



**KLINIK LABORATOR  
DIAGNOSTIKADA INNOVATSION  
TEXNOLOGIYALARDAN  
FOYDALANISH, MUAMMOLAR VA  
YECHIMLAR**  
**xalqaro ilmiy-amaliy  
anjuman**  
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## DONORLARDA BRUTSELLYOZ DIAGNOSTIKASI

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*Brucella* turidagi bakteriyalar o'tkir yuqumli fokal zoonoz infeksiyalar guruhiga mansub bo'lib, ijtimoiy ahamiyatga ega muammolardan biridir. U mushak-skelet va asab tizimlariga, limfa tugunlariga va boshqa ba'zi inson a'zolariga ta'sir qilishi mumkin. Brutsellalar tomonidan kelib chiqadigan yuqumli kasallik o'z vaqtida davolanmasa nogironlikka olib keladi. 1950-yillarda brutsellyozni qon quyish orqali yuqtirish isbotlangan. Shuning uchun donordlarda brutselezga tekshirish qon va uning tarkibiy qismlarini kuyishda infeksiyon xavfsizlik prinsipiga kiradi.

**Tadqiqot maqsadi:** donordlarda brutsellyozning klinik laborator diagnostikasini asoslash.

**Tadqiqot materiallari va usullari:** Respublika qon quyish markaziga murojat qilgan qon donorlari orasida brutsellyoz kasalligining diagnostika qilish. Bizning nazoratimiz ostida 90 donor natijalari o'rganildi.

**Tadqiqot usullari:** Klinik laborator tekshiruv maxsus laboratoriyada immunoferment analiz (IFA) usulida brutsellyoz patogenlari antigenlari va unga qarshi IgM bo'lgan antitanani aniqlash, Hedderson plastinka aglyutinatsiyasi reaksiyasi, Rayt aglyutinatsiyasi reaksiyasi o'tkazildi.

**Natijalar.** Biz brutsellyozning laborator diagnostikasi usullarining ham antigen, ham antitanani tekshirish usulidan foydalandik, bunda amaliy sog'liqni saqlash va tashxisda tibbiy yordam hajmining standartlariga muvofiq brutsellyozni tashxislash testlari orqali maxsus antitanalar va antigenlarning qondagi darajasi aniqlandi. Klinik laborator tashxis natijalari quyidagicha bo'ldi: IFA usuli IgM bilan brutsellyoz patogenlariga antikorlar donorlarning 3,3% da aniqlandi (opkr-0,383) 4 D-0,522, 4 D-1,132, 8 D-0,420. Hedderson aglyutinatsiya reaksiyasida 2,2% musbat reaksiya aniqlangan bo'lsa, Rayt aglyutinatsiyasi 1/200 - 1/800 titrlarda 3,1% musbat natijaga ega bo'ldi.

**Xulosa:** SHunday qilib, IFA usulida brutsellyozga qarshi antitanalar (IgM) va antigenlar donorlarning 3,3% da aniqlangan bo'lsa, Hedderson aglyutinatsiya reaksiyasida 2,2% musbat reaksiya, Rayt aglyutinatsiyasi reaksiyasida esa 3,1% musbat natijaga bo'ldi.

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## COMPARATIVE CHARACTERISTICS OF LUNG TUBERCULOSIS TREATMENT MODELS

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**Introduction.** In recent years, there has been a tendency in the Republic of Uzbekistan to stabilize the main indicators for tuberculosis. In these conditions of the epidemiological situation, the need to personalize approaches to the treatment of patients is of particular importance. Over the past decade, more attention has been paid to reducing the length of stay of patients in the hospital with an emphasis on their outpatient treatment under control.

**The purpose** of the study: a comparative assessment of the provision of medical services to TB patients within the framework of the "inpatient and outpatient treatment" model and the "outpatient treatment of pulmonary tuberculosis from the first day" model.

**Materials and methods.** The analysis of statistical data collected for 2015-2019 on Uchtepinsky and Chilanzarsky districts of Tashkent city is carried out. The inclusion criterion was patients aged 18 years and older, with a verified diagnosis of "pulmonary tuberculosis" (n=1162) and divided into 2 models: patients who received the intensive phase (IF) in inpatient conditions and the maintenance phase (PF) in outpatient conditions (model I) - 746 patients; patients, those who received c in outpatient conditions of IF and PF from the first day of treatment (model II) – 416 patients.

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