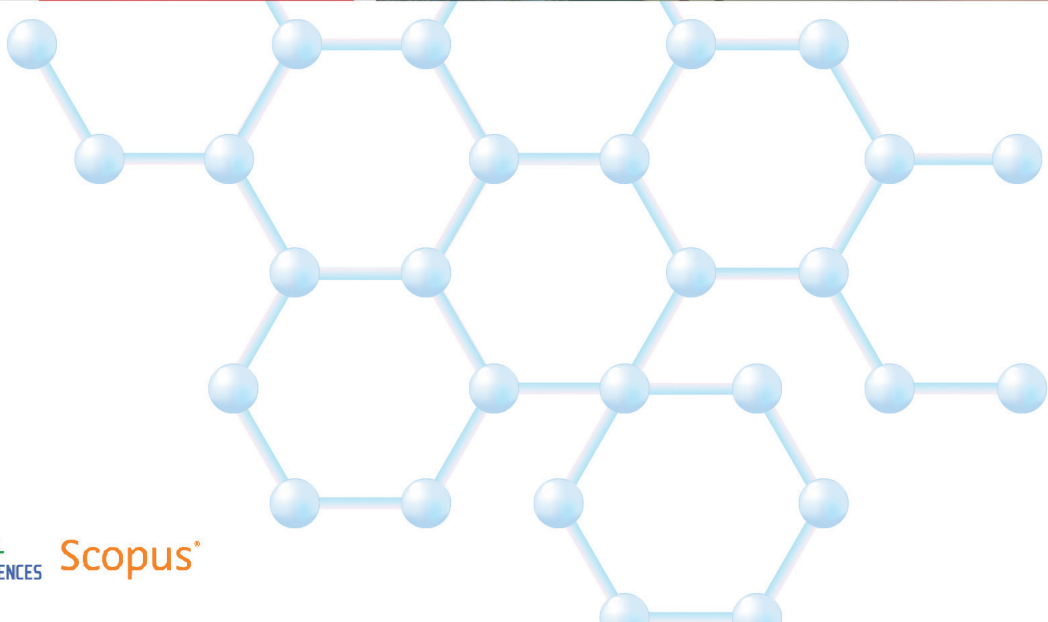


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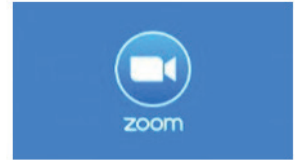
MEDICINE AND HEALTH SCIENCES VENICE 2021

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Babadjanova Shoira Agzamovna

Professor of the Department of Hematology,
Transfusiology and Laboratory Science,
Tashkent Medical Academy,
Email. sharia_b@mail.ru;
тел.:90-9890359

Kurbanova Gavhar Chutbaevna

PhD, Associate Professor, Department of Hematology,
Transfusiology and Laboratory Science, Tashkent Medical Academy,
Email. – kzch77@mail.ru;
тел.:+998971454654;

Summary. In patients with diffuse-toxic goiter, covalent relationships between the onset of the disease, the severity of anemia and diffuse-toxic goiter were revealed; as the duration of the disease with diffuse-toxic goiter increases, the progression of anemia is observed.

Introduction. Diffuse toxic goiter is one of the most common endocrine pathologies. The disease occurs in both young and elderly people, but women are more likely to get sick at the age of 20-50 years. Iodine-containing thyroid hormones provide the most energy-intensive processes in the body: growth and development, tissue and cell differentiation, stress response, heat production, etc.

To carry out these processes, the presence of free amino acids is required, the content of which increases with the activation of proteolysis. It was found that changes in thyroid status affect the activity of proteinases and their inhibitors. Also, an increase in the functional activity of the thyroid gland leads to a violation of the protein-synthesizing function of the liver (Gusakova E.A., Gorodetskaya I.V., 2012).

Materials and methods of research: We examined 63 patients with diffuse-toxic goiter (DTG) of II and III severity, who were hospitalized in the Department of Endocrinology and Hematology of the 1st Clinic of TMA. All patients were divided into 4 groups: Group I consisted of 26 patients with diffuse toxic goiter of II severity with moderate thyrotoxicosis, Group II 24 patients with diffuse toxic goiter of II severity of severe thyrotoxicosis, III group of 7 patients with diffuse toxic goiter of III severity with moderate thyrotoxicosis and the IV group of 6 patients with diffuse-toxic goiter of the III degree of severity, severe thyrotoxicosis.

All patients underwent general clinical studies (OAC, OAM, biochemical blood test), protein metabolism (total protein, albumin, globulin).

Results: When studying the anamnestic data in patients with diffuse-toxic goiter, covalent relationships between the onset of the disease and the severity of anemia and diffuse-toxic goiter were revealed. So, in group I, the duration of the disease ranged from 1 to 3 years, the average hemoglobin index was 90 ± 3.6 g / l, erythrocytes $3.2 \pm 0.05 \times 10^{12}$ / l, the color index was 0.84 ± 0.004 . In group II, the duration of the disease ranged from 3 to 5 years, the average hemoglobin index was 82 ± 2.6 g / l, erythrocytes were $3.0 \pm 0.06 \times 10^{12}$ / l, the color index was 0.82 ± 0.005 . In group III, the anamnesis of the disease increased to 10 years, the average hemoglobin index was 76 ± 4.0 g / l, erythrocytes were $2.8 \pm 0.01 \times 10^{12}$ / l, the color index was 0.81 ± 0.002 . In group IV, the duration of the disease was more than 10 years, the average hemoglobin index was 70 ± 3.5 g / l, erythrocytes were $2.7 \pm 0.04 \times 10^{12}$ / l, the color index was 0.77 ± 0.002 .

Conclusions: In patients with diffuse-toxic goiter, covalent relationships were found between the onset of the disease, the severity of anemia and diffuse-toxic goiter; as the duration of the disease with diffuse-toxic goiter increased, anemia progressed.

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