.

As seen from the blood ferrokinetic data, the treatment of anemia led to improvement of the general condition and hematological parameters of different severity.

Conclusion. Thus, the study of hematological and ferrokinetic indicators revealed that in patients with non-insulin-depend diabetes mellitus complicated by diabetic nephropathy, revealed iron deficiency, which is, of course, along with the disorder of synthesis of erythropoietin by kidney leads to the development of anemia. Therefore, these patients must be treated with drugs containing iron and recombinant erythropoietin.

DIABETIC RETINOPATHY AND METABOLIC SYNDROME: WAYS OF CORRECTION

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The combination of diabetes and metabolic syndrome - “a pandemic of the XXI century” greatly complicates the course of diabetes, and as a consequence, increases its complications in the long term. One of these complications is diabetic retinopathy - the main cause of blindness among able-bodied citizens in developed countries and the third most frequent cause of weakening of sight of patients older 65 years (after age-related macular degeneration and glaucoma) (R.R. Huseynov, Mirzazadze B. A., 2010). Conventional methods of treatment of patients with diabetic retinopathy is compensation of diabetes mellitus (maintaining an acceptable level of blood glucose), tight control of blood pressure and correction of lipid metabolism, which slows down the development of diabetic retinopathy for long periods of time, but still, unfortunately, does not stop it.

The purpose of the study - assessment of the effectiveness of the drug phenofibrate in diabetic patients with complication of diabetic retinopathy, occurring against the backdrop of the metabolic syndrome.

Materials and methods. The survey included 47 patients, whose diabetes duration does not exceed 10 years. Among them, 24 (51.1%) patients - girls, 23 (48.9%) - boys. The age of patients ranged from 9 to 16 years, the average age of the group 13,5±1,4 years. Re-examination was after 12 months. The initial diagnosis of patients in both groups - nonproliferative and preproliferative diabetic retinopathy, without serious complications (Hemophthalmus, traction retinal detachment, etc.), who were not injected with anti_VGF drugs whose state at the time of the survey did not require laser treatment or whether it was carried out not less than 6 months ago and there was no evidence to repetition of therapy. Lipid metabolism was evaluated, as well as visual acuity.

Results and discussion. Dynamic of visual acuity of patients of compared groups: before treatment 0,7±0,05, after treatment 0,7±0,04, p> 0,05. The study of the dynamics of visual acuity found that in the basic group the visual function remained stable in most patients during the study, visual acuity is decreased, in average, not more than 0.02 of the original (p> 0,05), a decrease of the initial data - to 0 , 1-0,2. In 3 patients (4 eyes) developed cataracts, after surgery, vision was restored to the original level.

Thus, the results of our study have shown the appointment of phenofibrate to patients with diabetes mellitus complicated by diabetic retinopathy, metabolic syndrome, allows to slow down the process of progression of diabetic retinopathy. In cases where lipid metabolism is not corrected, the changes in the eyes continued to progress, which led to serious complications, accompanied by a significant deterioration of vision.

Conclusion. Diabetic retinopathy occurs on the background of metabolic syndrome, which is characterized by more stable course in patients treated with phenofibrate. The study showed that long-term use of the drug has a positive effect on the initial stages of retinal lesions, slowing the progression of diabetic retinopathy, reduces the risk of severe retinopathy, thereby reducing the need for laser treatment.

DYNAMICS OF CARBOHYDRATE METABOLISM AND KIDNEY FUNCTION IN PATIENTS WITH TYPE 1 DIABETES MELLITUS

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It's generally acknowledged that diabetes mellitus is one of the most important noncommunicable diseases. Diabetes mellitus is the forth most frequent cause of death in developed countries. If you judge according to World Health Organisation criteria, the prevalence of anaemia among patients with diabetes is 14%, and in patients with diabetic nephropathy, anaemia rate reaches 85%, depending on the stage of the disease. Anaemia is one of the main manifestations of decreased kidney function in diabetic nephropathy. The severity of anaemia increases as renal insufficiency progresses. (Anikeeva TP, Volchanskiy EI, 2011).

The purpose of the study: to study the dynamics of carbohydrate metabolism and kidney function in patients with diabetes mellitus type 1.

Materials and methods. The study included 30 patients with type 1 diabetes mellitus complicated by diabetic nephropathy, including: boys- 16 and 14 girls. The average age of the patients was 15,16±2,7 years.

The study included general analysis of the peripheral blood, carbohydrate metabolism. Instrumental research was carried out too; Ultrasound, Computer Tomography

scan, electrocardiogram, etc., which were necessary for determination of the diseases.

All patients had evidence of renal damage in the form of reduced glomerular filtration rate, below <90 mL / min / 1.73 m2 or increased protein excretion in the urine (proteinuria). The average values of the estimated glomerular filtration rate were as follows: in the first group 74.8±4,2ml / min / 1.73 m2, the second group, 68,2±3,2 ml / min / 1.73 m2.

Patients were treated with antianemic therapy Ferat C and epostim. On the Ferat C injected with 100 mg intramuscularly every day. Patients received 4000 IU Epostim subcutaneously two times per week. The course of treatment 10-14 days.

Results. Glycosylated hemoglobin level before treatment was 6.8%±0.2 and 7.2±0.2% in the first and second group, respectively. After treatment, indicators were 6.6±0.2% and 6.9±0.2 in the first and second groups. According to the calculations, dependence of the level of hemoglobin on GFR was established, positive correlation of medium strength was found (correlation coefficient was 0.29) for chronic kidney disease of II stage and positive correlation of medium strength (correlation coefficient of 0.3) for the diabetic nephropathy, chronic kidney disease stage III.

On the background of ongoing normoglycemic and antianemic therapy, carbohydrate metabolism also improved. Glucose levels decreased from 6.2 mmol / L to 5.9 mmol / l during treatment. The level of glycated hemoglobin decreased from 6.8% to 6.6% in the first group and from 7.2% to 7.0% in the second group of patients.

A slight positive trend was observed after antianemic therapy, in the indicators reflecting renal function: serum creatinine from 99.8 mmol / L to 98.1 mmol / l in the first group and from 108.2 mmol / l to 107.2 mmol / l in the second group. Proteinuria index also decreased from 0.51 g / L to 0.38 g / l in the first group and 0.69 g / L to 0.49 g / l in the second group.

Conclusion. Iron deficiency is detected in patients with type 1 diabetes, complicated by diabetic nephropathy, however, the combined use of erythropoietin and iron preparations provides greater therapeutic effect than the use of these drugs alone.

TO STUDY THE STATE OF ERYTHROCYTE HEMOLYSIS IN AUTOIMMUNE HEMOLYTIC ANEMIA AT HEMOLYTIC CRISIS STAGE

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Purpose and Objectives: Currently, finding mechanisms of autoimmunity regulation, providing a natural tolerance and mechanisms of its breakdown, leading to autoimmune diseases is the central problem of basic and clinical immunology. Insufficient understanding of the mechanisms of induction and developing of autoimmune diseases does not allow to find effective methods of treatment. Given that the expression of normal regulatory lymphocyte interactions related to idiotypic interactions, is the reciprocal nature of the change in their activity, we can assume that an autoimmune reaction against the red blood cells in anemia model is a result of violation of the idiotypic regulation in immune response against the red blood cells. The study the creatine and total bilirubin in patients with autoimmune hemolytic anemia in the different course of the disease.

Material and Methods: Clinical and laboratory studies were conducted in 15 pa-

tients with AIHA (8 men (53.3%) and 7 women (46.6%) aged 45 to 65 years) during the detailed clinical manifestations of the disease. To assess the state of erythrocyte hemolysis we used standard blood chemistry parameters. The obtained results are statistically processed based on the data bank using Microsoft Exsel software package.

Results and Discussion: The obtained biochemical results of blood were analysed in the period of crisis hemolytic disease in all patients as well as anemia and yellowness. The experiment showed all patients elevated levels of creatine and total bilirubin fractions. In the study it was found fraction of total bilirubin 83,27±49,89, indirect fraction 77,05±54,39, and direct fraction 16,82±13,74 and creatine 86,66±10,28. Pronounced splenomegaly was found in 9 patients (60%), the rest splenomageliya moderate in 6 (40%).

Conclusions: Thus, as a result of the study of hemolysis of red blood cells in patients with autoimmune hemolytic anemia during hemolytic crisis manifestations, revealed yellowness and impaired renal function.

STUDYING OF THE HEMOSTATIC EFFECTIVENESS OF FACTOR VIII OCTANATE, KOEYT -DVI AND CRYOPRECIPITATE IN PATIENTS WITH HEMOPHILIA

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Objective. For studies of venous blood was used, a stable 3.8% sodium citrate in a ratio of 9:1, taken by gravity from the needle into the special tubes. Coagulation unit hemostasis evaluated by the following tests: activated partial thromboplastin time (APTT), the activity of factor VIII (F VIII.), Thrombin time (PT), fibrinogen (F), fibrinolytic activity (FA), the level of soluble fibrin monomer complex (SFMC) All studies were performed using the Sysmex SA analyzer, Japan.

Materials and method. Our research was done in the Research Institute of Hematology and Blood Transfusion of the Ministry of Health of Uzbekistan. The study involved 42 patients with hemophilia A between the ages of 10 to 52 years (median – 32 years). Among them heavy course of the disease (F. VIII <1%) found in 37 (70%) patients and moderate severity (F. VIII-1-5%) in 22 (30%) patients. The patients were divided into 3 groups: Group 1, 12 patients, are aged 10 to 44 years old with severe hemophilia A (factor level VIII <2,5%), which Octanate was administered intravenously at the rate of 40 IU / kg of patient weight.

Group 2, 14 patients with severe hemophilia at the age of 19 to 43 years, who carried out the treatment of blood coagulation factor VIII Koeyt DWI.

Group 3, 16 patients with severe hemophilia who were treated cryoprecipitate. Body weight of the patients was on average 10.2±48.65 kg.

Results. When analyzing the changes in the level of factor VIII activity in the blood of patients after administration of the calculated dosage Octanate dynamics were obtained individually distinct curves reflecting the dependence of the factor of time activity. The maximum rise in factor VIII level was recorded after 1 chasposle introduction to 158±6,48%; after 3 hours the factor VIII level decreased to 138,31±4,07%, after 6 hours - up to 120,29±8,16%, after 12 hours - up to 58,76±6,89%, acherez 24 hours - up 17,58±9,10%.

In group 2, 20 patients receiving intravenous Koeyt DWI (40 IU / kg of patient body weight), the level of factor VIII in 1 hour rose to 152,08±6,58%, reached a level of 142.34±3 after 3 hours 87%, after 6 hours - 119,68±4,36%. After 12 hours the level of factor VIII has decreased to 52,45±2,46%, and after 24 hours was 20,26±1,88%.

Patients in Group 3, treated cryoprecipitate, factor VIII levels over 1 hour reached 45.12±6.48%, through 3 hour was 69.26±9.25%, after 6 hours reduced to 41,18±7 95%, after 12 watches - up to 12.05±6.31% after 24 hours - up to 2.1±1.13%. Dose was administered in the same well as clotting factors (40 IU / kg of patient body weight), cryoprecipitate effect in comparison with the factors VIII Octanate and Koeyt DWI, especially in the treatment of recurrent hemarthrosis and hematoma was less pronounced ($p < 0.001$) .

Conclusion. Thus, the plasma factor VIII Octanate Koeyt DWI and are highly effective hemostatic agents in the treatment of hemophilia A, increasing the level of the scarce factor. With a single application at a dose of 40 IU / kg body weight possible therapy of acute hemarthrosis with knocking bleeding episodes, for the treatment of the recurrent hemarthrosis and hematoma to obtain the desired result the dose should be administered over 2-3 days.

INDICATORS OF GLOBAL LEFT VENTRICLE SYSTOLIC FUNCTION, DEPENDING ON THE RESULT OF MYOCARDIAL REPERFUSION IN ST ELEVATION AMI

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Objective: Asses the performance of global left ventricle (LV) systolic function, depending on the result of myocardial reperfusion in acute myocardial infarction with ST-segment elevation.

Methods: In this study 302 patients with ST elevation AMI were enrolled. All patients were divided into 3 groups according to the indicators of global and regional LV systolic function: Group I - successful reperfusion patients with complete resolution of ST-segment – 196 patients (65%); Group II - patients with partial reperfusion (ST segment decrease by more than 30% but less than 70% from baseline); Group III - patients without reperfusion (increased degree of elevation, the absence or reduction of ST elevation of at least 30% from baseline).

Results: After reperfusion, end-diastolic volume of the left ventricle in Group III was 154.3±2.9 ml, in Group II 151±2.2 ml, and in Group I 150.3±1.3 ml, which was not significantly different in the studied groups, although in Group III noted insignificant trend toward an increase in this index ($p > 0.01$) that was significantly more than Group I. In the first group of successful reperfusion prevented the development of LV dilatation. The same, measure LV ESV in patients with I, II, III groups consisted of 78.05±1.4 ml, 86.5±1.2 ml and 106.3±1.4 ml, which means the left ventricular cavity dilatation in patients Group II and III. Among the Group III patients with unsuccessful reperfusion (absence of dynamics of ST segment) - dilatation of the heart cavities developed more often than patients with partial success or success-

ful reperfusion of the myocardium. Left ventricular ejection fraction - as an indicator of global systolic function of left ventricular ejection fraction has been reduced, in all groups. A significant decrease was observed in Group III, in which reperfusion was unsuccessful, was on average – 40.5±0.5 ml. In Group 1 and Group 2 LVEF was 47.5±0.5 and 46.3±0.3, respectively, suggesting a positive effect of reperfusion on global left ventricular systolic function. The percentage of systolic thickening of IVS was on average 31.2±0.8, 28.7±0.88, 22.5±0.8%, and the percentage of thickening PWLV was on average 32.2±0.7, 30.8±0.8, 28.2±0.7% respectively in the I, II, III Groups, indicating that the reduction kinetics of the left ventricular wall. The most significant decline was observed in Group III, in which reperfusion was unsuccessful. A more significant decline V_{max}OTLV - the maximum rate of blood flow in the left ventricular outflow tract, observed in Group III ($p < 0.05$).

Conclusion: Thus, ischemia and reperfusion process in ST elevation AMI results in a reduction of the global parameters and impairing segmental contractility of the LV. Successful reperfusion of the myocardium at STAMI contributes to the preservation of the global parameters (LVEF, EDV of LV) of the left ventricle.

CYTOLOGICAL ANALYSIS OF BONE MARROW IN PATIENTS WITH LIVER CIRRHOSIS AND C VIRAL ETIOLOGY

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Among the pathophysiological processes that create conditions for the development of extrahepatic manifestations in chronic diffuse liver diseases, an important role is played by hypoxia. It is known that on the background of the progression of chronic diffuse liver diseases, there are significant shifts in red blood counts (Mukhin NA, Abdurakhmanov DT, Lopatkin TN, 2008).

The purpose of research - to assess the condition of the bone marrow in patients with liver cirrhosis of B and C viral etiology.

Materials and methods. We examined 50 patients with liver cirrhosis of B and C viral etiology for the period 2014-2016. Liver cirrhosis of viral etiology was diagnosed in 10 (18.44%) patients who were under 18, 19-29 years old accounted for 15 (23.08%), 30-39 - 23 (35.42%), 40-49 years - 9 (23.08%) patients. Of these patients, 29 were conducted sternal puncture: from first group 16 patients with liver cirrhosis of B viral etiology, 13 patients from second group with liver cirrhosis of C viral etiology.

Results. Indicators of myelogram distinguished in different types of anemia. 11 patients of the first group and 7 patients of the second group had been diagnosed with iron deficiency ACD. When Cytomorphological study of red bone marrow was conducted in patients of these groups, following results were revealed: erythroblasts 2,4±0,01%, pronormocyte 3,4±0,05%, basophil normocytes 5,6±0,06%, polychromatic normocytes 15, 4%±1,23%, oxyphilous normocytes 11,3±1,35%. All cells of erythroid lineage accounted for 38,1±2,23%, thus showing hyperplasia of red lineage hematopoiesis. There is a delay in the maturation of polychromotophil normocytes due to iron deficiency.

Cytomorphological investigations of red lineage of bone marrow in 11 patients

showed the presence of hematopoiesis of megaloblastic type with the presence of megaloblasts, megalocytes, hyperchromia, Jolly bodies, Kebot`s rings, hypersegmentation of nuclei of neutrophils, big band neutrophils, large and loose polychromatic oxyphilous normocytes. Cell counting revealed: megaloblasts 2,2±0,02%, pronormocyte 2,9±0,06%, basophil normocytes 7,8±0,08%, polychromatic normocytes 19,8%±2,12%, oxyphilous normocytes 13,1±2,31%. All cells erythroid amounted to 45,8±4,22%, which shows the expressed hyperplasia of red lineage of hematopoiesis. In 4 of them the number of erythroid cells: megaloblasts 4,2±0,02%, pronormocyte 7,9±0,06%, basophil normocytes 14,4±0,08%, polychromatic normocytes 19,5%±4,21% oxyphilous normocytes 21,1±5,23%.

These studies of 18 patients showed suppression of the red bone marrow without evidence of iron deficiency and megaloblastic hematopoiesis. Cytomorphological investigations showed the following: the number of erythroid cells were 17,8±1,14%: erythroblasts 0,8±0,001%, pronormocyte 1,1±0,005%, basophil normocytes 2,0±0,007%, polychromatic normocytes 6.7%±0,52%, oxyphilous normocytes 7,2±0,61%.

Conclusion. Indicators of myelogram differ in different types of anemia, which is of particular importance in the differential diagnosis approach and treatment of anemia in patients with liver cirrhosis of viral etiology. Cirrhosis of the liver with a viral etiology accompanied by more substantial changes in hemapoiesis in the bone marrow.

COMPARATIVE CHARACTERISTICS OF TREATMENT EFFICACY OF CHRONIC ANEMIA DISEASE IN ADULTS AND CHILDREN

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Anemia of chronic disease is the most common among the population of the globe. Many diseases lead to this condition. Among the most frequent are: infections, tumors, autoimmune disease, chronic renal disease.

The purpose of the study - to give a comparative description of the effectiveness of the treatment of anemia of chronic disease in adults and children.

Materials and methods. In our study, anemia of chronic disease, as indicated above was found in 46 patients. Of these, 25 children, mean age 13,6±2,8 years and 21 adults, mean age of 38,6±4,1 years. The basis for determining diagnosis was the presence of following diseases and examinations: complete blood count, a study of iron metabolism, determining the level of erythropoietin and other studies, confirming the diagnosis of concomitant disease. Patients with anemia of chronic disease in addition to manifestations of anemia have the symptoms of the underlying disease.

The indicators of two groups surveyed of peripheral blood and morphological picture of blood cells were studied. To study the effectiveness of pathogenetic therapy studies were performed before and after treatment.

Results. In our study, anemia pathogenetic therapy included: the human recombinant erythropoietin, Repretin 2000 units on alternate days #5 and Ferrat C 100 mg intramuscularly a day #10. In addition to antianemic therapy, patients received vitamins, were treated with the underlying disease that led to the development of anemia. The course of treatment was 10 days.

The mean values of blood parameters in pediatric and adult patients prior to treatment correspond to moderate anemia. Morphology of erythrocytes showed the

presence of anisocytosis, poikilocytosis (33.4% children and 41.3% of adults), normochromic anemia observed in 83.3% children, and in 47.9% adults normochromic anemia was observed. Macrocytes were revealed among red blood cells of adults.

After a course of antianemic therapy, patients showed improvement of indicators of peripheral blood. Thus, after antianemic therapy, adults' hemoglobin rose from 82.1±3.4 g / L to 98.4±3.6 g / l. In the group of children, hemoglobin increase was more, from 80.2±3.8 g / l to 112,4±5,6g / l. The average daily gain in adults' hemoglobin was 1.6 g / l, whereas in children's was equal to 3.2 g / l, which is twice as high.

A similar trend was observed in red blood cells, it was a significant increase in the number of red blood cells from 3,1±0,31 h1012 / l to 3,4±0,26 $x10^{12}$/ l in the group of adults and children from 2,9±0,26 $x10^{12}$/l to 3.8±0.32 $x10^{12}$/l. No significant difference in terms of white blood cells and platelets before and after treatment were found.

Conclusion. Thus, the treatment of anemia of chronic disease with recombinant human erythropoietin in combination with parenteral iron preparation resulted in significant reduction of anemia. However, the results show that the efficacy of treatment in a group of adult patients with anemia of chronic diseases is much lower than that of children.

THE TREATMENT OF IRON DEFICIENCY ANEMIA IN PREGNANCY

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Iron deficiency anaemia in pregnancy is the most common pathogenic type of anaemia that occur during pregnancy. Iron deficiency anaemia is often diagnosed in II-III trimester and requires correction. According to WHO, 20% of the world population suffer from IDA (Hersberg S. et al., 2010) and its incidence in pregnant women ranges from 21% to 80%. The indicator, in the underdeveloped countries of the world, is 85-92%, in countries with high socio-economic standard of living of the population and a low birth rate is reduced to 8-20% (V.N. Serov, N.V. Ordzhonikidze, 2012)

The purpose of the study: is to study the treatment efficacy of the preparation of iron, Ferum-lek, in the iron deficiency anemia in pregnant women.

Materials and methods. a group of patients with iron deficiency anaemia included 18 pregnant women, mean age 25,6±5,6 years. All patients had symptoms typical for both of anaemia (weakness, fatigue, dizziness, ringing in the ears, shortness of breath, palpitations, dark before my eyes, and pale skin and mucous membranes) and for sideropenic syndromes (dryness, brittleness and deformity nails, dull, brittle and hair loss, dysphagia sideropenic, atrophy of tongue papillae, and angular stomatitis, etc.). the results of non-pregnant young patients with IDA with the same clinical and haematological parameters were taken as a control group.

All patients received antianemic therapy Ferrum-lek 100 mg intramuscularly every day №10.

Results. Significant decrease of haemoglobin, erythrocytes, colour index and the average content of haemoglobin in red blood cell were determined in peripheral blood smears, are specific to IDA. Morphological characteristics of erythrocytes revealed expressed hypochromia, anisocytosis, poikilocytosis 100% of patients, erythrocytes are mainly microcytes.

Treatment of the disease with parenteral iron preparations led to improvement

of the general condition of patients with diseases of different severity and peripheral blood smears, for example, on the treatment with iron preparation, Ferrati, on the 10th day of treatment in elderly patients haemoglobin increased from 70,4±3,8 g / l to 94,4±3,6 g / l, which is significantly higher than the original data. ($P < 0.05$). Accordingly, the number of red blood cells increased from 3,2±0,2 $x10^{12}$ / l to 3,4±0,26 $x10^{12}$ / L ($P <0.05$). On the 10th day of treatment; colour indicator from 0,6±0,02 to 0,8±0,02 ($P <0.05$). Average haemoglobin content in an erythrocyte on 10th day increased from 24,3±2,8 to 32,4±1,9. Subjectively, patients also reported significant weakening of the severity of symptoms (less fatigue, tinnitus, slowing of tachycardia, increased performance, etc.).

Reticulocyte crisis was observed after 5 days of treatment of iron supplementation, which determines the effectiveness of the treatment. Reticulocytes increased from 6,2±0,02 ‰ to 9,6±0,06 ‰, on 5th day treatment and to 15,9±0,05 ‰ on 10th day of treatment.

Conclusion. Thus, antianemic therapy with Ferrum-lek gave a good dynamics of haematological parameters in a group of pregnant patients with IDA, as the average daily increase of haemoglobin in pregnant women was 3.6 g / l.

SMARTPHONES: EARLY DETECTION OF PARKINSON'S DISEASE

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Parkinson's Disease (PD) is a neurodegenerative disorder of the central nervous system that affects motor and speech skills. The primary abnormality in PD in a biochemical perspective is a dopamine deficiency due to degeneration of neurons. The typical motor features of the disease include bradykinesia (i.e. slowness of movement), tremor, rigidity, flexed posture, postural instability and freezing of gait. In particular freezing of gait (FOG) is defined as a "brief, episodic absence or marked reduction of forward progression of the feet despite having the intention to walk" and it is a highly distressing motor symptom that is common in patients with PD, reaching the 80% in the later stages of the disease.

Diagnosing Parkinson's disease (PD) is often difficult, especially in its early stages. Participants underwent baseline in-clinic assessments, including the Unified Parkinson's Disease Rating Scale (UPDRS), and were provided smartphones with an Android operating system that contained a smartphone application that assessed voice, posture, gait, finger tapping, and response time. Participants then took the smart phones home to perform the five tasks four times a day for a month. Once a week participants had a remote (telemedicine) visit with a Parkinson disease specialist in which a modified (excluding assessments of rigidity and balance) UPDRS performed. Using statistical analyses of the five tasks recorded using the smartphone from 10 individuals with PD and 10 controls: discriminate whether the participant had PD and predict the modified motor portion of the UPDRS. Twenty participants performed an average of 2.7 tests per day (68.9% adherence) for the study duration (average of 34.4 days) in a home and community setting. The analyses of the five tasks differed between those with Parkinson disease and those without. In discriminating participants with PD from controls, the mean sensitivity was 96.2% (SD 2%) and mean specificity was 96.9% (SD 1.9%). The mean error in predicting

the modified motor component of the UPDRS (range 11-34) was 1.26 UPDRS points (SD 0.16). (Venkataraman V., Zhan A. "Detecting and monitoring the symptoms of Parkinson's disease using smartphones: A pilot study")

It has been estimated that nearly 40% of people with the disease may not be diagnosed. Traditionally, the diagnosis of Parkinson's disease often requires a doctor to observe the patient over time to recognize signs of rigidity. In this work, we propose a PDR-based method to continuously monitor and record the patient's gait characteristics using a smart-phone. Our tool could be useful in providing an early warning to the PD patient to seek medical assistance and help the doctor diagnose the disease earlier. The idea is that by using phones to detect changes in the voice, patients could be diagnosed earlier and get quicker treatment. Medics are testing the app in 2,500 people with Parkinson's , symptoms or genes linked to the disease, and healthy individuals. Previous research found that by analyzing breathing, voice pitch and vowel sounds, doctors can detect Parkinson's with 99% accuracy. Smart phones could also be used to assess how far the disease has progressed in patients already diagnosed.

Early diagnosing of Parkinson's disease can give us the opportunity of using necessary type of therapy and drugs; prevention of disease's bad outcomes. Therefore, we can use smartphones not only for diagnosing Parkinson's disease, but also in the group of neurologic diseases, which are actual today. Nowadays, it's important to make good smartphone programs for diagnosing and apply useful methods of working with patients.

COMPARATIVE STUDY OF ANTI-INFLAMMATORY ACTIVITY OF DRY EXTRACT FROM THE LOCAL FLORAE IN EXPERIMENT

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It is known that the application of synthetic medicines for the treatment of diseases, in which basis lies inflammatory process, is limited because of their by-effects, complications and poor tolerance. Search of new effective, nontoxic medicines from natural origin, in particular medicinal plants, is an actual task of pharmacology. The pharmacological regulation of inflammatory processes is considered one of the most important problems of medicine. Advantage of application of anti-inflammatory natural medicines expresses their better tolerance and less toxicity.

The aim of current investigation was a comparative study of anti-inflammatory activity of a dry extract from local florae - Hypericum scabrum L., Ziziphora pedicellata Pazij Vved., Mediazia macrophylla and Glycyrrhiza glabra L.

Study of anti-inflammatory action was fulfilled according to the methodical recommendation , on model of dextrin edema of legs of rats.The experiments were carried out on 24 white adult male rats weighting 160-180 gr. The animals were divided into 4 groups and each group consisted 6 animals. The animals control group (1st group) were treated with distilled water in a volume 0,5 ml/100 gr once into the stomach through metallic cannula. An acute inflammatory edema was induced by the injection of 6% dextrin solution into right hindleg of rats subplantarly. The Expression of edema was estimated by the measuring volume of legs with water plethysmometer before injection of dextrin and in each hour within four hours.

The animals of 2nd, 3rd and 4th were administered the single doses of dry extract 50

mg/kg, LIV-52 100 mg/kg and diclofenac 10 mg/kg per os before one hour injection of dextrin accordingly. The anti-inflammatory activity judged on a difference of volume of legs before injection of dextrin and at the moment of the maximum development of edema and the suppression of edema was expressed in percentage as well as anti-inflammatory activity was determined. The obtained results were processed statistically with definition of criterion of Student by software package Biostat 2009.

The paw volume had increased by 211%; 204%; 178% and 160% at rats of 1st group in comparison with indicators of initial volume of paw accordingly, in 1, 2, 3 and 4 hours after the injection of dextrin solution. Under the influence of the dry extract expression of edema decreased by 79,7%, 92,7%, 83,7% and 81,6% in comparison with indicators of control group in 1, 2, 3 and 4 hours after injection of dextrin solution accordingly. The anti-inflammatory activity was 29,5-44,4% during the experiment.

The introduction of LIV-52 decreased the expression of edema by 43,8%, 67,6%, 52,8% and 58,1% in comparison with indicators of control group in 1, 2, 3 and 4 hours after injection of dextrin accordingly. The anti-inflammatory activity was 8,4-26,4% during the experiment. Diclofenac reduced the expression of edema by 43,8%, 67,6%, 52,8% and 58,1% in comparison with indicators of control group in 1, 2, 3 and 4 hours after injection of dextrin accordingly. The anti-inflammatory activity was 8,4-26,4%.

Thus, it can be assumed on basis obtained results of experiments that the dry extract from local florae of Uzbekistan has anti-inflammatory action.

BIOCHEMICAL CONDITION OF CHRONIC GLOMERULONEPHRITIS IN CHILDREN UNDER DEVELOPMENT ENCEPHALOPATHY

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Actuality. Encephlopathy means disorder of the brain. In modern usage, encephalopathy does not refer to a single diseases, but rather to a syndrome of overall brain dysfunction.

Objective. To study role of biochemical dysfunction in the development of encephalopathy in children with chronic glomerulonephritis (ChG).

Patients and methods. Work based on by analyzing of the results of the exam of 120 children at the age of 7-15 years in first clinics of medical academy and nephrological centre from 2008 to 2011 years with various forms of ChG, they were divided into 3 groups: the first group ChG without dysfunction of kidney function (60 children), second group is ChG with chronic renal failure (ChG) (30 patients) and third group with ChG, ChRF and a clear signs of hepatic encephalopathy (30 patients). Control group composed with 30 quite healthy children. Studied full blood analyses and urine, defined daily proteinuria. Biochemical analyses performed by biochemical analisator, determined content of the blood, total protein in urea, rate of ball filtration and consultation of neurologist.

Results. Blood serum with children and safe ChG kidney function is marked increase the content of uric acid at 1,59 (P<0,01) regarding normative increase. The children with c of the connation growth into 2,34 (P<0,001) and 1,47 (P<0,01) according regarding the signs of quite healthy children and patients with ChG by the safe kidney function. A group children by the presence of kidney of encephalopathy agonist the nitrogen-eliminating kidney function contained of urine acid from P 2,71

(0,01<) time regarding the increase of quite healthy children. In this case, it is exceeded any indication of children with ChG with a safe and disrupted kidney function in 1,7 (P<0,01) and 1,16 (P<0,05) time according. The same directivity of change is marked in the content in urea blood serum. A group of children with ChG with the dysfunction nitrogen-eliminating kidney function and presence of encephalopathy he grew up in 4,75 (P<0,001):4,42 (P<0,001) and 1,5 (P<0,05) respectively regarding the increase of the quitly healthy children of patients with ChG with and without dysfunction the kidney function. The same dynamic is famous and the content of creatinine in blood serum. A big increase in creatinine levels in the blood serum we have seen in a group of children with ChG ChRF and encephalopathy. MRS certain level rising in all the research groups especially in a group of children with ChG and encephalopathy. Rate of ball filtration in groups of children with the dysfunction nitrogen-eliminating kidney function and against his background with the development of renal encephalopathy comes down 1,84 (P<0,001) respectively regarding normative increase.

Conclusions. The mechanism of developing renal encephalopathy with ChG is determined by the degree of membranodestructure of cells of the parenchyma interstitial and tissue machine by breaking the children function extory and their damage effects on neyrotsity.

DIAGNOSIS OF HEMATOPOIESIS DEPRESSION IN LIVER CIRRHOSIS OF VIRAL ETIOLOGY

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Many diseases are accompanied by changes in a hematopoiesis, such as, quantitative reduction of hematopoietic cell lineage in various combinations due to different reasons. This gives rise to diverse symptoms, which creates difficulties in diagnosis and requires differentiated therapeutic tactics. Hemopoiesis depression syndrome has particular significance also because it can be caused by uncontrolled use of myelodepressive drugs.

The purpose of the study: - assess the condition of hematopoiesis in cirrhosis of viral etiology of liver

Materials and methods. We examined 50 patients with liver cirrhosis of B and C viral etiology for the period 2014-2016. Group I consisted of 26 patients with liver cirrhosis B viral etiology, II group of 24 patients with liver cirrhosis of C viral etiology. Liver cirrhosis of viral etiology was diagnosed in 12 patients under 18 (18.44%), 19-29 years old accounted for 15 (23.08%), 30-39 - 23 (35.42%), 40-49 years - 15 (23.08%) patients.

The laboratory examination included a detailed general analysis of blood and urine tests, a complex biochemical tests (alanine aminotransferase content, aspartate aminotransferase, bilirubin, total protein, iron metabolism), markers of hepatitis B and C. Clinical and laboratory studies of hematological parameters (hemoglobin, red blood cells, white blood cells, platelet, leukocyte), general urine analysis was performed by conventional methods.

Results. Studies of peripheral blood of group I showed that 1 patient with liver cirrhosis average hemoglobin level was 120,2±0,4 g / l, the number of erythrocytes 4,0±0,04 x10^{12}/L, color index of 0.9. In 5 patients were revealed mild anemia, where the mean hemoglobin level was 98.75±4.4 g / l, the number of erythrocytes

3.3±0.06 x10^{12}/ l Color index 0.9. In 10 patients was found anemia of moderate severity, where blood counts were following: average level of hemoglobin was 86,5±5,3 g / l, the number of erythrocytes 3,18±0,2 x10^{12}/L, color index of 0.82. Severe anemia was revealed in 10 patients, in which the average level of hemoglobin was 67,75±1,4 g / l, the number of erythrocytes 2,62±0,07 x10^{12}/L, color index of 0.77.

In the second group of patients, blood parameters of 11 patients with moderate anemia and blood parameters were identified as following: average hemoglobin level was 82,1±4,0 g / l, the number of erythrocytes 3,03±0,1 x10^{12}/L, color index of 0.81. 14 patients had severe anemia: average hemoglobin level was 66,85±1,2 g / l, the number of erythrocytes 2,61±0,07 h1012 / L, color index of 0.77.

The first group of 15 patients with white blood cell count was in the low-normal range 4,02±0,66 x10^{9}/l in 10 patients below normal 3,8±0,14 x10^{9}/ l. The second group of 10 patients turned number of leukocytes in the lower normal range 3,94±0,82 x10^{9}/l, and 15 patients with below normal x10^{9}/ 3.56±0.21 / l. Average values of platelets in the blood count in patients with LC of B viral etiology (I group) amounted to 105,4±6,/8 x10^{9}/l, and in patients with liver cirrhosis of hepatitis C virus etiology (II group), platelet count decreased to 96.4±7, 2 h109 / l.

Conclusion. According to the parameters of blood, it can be concluded that patients with liver cirrhosis with a viral etiology degree hemodepression more pronounced than in patients with cirrhosis of the liver B viral etiology.

FERROKINETICAL STATE IN PATIENTS WITH LIVER CIRRHOSIS OF VIRAL ETIOLOGY

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In recent decades there has been an increase in the number of patients with liver cirrhosis, especially among the young people of working age in many countries. Liver cirrhosis is characterized as severe, poor prognosis and is a major cause of disability of patients in developed countries. Extrahepatic manifestations not only mask the damage of liver, but also determine the prognosis of the disease.

Regardless of the form of anemia, causes of its development, the result of the disease is insufficiency of oxygen supply, hence hypoxia. Therefore, it is important to study the degree of damage to the structural and functional elements of the hepatocyte by the impact of hypoxia, caused by anemia (Lagonskaya VN, 2011).

The purpose of the study: - to assess the condition of ferrokinetics in liver cirrhosis of viral etiology.

Materials and methods. We examined 50 patients with liver cirrhosis B and C of viral etiology in the period 2014-2016. Group I consisted of 26 patients with of the liver cirrhosis of B viral etiology, II group of 24 patients with liver cirrhosis of C viral etiology. Liver cirrhosis of viral etiology was diagnosed in 12 patients under 18 (18.44%) patients, 19-29 years old accounted for 15 (23.08%), 30-39 - 23 (35.42%), 40-49 years - 15 (23.08%) patients.

The laboratory examination included a detailed general analysis of blood, iron metabolism (serum iron, transferrin, ferritin).

Results. In patients where anemia of varying severity has been identified, the study of iron metabolism has shown divergent results. In the first group, 16 patients with iron

deficiency was identified in terms of ferrokinetics: decrease in serum iron to 9,93±1,73 mmol / l, the amount of ferritin 9,85±1,56 ng / dL, transferrin content 3,2±0 , 1 mmol / l. 8 patients serum iron level was 16.25±3.5 mmol / l, the amount of ferritin 13.5±2.5 ng / dl, blood transferrin 3.1±0.2 mmol / l, indicating the absence of iron deficiency. 1 patient's serum iron level was 42.45±3.3 mmol / l, the amount of ferritin 27.7±2.7 ng / dl, blood transferrin 3.2±0.1 mmol / l, which indicates the excess of iron.

In the second group, 13 patients of iron deficiency have been identified according to ferrokinetics: reduction of the level of serum iron to 8,78±1,13 mmol / l, the amount of ferritin 9,06±1,12 ng / dL, transferrin 3,2±0 , 01 mmol / l. 6 patients serum iron level was 18.15±2.9 mmol / l, the amount of ferritin 16.1±2.2 ng / dl, transferrin blood 3.1±0.1 mmol / l, indicating the absence of iron deficiency. Iron overload was observed in 1 patient, where the level of serum iron was 45,75±6,5 mmol / l, the amount of ferritin 28,3±5,2 ng / dL, blood transferrin 3,2±0,1 mmol / l

Conclusion. Treatment of anemia with liver cirrhosis is recommended in accordance with differentiation of the type of anemia. Study of ferrokinetics indicators showed that the deficiency of iron in the form of lower levels of serum iron, ferritin, transferrin increase was observed in 29 (58%) patients with cirrhosis of viral etiology. 2 patients with iron overload was found, where iron preparations are contraindicated.

THE STUDY OF THE TREATMENT EFFICIENCY OF IRON ANEMIA WITH THE NEW DOMESTIC DRUG FERRAT C

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Iron deficiency anaemia is widely prevalent in the world, especially among women of reproductive age (Holmatova N.M. 2010), and children. According to the summary statistics of different countries, iron deficiency anaemia occurs in about 11% of women of childbearing age, and the latent deficiency of iron in the tissues - 20-25%, while among adult males with iron deficiency anaemia are about 2%. Approximately 60% of all cases of iron deficiency anaemia occur in patients older than 65 years.

The purpose of the study: was to investigate the clinical efficacy and tolerability of the treatment of iron deficiency anaemia with Ferrat C.

Materials and methods. The study included 30 patients with iron deficiency anaemia, women aged from 16 to 65 years. The average age of the patients was 41,6±1,1 years. Patients were divided into 2 groups of 15 people, according to their age. The main group of 15 patients with iron deficiency anaemia received intramuscularly, preparation under study, Ferrat C. The control group included 15 patients with iron deficiency anaemia, who received intramuscularly Ferrum-lek and their average age was 39,7±1,4 years.

The diagnosis of iron deficiency anaemia was established according to the clinic, case history, the results of laboratory studies of blood; clinical and biochemical studies concerning iron metabolism. Patients with iron deficiency anaemia I, II and III degree were involved in the study.

Results. Comparative analysis of clinical and laboratory testing of patients and control group showed that all surveyed had typical symptoms of various degrees of iron deficiency anaemia, which decreased after treatment, both in the main and control groups. Treatment of the disease with Ferrat C led to the improvement of pa-

tients' condition and overall analysis of the peripheral blood. For example, the average daily increase in haemoglobin in main group of severe iron deficiency anaemia was 3.57±0.15 g / l versus 1.67±0.19 g / l, the rate of the control group was equal to 3.55±0.21 g / l versus 1.64±0.04 g / l respectively. In patients with mild iron deficiency anaemia average daily increase of haemoglobin did not differ significantly from the control, which was 1.84±0,11 g / l vs. 1,83±0,06 g / l

So the red blood cells of patients with severe iron deficiency anaemia, who were treated with Ferrat C, increased from 2,27±0,18 $x10^{12}$/ l to 3,03±0,13 $x10^{12}$/l , in the control group, the rate was 2.26±0,12 $x10^{12}$/ l to 3.06±0.11 $x10^{12}$/l, respectively. The average increase of red blood cells in the experimental group was 0,034±0,005, while in the control 0,035±0,003. Haemoglobin in the main group increased from 56,5±4,91 g / l to 91,8±4,33 g / l, while in the control, before treatment was 55,1±3,55 g / l, and after treatment was 89.4±3.77 g / l. Number of reticulocytes significantly increased in patients receiving Ferrat C. Before treatment they were 3.85±0.59, and after treatment 12.7±0.8, 0.53±4.0 versus 13,1±0.97. The average increase in reticulocytes was higher in the study group; 0,59±0,14 vs. 0,61±0,02.

Conclusion: Domestic drug Ferrat C, as well as Ferrum-lek, used as a basic treatment of IDA significantly accelerated and enhanced the production of haemoglobin and red blood cells, which was reflected in the significant improvement of haematological parameters. It has been established that the preparation Ferrat C is well tolerated and not toxic.

STUDY OF ANTI-ANEMIA PROPERTIES OF MEDICINAL COLLECTION OF PLANTS FROM SOUTHERN FERGANA

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Purpose and Objectives. Iron deficiency is the most common and widespread nutritional disorder in the world. With iron deficiency may be related to health problems such as reduced immunity, increased susceptibility to infections, decreased performance, complications of pregnancy and childbirth. Search and development of pharmaceuticals from plants for the treatment of iron deficiency anemia caused by the desire to develop effective non-toxic hematonic plant.The aim of our study was to the study of the properties of the plant collection antianemic (phytoextract) prepared from vegetative organs of medicinal plants growing in the Fergana Valley.

Material and methods. We as hematopoietic agents used drug - product extraction (phytoextract) medicinal plants collected in September 2012 in the village Yordon of a Fergana region. Macro- and microelements composition of plants is determined by neutron activation in a scientific laboratory Research Institute of Nuclear Physics of the Academy of Sciences of the Republic of Uzbekistan (Igamberdieva P.K, Ibragimov A.A., 2014). Significantly high content of Fe, Mn, Co, Cr, Zn and Cu in plants prepared collecting suggests that they have more pronounced anti-anemia activity. We used white outbred mice of 2-3 months of age weighing 18-23 gramms in each experimental group we used 6 individual animals. To simulate secondary immunodeficiency laboratory animals were intraperitoneally injected with fenilgidrazin sulfate at a dose of 30 mg/kg body weight for three days. To compare the effect of the drug in the group of mice we injected the immunomoduline of animal origin.

Results and Discussions. The results showed that the plant collection (phytoex-

tract) has the property to stimulate immunity at the average by 2 times the number of erythrocytes and by 1.2 times as compared to the control group. The injection of phenylhydrazine reduced thymus cells and lymph nodes by 1.6 times and 1.7 times, respectively. The injection phytoextracts increases thymus cells of the lymph nodes by 3.1 and 2.6 times respectively. The immunomoduline markedly less stimulates the cells of the central organs of immunity.

C**onclusions.** It was found that the plant has the capacity to improve the collection of cellularity of central and peripheral organs of immunity in animals treated with phenylhydrazine sulphate and the results show hemostimulating properties of medicinal plant collection. It was found that the extract of medicinal plants is more effective means of hematopoietic compared with immunomodulator derived from animal origin.

NUTRITIONAL STATUS IN TEENAGERS

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Urgency. Research state of nutritional status is a complex interdisciplinary problem. Prevention of violations of nutritional status and the formation of proper nutrition helps to reduce the morbidity. Nutritional factors are one of the leading factors that have an impact on the health of children and adolescents.

Purpose of the study. Substantiated actual nutrition in 80 teenagers (45 boys and 35 girls) enrolled in the academic lyceum of TMA.

Material and methods of the study. To assess the nutritional status of teenagers used the methods of questioning and interrogation techniques, recommended by WHO. The energy value of the diet picked by chronometer.

The results of the study showed the inadequacy of actual nutrition in teenagers. Determined 35% of teenagers are fed 4 times daily, 57% - 3 times, 7% - 5% and 2 times - 2 times. The study showed that 95% of adolescents mainly have breakfast at home, where the food in most cases is irrational. We surveyed in 33% of hair loss, blurred vision - 6%, violation of capillary resistance - 27-46,6%, bleeding gums - 23%, petechiae - 6.6%, dry skin -30% cheilosis - 1% pale tongue -10%. We noticed the extreme - low level of consumption of fish products, and in the spring reduced consumption of fresh vegetables, fruits and berries. The content of basic nutrients, especially animal protein is 61%.

In the daily ration protein deficiency is 15% and of fat deficiency is 20-25%

In general, the use of milk and dairy products accounted for 225 ml on average, for girls 250 ml and 200 ml for boys. When comparing the results with the hygienic norms, we determined that their number is 2 times lower than the hygienic norms.

The total energy value of food is 2347.5 kcal for boys, for girls 2171.0 kcal.

Conclusions. Thus it is necessary to conduct a dietary correction of the daily diet of teenagers in order to prevent diseases.

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