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MODERN TREATMENT OF PSORIATIC ARTHRITIS APPROACH

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Resume

This study demonstrates a comparative approach to the recommendation of basic medications in the treatment of psoriatic arthritis activity levels and exacerbations.

Keywords: psoriatic arthritis; treatment; methotrexate; biological gene engine drug engine; sekukinumab;

Dolzarbliги

Psoriaticheskiy artrit (PsA)- bo‘g‘imlar va umurtqa pog‘onasining progressirlanuvchi yallig‘lanish kasalligi hisoblanib, eroziv artrit, suyak emirilishi, ko‘plab entezit va spondiloartritlar ko‘rinishida namoyon bo‘ladi va ko‘pincha 35 yoshdan 45 yoshgacha bo‘lgan axolida uchraydi [1,3,4]. Psoriaz (Ps) - Surunkali qaytalanuvchi immun yallig‘lanishli teri kasalligi bo‘lib, dunyoning ko‘plab mamlakatlarida aholining taxminan 2-3% ida uchraydi [5].

Oxirgi 10 yil mobaynida PsA metabolik va immunologik o‘zgarishlar natijasida, ko‘plab a’zo va tizimlarga ta’sir qiluvchi autoimmun kasallik ekanligi isbotlanmoqda. Psoriatik artritli va psoriazli bemorlarning 40-60% o‘z kasalliklarini kundalik hayotlariga ta’sir etuvchi jiddiy muammo deb hisoblaydilar [2,6]. PsA erta kechishida ko‘p jixatdan OA, RA, podagra, ankilozlovchi spondilit va reaktiv artritlarga o‘xshash bo‘lganligi sababli, qiyosiy tashxislash muxim axamiyatga ega. Erta, to‘g‘ri tashxislash dori vositalarini to‘g‘ri qo’llanilishiga, davolash samaradorligini oshishiga, bu esa, kasalliklarni rivojlanishi va asoratlarini oldini olish imkonini beradi.

Bugungi kunda PsAni davolash uchun ko‘plab zamonaviy dorilar bor, lekin har bir bemor uchun munosib yuqori samarali dori topish qiyinchilik tug‘diradi. GIBPni klinik amaliyatga joriy etishni revmatologiyada eng katta yutuqlardan biri bo‘lib, PsAni davolashda ham sezilarli samaradorlikka olib keldi. An’anaviy bazis yallig‘lanishga qarshi vositalar (metotreksat, siklosporin, leflunomid, sulfasalazin) biologik dori-darmonlarga nisbatan ancha arzon bo‘lganligi sababli PsAni davolashda muhim o‘rin tutadi. Klassik bazis yallig‘lanishga qarshi vositalar PsAda birinchi qator davo preparati hisoblanib, unlarning samarasizligida, o‘zlashtirish yomon bo‘lganda yoki qo’llash mumkin bo‘lmaganda, GIBP bilan davolashga o‘tish tavsiya etiladi. PsAning shunday klinik domenlari mavjudki, an’anaviy bazis yallig‘lanishga qarshi vositalar samara bermaydi shu sababli birinchi qator dori vositasi sifatida biologik dorilar qo’llanadi. Oxirgi o‘n yil ichida, Ps va PsAni davolash uchun to‘rtta sinf GIBP qo’llanilmoqda va ikkita PDE4 fosfodiesteraza ingibitorlari va yanus-kinaz IL-17 ingibitori - JAK-STAT preparat qo’llanilishi tufayli davolash imkoniyatlari sezilarli darajada kengaydi. Ps va PsA bilan og‘rigan bemorlarni davolashga zamonaviy yondashuv 2021 yilda GRAPPA mutaxassislari tomonidan taklif qilindi. Tavsiyalarga ko‘ra, GIBPlarni PsAning aksial shakli entezit, daktilit, psoriazning pilakchali turi va tirnoq psoriazida farmakoterapiyada birinchi qator dori vositalari sifatida ishlatalishi mumkin.



PsA patogenezida IL-17 sitokinlari katta ahamiyatga ega. SHu sababli so'ngi yillarda PsA, Ps ni davolashda, biologik, target preparatlari hisoblangan IL-17 ingibitorlari qo'llanilmoqda. 2016 yildan boshlab, yangi Sekukinumab dori vositasi IL-17 yallig'lanish sitokinini ingibirlab, xalqaro ACR va EULAR tavsiyalariga ko'ra PsA ni davolashda tanlov vositasi hisoblanadi. Psoriatik artritda sekukinumabning samaradorligini baholash uchun FUTURE1 va FUTURE2 tadqiqoti o'tkazilib, mingdan ortiq bemorlarda samaradorligi o'r ganilgan. Tadqiqotga TNF- α -ingibitorlariga etarli javob bermagan yoki ilgari TNF- α -ingibitorlarini qabul qilmagan psoriatik artritli bemorlar kiritilgan. Tadqiqot natijasida sekukinumabning psoriatik artritda samaradorligi yuqori ekanligi tasdiqlangan va xalqaro klinik protokollarda isbotlanganlik darajasi A deb kiritilgan [5].

Maqsad

PsA li bemorlarda IL-17 ingibitori bilan davolash samaradorligini o'r ganish.

Materiallar Va Usullar

Toshkent tibbiyot akademiyasi ko'p tarmoqli klinikasi IADKda, revmatologiya va ichki kasalliklar reabilitatsiyasi bo'limida davolangan 94 ta psoriatik artritli bemorlar kuzatuvga olindi. Ulardan 52 tasi ayol (%), 42ta (%) erkak bo'lib 18 yoshdan 75 yoshgacha, o'rtacha yoshi $52,5 \pm 0,9$ yosh. PsA tashxisi bemor shikoyati, anamnezi, fizikal va klinik-laborator hamda instrumental tekshiruvlar asosida, dermatolog ko'rigi, CASPAR-2006y. me'zonlariga ko'ra qo'yildi. Bemorlar 2 guruxga bo'lib o'r ganildi. 1-guruxda (n=52) nafar bemorga, davolashda haftasiga 15mg t/o metotreksat qo'llanildi. 2-guruxni (n=10)bazis yallig'lanishga qarshi dori vositalari qo'llanilganda samara kuzatilmagan bemolar tashkil qildi va ularga sekukinumab dori vositasini sxema bo'yicha 0, 1, 2, 3, 4 va har oyda bir marta 3 oy davomida 150 mgdan qilindi va xافتасига metotreksat 15 mg teri ostiga kombinatsiyasi buyurildi. Davo samaradorligini baholash uchun klinik va laborator ko'rsatkichlar dinamikasi 3 oy davomida o'r ganildi. Ps va PsA faolligini baholash maqsadida PASI, BSA, VASH, DAS indeksi aniqlandi.

PsAni tashxislashda maxsus laborator tekshiruv usullari mavjud emas. Instrumental tekshiruv ahamiyatga ega. Bemorlarda laborator va instrumantal tekshiruvlardan UQT, o'tkir fazali sinama, bioximiya, tos-son suyagi va jaroxatlangan bo'g'imlar rentgenografiyasi, bo'g'im va pay boyamlar UTT va MRT tekshiruvi o'tkazildi.

Davolash Tekshiruvlar Samarasini 3 Ta Guruxga Taqsimladik

"A'lo"-klinik-biokimiyoviy ko'rsatkichlarning to'liq normallashishi, shuningdek PsA o-I FSga xos, kasallikning klinik remissiyasiga erishildi. "YAxshi"- yallig'lanish ko'rsatkichlari noto'liq normallashdi, kasallik faolligini aloxida belgilari saqlanib qolishi, hamda PsA I-II FS bo'g'im faoliyati to'liq bo'lmanan tiklanishi kuzatildi. "Qoniqarli"- faollik jarayonining saqlanishi bilan klinik jixatdan yaxshilanish, kasallikning noto'liq remissiyasiga erishildi.

Tadqiqot Natijasi Va Taxlillar

Tadqiqotimizda PsA artrit bilan 78%, spondilit bilan 15%, entezit bilan 12% bemorlar kuzatildi.



Tadqiqot natijasida bemorlar holati yaxshilanib, bo‘g‘imlarda og‘riq, shish susayib harakatchanlik samarali oshdi. Ps bor bemorlarning teri toshmalari kamayishi kuzatildi.

Jadval №1 Davolash jarayonida klinik-laborator ko‘rsatkichlar dinamikasi

Ko‘rsatkich	1-gurux n=52		2-gurux n=10		ishonchlilik
	1 oydan so‘ng	3 oydan so‘ng	1 oydan so‘ng	3 oydan so‘ng	
Ishqoriy fosfataza (mmol/ch.l)	6,42±0,55	5,71±0,51	5,42±0,39	4,71±0,51	p<0,001
ECHT (mm/s)	23,5±1,5	13±2	15,5±2,0	10,0±1,5	p<0,001
SRO	2+	1+	1+	-	
PASI (ball)	4±1,5	3±1,3	2±0,4	1±0,2	p<0,05
VASH (ball)	5,04±0,44	3,02±0,12	4,0±0,30	3,2±0,35	p<0,05
DAS (ball)	4,05±0,52	3,8±1,2	3,6±0,38	3± 0,28	p<0,05

Bemorlarga shuningdek, xavf omillarini bartaraft etish uchun chekish va spirtli ichimlikdan voz kechish, dieta va semizlikka qarshi kurashish usullari tavsiya qilindi. Natija shuni ko‘rsatdiki, PsA faolligi susayib, remissiyaga erishdik. PsAning entezit va spondilit shakllarida metatreksat kam samara bergen bemorlarga IL-17 ingibitori sekukinumab bilan birgalikda metotreksat buyurildi va bu ayniqsa PsAning entezit va spondilit shakllarida, tirnoq psoriazida ham samaradorlik oshishiga, shuningdek bo‘g‘imlarda og‘riq va shish qisqa vaqtida qaytishiga erishildi.

IL-17 ingibitori qo‘llashdan oldin Rasm №1



IL-17 ingibitori qo‘llashdan keyin Rasm №2





Uzoq muddatli 3 oydan 12 oygacha natija bemorlarning o‘zini yaxshi xis qilishiga va gospitalizatsiyaga ko‘rsatma kamayishiga erishildi.

Xulosa

Tadqiqotimizga xulosa qilib aytganda, PsA entezit, spondilit shaklida metotreksat olgan bemorlarga qaraganda sekukinumab bilan birgalikda metotreksat olgan bemorlarda davolash samaradorlik qisqa vaqtida yuzaga keldi va kasallikning faolligi susaydi. Metotreksat olgan bemorlarda esa 6 oydan so‘ng remissiyaga erishilgan bo‘lsa, sekukinumab bilan birgalikda metotreksat olgan bemorlarda 3 oyda remissiyaga erishildi hamda bemorlarga samarali, to‘g‘ri, davolash davomiyligi jixatidan tanlov dori vositasi sifatida sekukinumab bilan birgalikda metotreksat kombinatsiyasi samaradorligi yuqori deb baholandi.

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Because the peculiarities of the current state policy and its focus lies in the formation of the socio-political activity of young people, the development of self-government around them. This, in its turn, draws special attention today of politicians and leaders of social movement as a source of election of social group.

Young people's civic culture is closely connected with their legal consciousness. Personal rights and freedoms are a structural feature of civil society, while a developed legal consciousness is an important element of civic culture. It is impossible to imagine a civil society without the rule of law. A person becomes a citizen only when he has a worldview based on the harmony of self-respect, independence, individuality, through the strict observance of high moral ideals, laws, respect for the rights and freedoms of other citizens.

Thus, based on the above, we can say that the essence of the process of formation of civic culture should consist of legal values, the rule of law, legal consciousness, freedom, justice, humanism, tolerance and confidence in patriotism.

Through the development of a high civic culture in young people, it is possible to form a sense of responsibility for the fate of their homeland, develop a legal and political culture, promote social, economic, political and environmental activities, develop a sense of respect for the laws and form a sense of patriotism.

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