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ИНСТИТУТ**



**СОВРЕМЕННАЯ ОТОРИНОЛАРИНГОЛОГИЯ:
АКТУАЛЬНЫЕ ВОПРОСЫ И ПЕРСПЕКТИВЫ
РАЗВИТИЯ**

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**A MODERN LOOK AT DIAGNOSTICS AND TREATMENT
OF OBSTRUCTIVE APNEA SYNDROME IN SLEEP**

Tashkent Medical Academy

Obstructive sleep apnea syndrome (OSA) is a violation of breathing during sleep as a result of the closure of the upper airways, leading to a partial or complete cessation of air supply, the onset of hypoxia, and as a result, a transient decrease in the depth of sleep, followed by restoration of patency of the upper airways and air intake. During a patient's sleep, such episodes can occur hundreds of times per night, which in the presence of clinical symptoms is called OSAS syndrome or obstructive sleep apnea-hypopnea syndrome.

Only in the last two decades has clinical medicine come to a correct understanding of the essence of obstructive sleep apnea syndrome (OSAS). "Heroic snoring", previously perceived almost as a sign of health, is now regarded as a harbinger and the main symptom of OSAS - a disease that is a risk factor for the development of arterial hypertension, heart rhythm disturbances, myocardial ischemia during sleep, strokes and hormonal disorders. OSAS also causes significant deterioration in sleep quality and severe daytime sleepiness.

In addition to purely medical problems, OSAS leads to significant negative socio-economic consequences in the form of a decrease in labor productivity, an increase in industrial injuries and road accidents due to pathological daytime sleepiness. The importance of the problem is also indicated by the high prevalence of OSAS, which accounts for 3-7% of the total adult population over 30 years old. Obesity is considered one of the main risk factors for OSAS. Body mass index (BMI) is a fairly clear predictor of OSAS. In patients with a BMI exceeding 29 kg / m², the likelihood of OSAS is 8-12 times higher than in patients without obesity.

In fact, at the moment, only one method is used - transcranial Doppler ultrasonography, but it has a number of significant limitations. First, any change in the angle of location of the ultrasonic sensor leads to a significant distortion of the velocity parameters of blood flow. Secondly, the

location of only one middle cerebral artery does not allow a comprehensive assessment of cerebral blood flow. Thirdly, the technique requires the use of very expensive ultrasonic equipment.

Thus, the development of new methods for assessing cerebral blood flow during sleep in patients with OSAS is an urgent task of modern medicine. Clarification of the peculiarities of the pathogenesis of vascular disorders would make it possible to better understand the relationship between OSAS and vascular cerebral complications, as well as to determine possible ways of their correction. The prevalence of OSAS is unknown since most people do not undergo polysomnography.

However, obstructive sleep apnea syndrome is directly related to metabolic disorders, incl. diabetes mellitus, and abdominal obesity. OSAS significantly predominates in patients with arterial hypertension (AH), ischemic heart disease, and atrial fibrillation. In patients with OSAS, the risk of cerebral stroke or cardiovascular death is doubled.

Therefore, early diagnosis and treatment of this syndrome at the initial stages can reduce the risk of cardiovascular complications and improve the patient's quality of life. The criterion for obstructive sleep apnea is the absence of air flow for 10 s in the presence of active respiratory movements of the muscles of the chest and abdominal wall. Obstructive hypopnea is defined by more than 50% decrease in thoraco-abdominal movements for at least 10s, accompanied by a drop in blood saturation by 4% or more.

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THE CONDITION OF THE MUCOSA OF THE MAXILLARY SINUS AFTER ENDOSCOPIC MAXILLARY SINUSTOMY

Tashkent Medical Academy

Improving the effectiveness of treatment of chronic rhinosinusitis (CRS) is a priority task of modern otorhinolaryngology, not only domestic, but also foreign. This interest in the problem is due to the widespread prevalence of this pathology. In different countries, the criteria for accounting for the incidence, algorithms for the diagnosis and treatment of

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