ZAMONAVIY KLINIK LABORATOR TASHXISI DOLZARB MUAMMOLARI
xalqaro ilmiy-amaliy anjuman

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bo'lganda PZR usulida virusni qnialqsh uchun yuqori nafas yo'llaridan namuna olinadi. Quyi nafas yo'llaridan olinadigan namunalar yanada aniqroq natijalar beradi. Shu bilan bigram namunalarni to'g'ri saqlash, laboratoriyaga transportipovka qoidalariga rioya qilish ham muhim ahamiyatga egadir.

Adabiyotlar.

1. Бабаджанова Ш.А., Курбонова З.Ч., Муминов О.А. Частота тромбоэмболических осложнений у больных с коронавирусной инфекцией // Назарий ва клиник тиббиёт. – 2021. №5. – С. 146-149.

2. Бабаджанова Ш.А. Курбонова З.Ч. Коронавирус инфекциясида гемостаз патологиясини лаборатор ташхислаш ва даволаш: услубий тавсиянома. Тошкент, 2022. Б. 14-16.

3. Курбонова З.Ч., Бабаджанова Ш.А., Миразимов Д.Б., Муминов О.А. Характеристика функции тромбоцитов при COVID-19 // Тошкент тиббиёт академияси ахборотномаси. – 2021. -№1. – Б. 34-36.

5. Курбонова З.Ч., Бабаджанова Ш.А., Муминов О.А. Лабораторный мониторинг патологии коагуляционного гемостаза у больных COVID-19 // Назарий ва клиник тиббиёт. – 2021. №5. – С. 149-151.

6. Курбонова З.Ч., Муминов О.А. Коронавирус инфекцияси клиник хусусиятлари // Назарий ва клиник тиббиёт. – 2022. - №5. – С. 87-89

7. Babadzanova Sh.A. Inoyatova F.X., Kurbonova Z.Ch. Relationship between MTHFR gene rs1801133 and rs1801131 polymorphisms with disease severity of covid-19 and homocystein levels in uzbek patients// Journal of Pharmaceutical Negative Results. – 2022. – Vol. 13. – P. 1879-1888.

8. Babadzhanova Sh.A. Kurbonova Z.Ch. Pathology Of Vascular-Platelet And Coagulation Hemostasis In Coronavirus Infection (Literature Review) // Eurasian Medical Research Periodical. – 2022. - №14. – С. 149-156.

SURUNKALI JIGAR KASALLIKLARIDA TROMBOTSITLARDAGI O'ZGARISHLAR

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Surunkali diffuz jigar kasalliklari zamonaviy tibbiyotning dolzarb muammolaridan hisoblanib, oshqozon-ichak kasalliklari orasida yetakch io'rinlardan birini egallaydi. Butun dunyo bo'ylab surunkali gepatit va jigar sirrozi bilan kasallanish o'sib bormoqda. O'tgan o'nyillar davomida, jigar sirrozi bilan kasallanish barqaror yuqori bo'lib qolmoqda va ixtisoslashtirilgan shifoxonalarda surunkali diffuz jigar kasalliklari bilan kasallanganlar, bemorlar umumiy sonining 30% ini tashkil etadi. Kasallanish oqibatlari har bir bemorning uzoq vaqt mehnatga layoqatsizligini, nogironlik va o'lim darajasini oshishiga olib keladi [1.]. Jigar sirrozida o'limning asosiy sabablari jigar komasi (40-60%) va oshqozon ichak tizimning yuqori qismlaridan qon ketishi (20-40%) hisoblanadi. Jigar saratoni, interkurent infektsiyalar va gepatorenal sindrom deyarli kam uchraydi. Ushbu

patologiyani o'z vaqtida aniqlash bunday bemorlarning hayot davomiyligini sezilarli darajada oshirish va hayot sifatini yaxshilash imkonini beradi [2].

Tadqiqot maqsadi: virus etiologiyali surunkali jigar kasalliklarida bemorlarning umumiy qon tahlilidagi trombotsitlar o'zgarishlarni aniqlash.

Materiallar va usullar: tadqiqot uchun klinik materil 2022-yildavomida Toshkent tibbiyot akademiyasi ko'p tarmoqli klinikasining gepatobiliar bo'limida davolangan 50 nafar surunkali gepatit C va jigar sirrozi bilan kasallangan, antivirus terapiya qabul qilgan bemorlar umumiy qon tahlilidagi ma'lumotlaridan olindi. Bemorlarning yoshi 33-76 yosh bo'lib, o'rtacha yosh ko'rsatkichi 57.5 yoshni tashkil etadi. Kasallikning turiga ko'ra bemorlar 2 ta guruhga ajratildi: I guruh ya'ni surunkali gepatit bilan kasallangan 25 ta bemor va II guruh jigar sirrozi bo'lgan 25 ta bemor.Tadqiqotda umumiy qon tahlilidagi trombotsitlar soni ma'lumotlari o'rganildi.

Natijalar. Bemorlarda trombotsitlar soni o'rganib chiqilganda trombotsitlar soni jigar surunkali kasalligi bo'lgan bemorlarda o'rtacha 204 ± 26 x10^9/l ni tashkil etgan bo'lsa , jigar sirrozi bilan og'rigan bemorlarda umumiy trombotsitlar soni o'rtacha 96 ± 19 x10^9 g/l ni tashkil etdi.Antivirus terapiya qabul qilishning 3-oyida jigar sirrozi bo'lgan bemorlar va surunkali jigar kasalliklari bo'lgan 28% bemorlarda trombotsitlar soni 118 ± 16 x10^9/l bo'lsa, 12% bemorlarda 74 ± 6 x10^9/l ni tashkil qildi. Terapiyadan so'ng 3-oyga kelib bu bemorlardagi trombotsitlar soni 198 ± 22 x10^9/l gacha oshdi.

Xulosa. Xulosa qilib aytish mumkinki, jigar zararlanishlarida trombotsitopeniya rivojlanadi. Surunkali gepatit va jigar sirrozida antivirus terapiyasidan keyin 40% bemorlarda trombotsitlar soni kamaygan bo'lsa, terapiyadan so'ng 3-oyga kelib bu bemorlardagi trombotsitlar soni normal ko'rsatgichlargacha oshganini ko'rish mumkin bo'ladi.

Adabiyotlar:

1. Курбонова З.Ч. Вирус этиологияли сурункали гепатит ва жигар циррозида гемостаз тизими бузилиши хусусиятлари: автореф. Дис. Кан. Мед. Наук. – Тошкент, 2019. -45 с.

2. Курбонова З.Ч., Бабаджанова Ш.А. Функциональная характеристика тромбоцитов у больных циррозами печени вирусной этиологии // Российская наука в современном мире. – Москва, 2019. – С. 47-48.

3. Курбонова З.Ч. Нарушение сосудисто–тромбоцитарного звена гемостаза у больных с хроническими гепатитами и циррозом печени вирусной этиологии // Журнал проблемы биологии и медицины. – 2018. - № 3 (102). – С. 40-43.

4. Курбонова З.Ч., Бабаджанова Ш.А. Нарушение системы гемостаза при хронических диффузных заболеваниях печени: монография. Тошкент, "Ҳилол нашр" босмахонаси, 2021. С. 106-108.

5. Курбонова З.Ч., Бабаджанова Ш.А. Диагностика и лечение приобретенной тромбоцитопатии: методические рекомендации. Тошкент, 2018. С. 14-15.

6. Саидов А.Б., Сайфутдинова З.А., Каримов Х.Я. Лекарственно-индуцированный токсический гепатит: современные воззрения // Назарий ва клиник тиббиёт, 2021. -№3. – Б. 52-58

7. Kurbonova Z.Ch., Babadjanova Sh.A. Violations of coagulative hemostasis in patients with liver cirrhosis of the viral etiology.European science review. 2018,7-8:122-125.

DIGITALIZATION OF LABORATORY DIAGNOSTICS
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Whole slide imaging/images (WSI) offers promising new views for digital Laboratory. we tend to launch associate initiatives within the anatomic pathology (AP) domain of desegregation the attention enterprise (IHE) to outline standards-based IP transactions for desegregation AP info and WSI. The IHE integration and content profiles developed as a result of this initiative with success support the essential image acquisition and coverage processes in AP laboratories and supply a typical answer for sharing or exchanging structured AP report within which observations will be expressly certain to WSI or regions of interest (ROI) in pictures.

The conception of digital laboratory refers to the employment of knowledge technology that supports the creation, sharing, or exchange of knowledge, as well as knowledge and pictures, to support the advanced progress from specimen receipt to AP report transmission.

Anatomic pathology data systems (APIS) and digital image acquisition modalities (gross photography, microphotography, and virtual microscopy) square measure the 2 main parts of digital pathology however different systems, like autostainer management package, image analysis tools, telepathology systems, and biorepository management systems square measure extra vital parts.

An AP laboratory ought to think about digital laboratory as over simple deed associated with managing AP reports and pictures inside an associate institution; it's an integrated effort that conjointly includes developing the design and infrastructure to allow completely different departments or health care systems to collaborate mistreatment this knowledge.

Method and materials. We used the methodology of the IHE initiative that has been developed in North America, Europe, and Asia. The IHE method relies on operating teams that embrace each healthcare supplier and data systems vendor guilty of processing domain-specific integration profiles. Associate in Nursing integration profile describes IHE actors (i.e. useful elements of knowledge systems) concerned during a domain-specific method (e.g. order management or report management) and the way the transactions (i.e.

Results. The main output of the AP workflow could be a timely and clear report of diagnostic, prognostic, and therapeutic data crucial to patient care, clinical analysis, and medical specialty. The reportage method is more and more