



**ZAMONAVIY KLINIK  
LABORATOR TASHXISI  
DOLZARB MUAMMOLARI**  
**xalqaro ilmiy-amaliy  
anjuman**



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cooperative, involving multiple professionals, varied technical studies, and documentation of each matter's information and pictures. Digital pictures and particularly WSI supply new promising views for digital laboratory providing extra documentation and illustration

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## MORPHOLOGICAL CONDITION OF THE LIVER DURING EXPERIMENTAL ACUTE POISTIANE POISTS POINT TO FASTOKIN

Sayfutdinova M.B.

*Teacher of native language and literature of secondary school №8*

In many countries, including Uzbekistan, the usage of phosphorus and organochlorine pesticides with high toxic effects is prohibited or limited. They are gradually being supplanted by new generation pesticides. Fastokin from the pyrethroid group is a new generation insecticide and widely used in our country sushspheares as agriculture, health care and everyday life. Like all pyrethroid pesticides, fastokin is also metabolized in the liver, which leads to a certain degree of hepatotoxicity. Unfortunately, scientists haven't foundout the effect of this drug on liver yet.

The aim of the work was to study the morphological state of the liver in experimental animals with acute poisoning of fastokin pesticide.

The experiments conducted white male rats weighing 150-180 g. In acute poisoning, the drug was injected orally at the rate of  $\frac{1}{2}$  LD<sub>50</sub> per kg of body weight. Animals were examined after 3 hours, 1, 3, 7 and 15 days after poisoning. The liver and its bile ducts were examined using microscopic and morphometric methods.

An acute toxic effect was manifested in the liver as toxic hepatitis 3 to 72 hours after intoxication with fastokin. It was noticed a marked expansion, blood filling of the central veins and sinusoidal hemocapillaries of the liver. Portal tracts were abundantly infiltrated with mononuclear cells. In the majority of hepatocytes, were observed the changes in the type of vacuole and fatty degeneration, which were more pronounced in the peripheral regions of the liver lobules. These changes, persisted from to days 7–15 of the experiments even if they occurred less. In the course of these periods, along with changes in hepatocytes, noticed the inflammation in the course of bile duct cells as well. Revealed the expansion and blood filling of sinusoidal capillaries and central veins, which was accompanied by degenerative changes in hepatocytes. During these periods of experiments obcerved, an increased activity of fibroblastic cells.

Thus, acute intoxication with fastokin in the near future (1-3 days) causes changes in the liver corresponding to acute toxic hepatitis. Starting from the 7th

day, the acute inflammatory reaction of the liver gradually subsides, and on the 15th day of the experiment, the fullness of the liver vessels, the degenerative changes in the hepatocytes and the phenomena of inflammatory infiltration of the portal tracts are significantly reduced.

### References.

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## QON KOMPONENTLARIDAGI GEMOTRANSMISSIV INFEKSIYALARING LABORATOR TASHXISI.

**Saidov.A.B., Kurbonova Z.Ch., Sayfutdinova Z.A., Shomansurova G.E.  
Toshkent Tibbiyot Akademiyasi**

Qon komponentlari xavfsizligi transfuziologiyaning ajralmas qismi bo'lib, donorlarni tanlash bo'yicha tadbirlar, donor qonining xavfsizligini oshiradigan texnologiyalar, gemotransmissiv infektsiyalarni sifatli laborator diagnostikasi, shuningdek qon tarkibiy qismlardan oqilona klinik foydalanishdir. Parenteral yo'l bilan yuqadigan infektsiyalarning asosiy qo'zg'atuvchilarini inson immunitet tanqisligi viruslari (OIV) ning 1 va 2 turlari, shuningdek gepatit B (HBV) va gepatit C (HCV) viruslari hisoblanadi. Deyarli 40 million odam OIV infeksiyasi bilan yashamoqda [1, 2], 248 million kishi HBV surunkali infeksiyasi bilan kasallangan [3] va 110 million odamda HCV ga qarshi antitanachalar mavjud bo'lib, ulardan 80 millionida faol replikatsiya bosqichidagi viruslar mavjud [4]. OIV infektsiyasi bilan taqqoslaganda, virusli gepatit B 6-7 marta, virusli gepatit C 3 marta ko'p uchraydi. Gepatit B (HBV) va gepatit C (HCV) viruslari o'xshash klinik ko'rinishiga qaramay, bir qator tub farqlarga ega. O'tkir gepatit o'tkir jigar shikastlanishi va zaharlanish alomatlari bilan kechib, sariqlik paydo bo'lishi, kasallikning kuchli klinik ko'rinishlari namoyon bo'lishi bilan ajralib turadi va qon zardobida aminotransferaza faolligining keskin oshishi bilan xarakterlanadi [5].

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**MATERIALLAR VA TADQIQOT USULLARI.** 2019-yilda Respublika miqyosida qon komponentlarini OIV, Gepatit B va C, zaxm va Brutsellyoz kasalliklariga tekshirildi.