



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



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diagnostika shifoxona laboratoriya xizmatlarini tashkil etishda haligacha hal etilmagan muammolardan biri hisoblanadi.

Xulosa. Shunday qilib, intensiv terapiya bo'limlarida bemorning ahvolini kuzatishda muayyan tadqiqotlarni takrorlash chastotasini aniqlashda muammolar mavjud. Kunduzi laboratoriya tadqiqotlari laboratoriya ekspress diagnostikasi uchun oqilona ish jadvalini talab qiladi, bundan tashqari, vaziyatlarning ekstremal tabiatini hisobga olgan holda, kutilmagan, shu jumladan noto'g'ri natijalarni olish mumkin. Shuning uchun bu holatlarda laboratoriya shifokorlari va klinikistlar yaqin aloqasi alohida ahamiyatga ega.

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SYSTEMIC INFLAMMATORY RESPONSE SYNDROME SCORE MAY INDICATE INCREASED RISK OF MAJOR AMPUTATION IN PATIENTS WITH DIABETIC FOOT ULCER

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The prevalence of diabetes mellitus (DM) is rising significantly, and the World Health Organization has reported that the estimated number of patients with diabetes was nearly 425 million in 2017, consequently, increasing the number of diabetes-related complications. In 2019, the estimated number of people with diabetes aged 65–99 years is 135.6 million (19.3%). If this trend continues, the number of people above 65 years (65–99 years) with diabetes will be 195.2 million in 2030 and 276.2 million in 2045.

Methods: Clinical records of all patients with DFU admitted to our institution over a one-year period were analysed. The worst SIRS score in the first 24 hours of admission was calculated and patients stratified into two groups: SIRS positive (a score of two or more) and SIRS negative (a score less than two). Any surgical intervention to treat infection was recorded. This included debridement, drainage of abscess, and minor and major amputations.

Results: Chronic diabetic complications are a serious health concern as well as an economic burden. Among complications, it is generally known that diabetic foot ulcer (DFU) is the most frequently recognized complication, which is a kind

of disease related to neuropathy and/or peripheral arterial disorder of the lower extremities and with infection, ulceration, and destruction of deep tissues in diabetic patients, as a result of the interaction of factors induced by sustained and uncontrolled hyperglycemia. To explore the utility of the Systemic Inflammatory Response Syndrome (SIRS) score for indicating the risk of surgical intervention to treat infection in patients admitted with diabetic foot ulcer (DFU).

Eighty-six patients were admitted with DFU. The SIRS positive group comprised 24 patients. The two groups were well matched for age, gender and comorbidities. In both the SIRS positive and SIRS negative group 63% of patients had an amputation of any kind. There were six (17%) major amputations in the SIRS positive group compared to two (4%) major amputations in the SIRS negative group. This difference was significant ($p=0.036$, Fisher's exact test).

Conclusions: The SIRS score may be a useful indicator of the risk of major amputation in patients admitted with diabetic foot ulcer.

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THE ROLE OF THE GS743572 POLYMORPHISM OF THE CYP17A1 GENE IN THE FORMATION AND CLINICAL COURSE OF ATHEROSCLEROSIS

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Autoimmune thyroiditis (AIT) is an autoaggressive disease, the morphological substrate of which is lymphoid and plasmacytic infiltration of the thyroid gland with its subsequent destruction and replacement by connective tissue.