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**ТАШКЕНТСКИЙ ПЕДИАТРИЧЕСКИЙ МЕДИЦИНСКИЙ  
ИНСТИТУТ**



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

**Сборник научных трудов, посвященный 50-летию организации  
кафедры Оториноларингологии ТашПМИ и 80-летию д.м.н.,  
проф. С.А. Хасанова**

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## **CONDITION OF THE NOSE AND SUPPLEMENTARY SINUSES IN PATIENTS WITH WEGENER'S DISEASE**

*Tashkent Medical Academy*

Wegener's granulomatosis is a systemic vasculitis characterized by the development of granulomatous inflammation and necrotizing vasculitis of small vessels with a predominant lesion of the upper respiratory tract, lungs and kidneys.

**Material and methods of research.** The study included patients with rhinosinusitis and HPA, established in accordance with the criteria of the American College of Rheumatology 1990 and the nomenclature adopted in 2012 at a conference in Chapel Hill (USA). All patients signed an informed consent form to participate in the study. The general examination of the patients was carried out according to the plan adopted in the clinic. When studying the anamnesis, special attention was paid to the presence of disease activity, the presence of lesions of various organs and systems. The BVAS (Birmingham Vasculitis Activity Index) scale was used to assess the activity. Remission of the disease was considered the presence of 1 or less points on the BVAS scale, exacerbation of HPA - 2 or more points on the BVAS scale. All patients underwent an assessment of organ lesions using the VDI index. When assessing the index of damage, organ damage that has been observed since the onset of vasculitis is taken into account. Patients often have pre-vasculitis comorbidities that should not be considered. Manifestations of active vasculitis are recorded using the BVAS scale.

**Results and discussions.** The study involved 50 patients (21 men and 29 women) aged 18 to 60 years with an established diagnosis of GPA. The average age of the examined patients was  $48.1 \pm 12.1$  years. The diagnosis of HPA (n = 50) was established in accordance with the nomenclature adopted in 2012 at the conference in Chapel Hill (USA), as well as on the basis of the presence of at least 2 of 4 criteria of the American College of Rheumatology (ACR), 1990. To confirm the diagnosis of HPA, 33 (66%) patients underwent biopsy: nasal mucosa or paranasal sinuses - in 17 (51.5%) patients, larynx formation - in 9 (27.3%) patients,

tympanic cavity - in 7 (21.2%). The average time from the onset of the disease to the diagnosis and initiation of treatment was  $17.2 \pm 24.5$  months. At the time of the examination, the average duration of GPA in years was  $3.1 \pm 2.8$  (in months  $63.4 \pm 50.6$ ). In 22 out of 50 patients, a local form of HPA (damage to the upper respiratory tract) was detected. The local form was diagnosed in 7 men and 15 women aged 18 to 60 years (median age 47.6 years). In 32 patients (11 men and 21 women) aged 25 to 80 years, 2 or more points on the BVAS scale were determined, which was regarded as an exacerbation of the disease. The average age of this group of patients was  $50.84 \pm 14.07$  years, the median age was 51.5 years. GPA remission was diagnosed in 28 patients (10 men and 18 women) aged 18 to 77 years. The average age in this group of patients is  $46.71 \pm 17.27$  years, the median for age is 49.5 years. Of the 50 examined patients with GPA, the most frequently determined lesions of the nose and paranasal sinuses. More than half of the examined patients had lung damage (58.3%), 46.7% of patients with GPA had kidney damage within the framework of vasculitis. The incidence of damage to the nose and paranasal sinuses in the examined patients was 94.0% (n = 47). The most common cases were ulcerative necrotizing rhinitis (n = 42), lesions of the paranasal sinuses in the form of thickening of the sinus mucosa (n = 40), less often - perforation of the nasal septum (n = 10) and destructive sinusitis (n = 11).

**Khasanov U.S., Djuraev J.A., Nordjigitov F.,  
Shaumarov A.Z., Akhundjanov N.A.**

## **MORPHOLOGICAL STUDIES OF VARIOUS FORMS OF CHRONIC TONSILLITIS**

*Tashkent Medical Academy*

Today, the prevalence of chronic tonsillitis (CT) has increased several times and reaches 5-10% in adults and 12-15% in children. According to some authors, the prevalence of chronic tonsillitis can reach 37% in adults and 63% in children. In the structure of ENT pathology, CT occupies one of the leading places and accounts for 13-35%. This, in turn,

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