

International Conference

**SCIENTIFIC RESEARCHES
FOR DEVELOPMENT FUTURE**

October 25, 2018, New York, USA

Conference Proceedings

**B&M Publishing
San Francisco, California, USA**

Social capital: concept, role and functions <i>N. Basilashvili</i>	72
Learning some aspects of a foreign language through artistic texts <i>E. Gusarova, G. Virabyan, E. Malyshkina</i>	75
Basic provisions and procedure for attracting convicts to work <i>I. Kalashnikov, V. Odintsov, Ch. Radaeva</i>	78
Psychological problems of pupils of elementary grades of average comprehensive school <i>N. Abdullaeva</i>	82
Influence of the amount of atmospheric deposits on the quality and period of sowing <i>B. Shaymardanov, A. Tolibayev</i>	85
Influence of soil treatment and norm of mineral fertilizers on growth and development of little drip and fertility of soil <i>M. Urmanova</i>	88
The estimation of biocompatible implant in the lungs surgery <i>Sh. Khudaybergenov, M. Khalmuratova</i>	92
Surgical tactics at acute intestinal obstruction of tumoral genesis <i>U. Kurbankulov, A. Yusupbekov</i>	93
Clinical evaluation of biomechanical features of the fibrous membrane of the eye in children with congenital glaucoma <i>Yu. Khamroyeva</i>	96
Method of surgical treatment of congenital glaucoma <i>Yu. Khamroyeva</i>	98
Developing intercultural awareness in EFL classrooms <i>M. Kazakova</i>	99
On the issue of hierarchy of evidence in the criminal procedure of Russia <i>E. Bryanskaya</i>	101
Is theft committed by force? <i>T. Xasanov</i>	107
Ahsikent - planetary concept of an open-air museum <i>S. Valiev</i>	110
Features of penetrating sclera wounds in children <i>Z. Niyazova</i>	115
Family and modern youth <i>N. Yusupova</i>	117
Study of application of solar photo-energy in physics <i>U. Abdiyev</i>	122
Books and human being <i>R. Shaymanova</i>	125
How to develop intercultural competences with case studies <i>S. Ziyaboyeva</i>	128
The importance of sociolinguistics as a linguistic discipline <i>B. Kushakova</i>	131
Study some important aspects of high-quality pitcher wine making in a small family cellar <i>V. Shiukashvili, Z. Shaqarashvili, N. Vepkhishvili</i>	133
Statistical analysis of innovative development of cotton seeds in tulip <i>A. Khasanov</i>	137

SURGICAL TACTICS AT ACUTE INTESTINAL OBSTRUCTION OF TUMORAL GENESISU. Kurbankulov¹, A. Yusupbekov²*Abstract*

Despite achievements of modern clinical surgery, modernisation of reanimation service and introduction of new medical technologies, there is a multitude of pathologies which the medicine should control in the century XXI. One of such pathological states which demands special attention and waits for the decision is acute intestinal obstruction (AIO).

Keywords: surgical tactics, obstruction, tumoral genesis.

The urgency of a problem of diagnostics and treatment of AIO is conditioned by that lethality at this disease is 16-27% and has no tendency to depression and surgeons are often needed to operate patients of elderly and senile age with accompanying diseases of cardiovascular system and breath organs.

Proceeding from the above-stated, the purpose of the present report is improvement of results of timely diagnostics and surgical treatment for AIO patients of a tumoral genesis by the retrospective analysis of National Center of Oncology of Uzbekistan materials.

Material and methods. We have analyzed results of treatment of 182 patients at the age from 18 until 80 years with AIO, which were subjected to various surgical procedures concerning verified colorectal cancer diagnosis during 2011 – 2015. Middle age of patients was 61.2 + 0.2 years including 72 (39.6 %) men, 110 (60.4 %) women.

When entering the hospital complex methods of diagnostics were conducted for all patients according to algorithm of primary inspection of colon cancer patients.

On the basis of the obtained results and expression of clinic of impassability the patients were divided into 3 groups:

I – compensated – 18 (9,9%) patients;

II – subcompensated – 90 (49,4%) patients;

III – decompensated (full retentive obstruction) – 74 (40.7%) patients.

Results. According to anatomical structure of a colonic intestine at our patients, following localizations of the pathological centre are revealed: tumor was localized in the right half of colonic intestine at 54 (29.7%) patients, in cross-colonic intestine at 10 (5.5%), in the left half of colonic intestine - at 118 (64.8 %) patients.

At 108 (59 %) out of 182 patients the tumor was of Stage III and Stage IV at 74 (41%).

Histological research has revealed adenocarcinoma of various differentiation degree at 144 (79.1 %) patients, undifferentiated cancer at 8 (4.4 %) patients, solid at 15 (8.2 %) patients, mucous at 12 (6.6%) and carcinoid tumor at 3 (1.7 %) patients.

¹Uktam Kurbankulov, Researcher and MD at the Department of Oncology, Tashkent Medical Academy.

²Abrorbek Yusupbekov, Doctor of medical sciences, Deputy Director at the Republican Cancer Research Center, Tashkent, Uzbekistan.

As emergency 53.8 % of patients have been operated, urgently – 42.0 % and in the delayed order – 4.2 % of patients. In all cases, operation was started from median access.

Out of 54 patients with right tumor localization the right hemicolectomy was performed at 37 (68.5%); at 5 (9.3%) there was imposed bypass ileo-transverse anastomosis as the first stage of radical treatment, subsequently they were subjected to radical surgery. 8 (14.8 %) cancer patients of Stage IV were imposed to ileo-transverse anastomosis as a palliative intervention, to 4 (7.4%) patients double-barreled ileostomy have been raised.

There were operated 118 colon cancer patients with left localization of which 75 (63.6%) were subjected by Gartman radical operation or left hemicolectomy, out of 43 (36.4%) the acute intestinal obstruction was eliminated by applying double-barreled colostomy without removal of tumor at 39 patients, bypass transverse-sigmo anastomosis at 3 patients, cecostoma at one patient. Out of the indicated 43 patients at 24 there was a cancer of Stage IV, and at 19 patients the interventions unloading intestine were the first stage of radical treatment.

Out of 10 patients with tumor localization in cross-colic intestine 2 have had expanded right hemicolectomy, 3 patients had left hemicolectomy, 3 patients had resection of cross colic intestines and 2 patients had bypass anastomosis,

At 78 (42.8%) patients the acute intestinal obstruction has been complicated by peritonitis: serohemorrhagic or serofibrinous (32), fibrinopurulent (40) and fecal (6). Besides it, at 4 patients the perienteric abscess was found out as a result of tumor microperforation.

The analysis has shown that in the postoperative period the general frequency of complications connected with carried out surgical manipulation was 18.6 % (34 patients).

At the same time we differed complications both local and general character. So out of 34 patients at 25 (13.7 %) there was presence of complications of local character which are directly connected to the carried out operation. At the others 9 (4.9%) patients there were observed complications of the general character – extra surgical complications, i.e. functions of the vital organs and systems against absence of organic changes from a zone of operational impact.

Among complications of a local genesis mostly often there was observed pyesis development of postoperative wound – at 11 patients. Besides, inefficiency of anastomosis seams took place at 8 patients, ostomy immersing in an abdominal cavity with the subsequent peritonitis – at 4 patients, parastomal abscesses – at 2 patients.

Among complications of the general character there were observed: acute cardiovascular and respiratory insufficiency – at 5, acute thromboembolism of pulmonary artery – at 2, acute hepatorenal insufficiency – at 1 and acute multiple organ failure – at 1 patient.

It is necessary to note that despite the carried out actions at 19 (10,4 %) were observed lethal outcomes out of 34 patients with postoperative complications.

Out of 120 (66%) patients radically operated under the presence of acute intestinal obstruction 12 (10.7%) have died. All 12 patients who were operated to remove a tumor after preliminary elimination of acute intestinal obstruction surgically, have safely survived the operation. Out of 62 (34%) patients who had palliative intervention, have died in the early postoperative period 14 (24%), including at 3 of stage III cancer, and at 11 of stage IV has been defined.

The death reason was progressing peritonitis at 12 patients, anastomosis seams inefficiency at 2 patients, thromboembolism complications at 3 patients, cancer cachexia at 2 patients, cardiovascular complications at 5 patients.

Conclusions 1. At the colon cancer to be complicated by obturative obstruction it is necessary to aspire not only to liquidate complication but also to perform radical primary operation which favorably differs by that the tumor is removed as source of intoxication and metastasis. 2. At right localisation of a tumor it is admissible to perform hemicolectomy with applying of ileo-transverse anastomosis. At left localization in case of little changes in intestine wall the resection with anastomosis applying is possible, and in case of the expressed obstruction the operation is carried out in volume of obstructive resection (Gartman operation). 3. Unloading and draining operations are carried out in cases of a serious initial condition of the patient, expressed intoxication, presence of unresectable tumors or generalization of malignant process.

References

- [1] Aliev S.A.//Surgery. – 2011. - №8. – p. 44-50.
- [2] Bryusov P. G, Lysenko V. N, Malahov J.P.//Modern possibilities of the surgical combined and complex treatment of colorectal cancer. – Perm, 2003. – p. 16-17.
- [3] Bryusov P. G, Malahov J.P. «Evolution of approaches to surgical treatment of the patients with colonic intestine cancer complicated by acute intestinal obstruction» //Russian oncologic journal. - 2004 - №5. – p. 4-8.
- [4] Vasilev I.T., Mumladze R. B, SkorobogAIov of MB., Guseva S.A.// Actual possibilities of modern surgery. – M, 2003. – p. 132.
- [5] Efimenko N.A., Ushakov I.I. Standardized approaches to diagnostics and treatment of the most widespread forms of malignant neoplasms. Part I. M, 2001. – p. 28.
- [6] Litvinov R. P, Dolgushin B.I., Nechushkin M. I et al.// Modern possibilities of the surgical combined and complex treatment of a colorectal cancer. – Perm, 2003. – p. 57-58.
- [7] Pugaev A.V., Achkasov E.E., Negrebov M. G, and co-authors.// Russian oncologic journal. – 2004 - No. – p. 8-15.
- [8] Fedorov V. D, Vorobyev G.I, Rivkin V. L. Clinical operative coloproctology. – M, 1994.
- [9] Ambrosetti P., Mishel J.M., Morel P. – 1999. – Vol. 53, N 19. – p. 11585—1587.
- [10] Umbach T. W., Dorazio R.A. // Am. Surg. – 1999. Vol. 65.