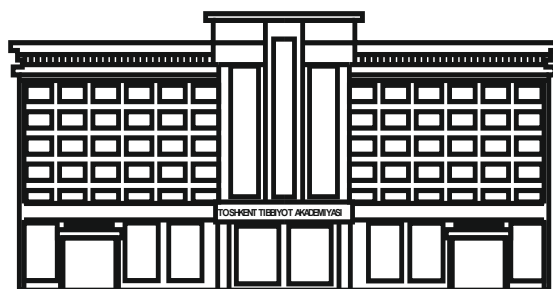


ЎЗБЕКИСТОН РЕСПУБЛИКАСИ СОҒЛИҚНИ САҚЛАШ ВАЗИРЛИГИ
ТОШКЕНТ ТИББИЁТ АКАДЕМИЯСИ

2022 №9

2011 йилдан чиқа бошлаган

TOSHKENT TIBBIYOT AKADEMIYASI
AXBOROTNOMASI



В Е С Т Н И К
ТАШКЕНТСКОЙ МЕДИЦИНСКОЙ АКАДЕМИИ

Тошкент

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**МОРФОФУНКЦИОНАЛЬНЫЕ
НАРУШЕНИЯ ПРИ ОГНЕСТРЕЛЬНОЙ ТРАВМЕ
КОНЕЧНОСТИ И ИХ КОРРЕКЦИЯ МЕТОДАМИ
РЕГИОНАЛЬНОЙ ЛИМФАТИЧЕСКОЙ ТЕРАПИИ
(клинико-экспериментальное исследование)**

Джумабаев Э.С., Мирзаев К.К.

Аннотация. Цель. Экспериментальное морфофункциональное обоснование и внедрение мето-

дов региональной лимфатической терапии в лечение огнестрельных повреждений конечностей. **Методы.** Представлен опыт лечения 169 пострадавших с огнестрельными ранениями конечностей, в результате терактов и контртеррористических операций в Андижанской области. Проведены экспериментальные исследования на 40 животных, с моделью огнестрельной раны конечности и изучением данных электронной микроскопии, а также фармакокинетики антибиотиков. Исследуемые больные и экспериментальные животные разделены на две группы: основную – с региональной лимфатической терапией и контрольную- без использования методов лимфотерапии. **Результаты.** Выявлена важная роль лимфатической системы в течение раневого процесса. Региональная лимфатическая терапия обеспечивает высокие концентрации антибиотиков в патологическом очаге и в лимфатическом русле, ограничивает зону некроза, предотвращает развитие гнойно-септических осложнений, создает условия для более физиологического ремоделирования тканей. **Заключение.** Лимфатическая система претерпевает значительные расстройства при огнестрельной травме. Методика региональной лимфатической терапии, по сравнению с традиционным лечением, создает надежный превентивный эффект развития тяжелых гнойно-септических осложнений.

Ключевые слова: огнестрельные ранения конечностей, региональная лимфатическая терапия.

УДК: 616.89+615/832/9+615.851

EFFECTIVE PSYCHOCORRECTION IN NEUROTIC DISORDER

Ibodullayev Z.R., Karakhonova S.A.

ЭФФЕКТИВНАЯ ПСИХОКОРРЕКЦИЯ ПРИ НЕВРОТИЧЕСКОМ РАССТРОЙСТВЕ

Ибодуллаев З.Р., Карахонова С.А.

XAVOTIRLI-FOBİK SINDROMNI DAVOLASHDA SAMARALI PSIXOKORREKSIYA

Ibodullayev Z.R., Karakhonova S.A.

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Аннотация. В статье приведены методы выявления и пути коррекции среди больных, страдающих с невротическими расстройствами. Данные исследования показали, у больных с невротическими расстройствами применялась антидепрессанты с рационально-эмоциональная психотерапиями, которая ведет к раннему выздоровлению, эффективному лечению.

Ключевые слова: невротические расстройства, астеноневротический синдром, шкала-Хека, когнитивно-бихевиоральная психотерапия.

Annotatsiya. Maqolada nevrotik kasalliklarga chalingan bemorlarni aniqlash va davolash usullari keltirilgan. Bu tadqiqotlar shuni ko'rsatdiki, nevrotik kasalliklari bo'lgan bemorlarda kognitiv-bixevioral psixoterapiya bilan anti-depressantlar qo'llanilgan, bu esa erta tuzalish va samarali davolanishga olib keladi.

Kalit so'zlar: nevrotik kasalliklar, astenonevrotik sindrom, Khek so'rovnomasi, kognitiv-xulq-atvor psixoterapiyasi.

According to the World Health Organization (WHO), 28-36% of patients with somatic diseases have neurotic disorders. According to a study conducted in Uzbekistan, 22% of patients with neurosis occupy 50% of the working time of medical workers in medical institutions. It is not difficult to notice that patients with neurotic disorders require more time from doctors than patients with organic diseases. These patients are examined by various categories of doctors for many years. However, these efforts on the part of doctors are often ineffective, which leads to professional burnout of doctors and material damage to medical institutions and the health care system, as well as discrediting medical science and practice in the eyes of the patient and his family. This condition requires that the therapist, cardiologist, gastroenterologist and other medical professionals have a figurative and accurate knowledge of neurotic disorders and their psychopathogenic types [5].

It should be noted that neurotic disorders develop as a result of untimely detection of undiagnosed psychosomatic disorders. More than 25% of patients applying to a multidisciplinary medical institution need psychotherapeutic assistance.

Today, therapists and especially general practitioners cannot correctly diagnose and correct all types of neurotic disorders, therefore, such patients are treated with various disorders of the gastrointestinal tract, cardiovascular system, and respiratory organs. Concomitant psychosomatic disorders are also found in 60% of long-term neurotic disorders [1].

According to the International European Program EUROASPIRE III, which involved 22 countries, the most important psychological factors associated with cardiovascular disease are acute and chronic stress, as well as associated neurotic and anxiety conditions. In Russia - 41.8% of men, in Slovenia - 40.4%, in Poland - 38%, in Spain - 37.7% of cases were diagnosed with anxiety-neurotic disorders. Among women, this figure was 63.7% in Russia, 61.4% in France, 56.8% in Spain and 55% in Belgium. The highest rates of neurotic disorders among men were in Slovenia - 35.7%, Turkey - 31.2% and Bulgaria - 29.7%. The highest level of neurotic dis-

orders among women was in Turkey - 62.5% [4]. Studies have shown that anxiety and neurotic disorders are twice as common in women as in men.

Thus, the early diagnosis of anxiety-neurotic disorders, the study of the mechanisms of their formation, timely adequate psychotherapy and pharmacotherapy remain an urgent problem in medicine.

Aim of the study. Optimization of effective psychocorrection methods for neurotic disorders.

Materials and research methods. The material of the study was 46 patients treated with a diagnosis of "psychosomatic disorder-asthenoneurotic syndrome" of the 1st and 2nd neurological departments of the I-clinic of the Tashkent Medical Academy. The age of the patients ranged from 22 to 44 years, the mean age was 34.5 ± 2.3 years

The diagnosis was made on the basis of complaints, anamnesis, objective and neurological status, as well as paraclinical data when patients contacted the clinic for inpatient treatment. The assessment of the mental state was carried out with the help of a medical and psychological questionnaire recommended by Ibodullaev Z.R. (patent No. 001031), as well as an objective and neurological status.

Patients were divided into two groups to determine the effectiveness of treatment.

Group 1: Rational psychotherapy and psychopharmacotherapy - tetramethyltetraazobicyclooctanedione (adaptol) were used in this group of patients: n-20.

Group 2: used rational-emotive psychotherapy and psychopharmacotherapy - tetramethyltetraazobicyclooctanedione (adaptol) in this group of patients: n-22.

Clinical and psychological examinations of patients were carried out on days 1-3 and 27-30. During clinical trials, patients were assessed for the autonomic nervous system and neurological status.

Examination of the autonomic nervous system in patients of both groups showed a predominance of red dermography over white dermography, with miosis being more common than mydriasis. It was found that hyperhidrosis and Danini-Ashner's symptoms were present in almost all patients. The results are presented in table 1:

Assessment of vegetative status

№	Vegetative status	number	%
1.	red dermography	34	77
2.	white dermography	8	24
3.	miosis	36	74
4.	midriaz	6	32
5.	Hyperhidrosis	40	88
6.	Danini-Ashner's symptom	37	83

($P \leq 0.05$)

As can be seen from the table, most of the patients taken for the study are vagotonic, that is, parasympathetic.

In addition to somatic complaints, neurological symptoms have also been reported in patients treated for a psychosomatic syndrome.

Examples of these neurological symptoms include: pain in the skull on percussion; positive symptom of Dantzig-Kunakov; pain in the points of Vaale; activation of salary reflexes, symmetrically increased TR, BR, PR, AR equally in the arms and legs; in coordination studies - detection of mild intensity during BBS and TTS, sensory changes such as mild tremor, hyperesthesia and paresthesia in Romberg's condition; violation of the function of the sweat glands - hyperhidrosis. Among the most common neurological symptoms observed in patients, hyperreflexia and sensory disturbances have

been found to be of a functional nature, a condition associated with an increase in patients' "sensitivity threshold". Hyperreflexia was observed in 35 patients, sensory disturbances - in 38 patients.

The least observed neurological symptom in patients was mild seizures in Romberg's condition in 15 patients and mild intensity in coordination tests -BBS and TTS in 29 patients, which were found to be associated with severe dizziness in patients. The observed changes in neurological status are compared and presented in Table 2.

Table 2.

Assessment of neurological status

№	Symptoms	number	%	P
1.	Pain on percussion of the skull	44	87	≤0,05
2.	Positive symptom of Danzig-Kunakov	33	69	≤0,05
3.	Pain in the points of Vaale;	22	52	≤0,05
4.	Increased tendon reflexes	35	88	≤0,05
5.	Light intention during coordination tests	19	47	≤0,05
6.	Slight staggering in the Romberg position	25	56	≤0,05
7.	Hyperesthesia	28	93	≤0,01
8.	paresthesia	25	89	≤0,01
9.	Hyperhidrosis	18	45	≤0,05

The results of the study show that the most common changes in neurological status are sensory impairments observed in 93% of patients. The next most common symptoms were hyperreflexia and percussion-induced cranial pain, which occurred in 88% and 87% of patients, respectively. The least frequent changes in neurostatus are hyperhidrosis and moderate trends in coordinate tests, occurring in 45% and 47% of patients, respectively.

The Heck scale was used to assess the psychological status. The Heck scale is an express method for diagnosing a neurotic condition, developed by the psychiatrist Heck. This scale is a highly sensitive and specific (specific) test for the clinical signs of a neurotic disorder, helping the doctor to diagnose and check the patient's neurotic condition without wasting time and money. The survey consisted of 40 positive and negative questions. Each question has a yes or no answer, and each yes answer is worth 1 point. The test lasts 20-30 minutes, during which the tester (physician) or the patient fills out the test form.

Procedure: The patient should read each question carefully and identify answers relevant to his or her condition. It is explained not to think long on questions, to mark the first answer that comes to mind, because there are no right or wrong answers.

Interpretation of results

The level of neurotic status (NS) ranges from -13-40 points.

- If the NS is less than 13 points, the neurotic disorder is considered absent.

- If NS 13-24 is present, it can be concluded that there is a mild neurotic state of situational or neurotic genesis.

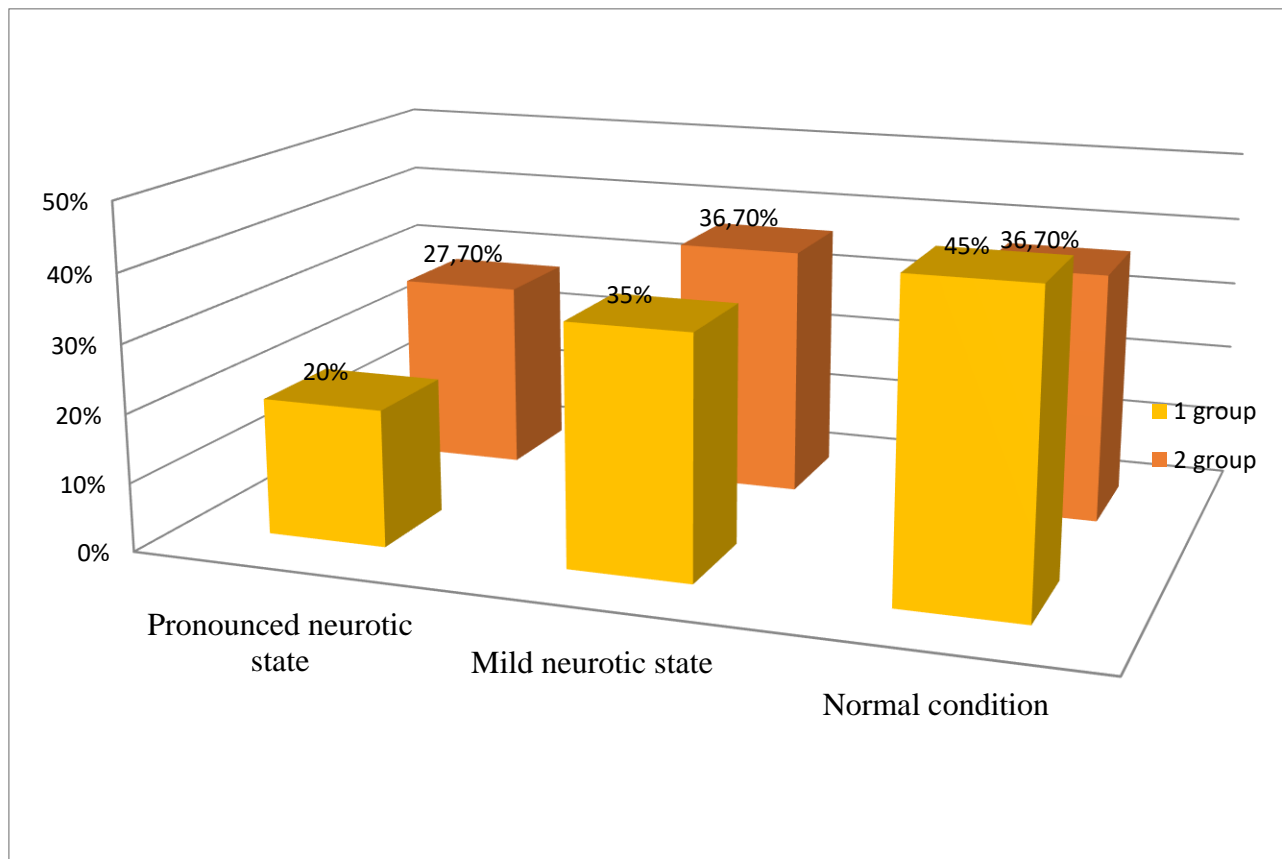
- If NS 24-40 is present, a neurotic state indicates the presence of clinical signs.

Methods of psychocorrection include psychological dialogue, cognitive-behavioral psychotherapy. Interviews were conducted for an average of 45-60 minutes per patient, once every 3-4 days and 6-8 times within 30 days, depending on the patient's condition. Two of the interviews were conducted in an inpatient setting and the rest were conducted on an outpatient basis. During the study, Adaptol was used to correct mood changes in all patients in addition to basic therapy. Treatment regimen: 300 mg twice daily for patients with mild to moderate anxiety, 500 mg twice daily for 1 month for patients with severe anxiety.

Research results. When determining the neurotic status of patients according to the Heck scale in group 1, 4 patients had a pronounced neurotic state, 7 patients had a weak neurotic state, 9 patients had a normal state;

In group 2, 6 patients were diagnosed with severe neurotic status, 8 patients with mild neurotic status, and 8 patients with normal neurological status, and these patients confirmed the presence of neurotic disorders. The results obtained in Figure 1 are schematically presented:

Figure -1



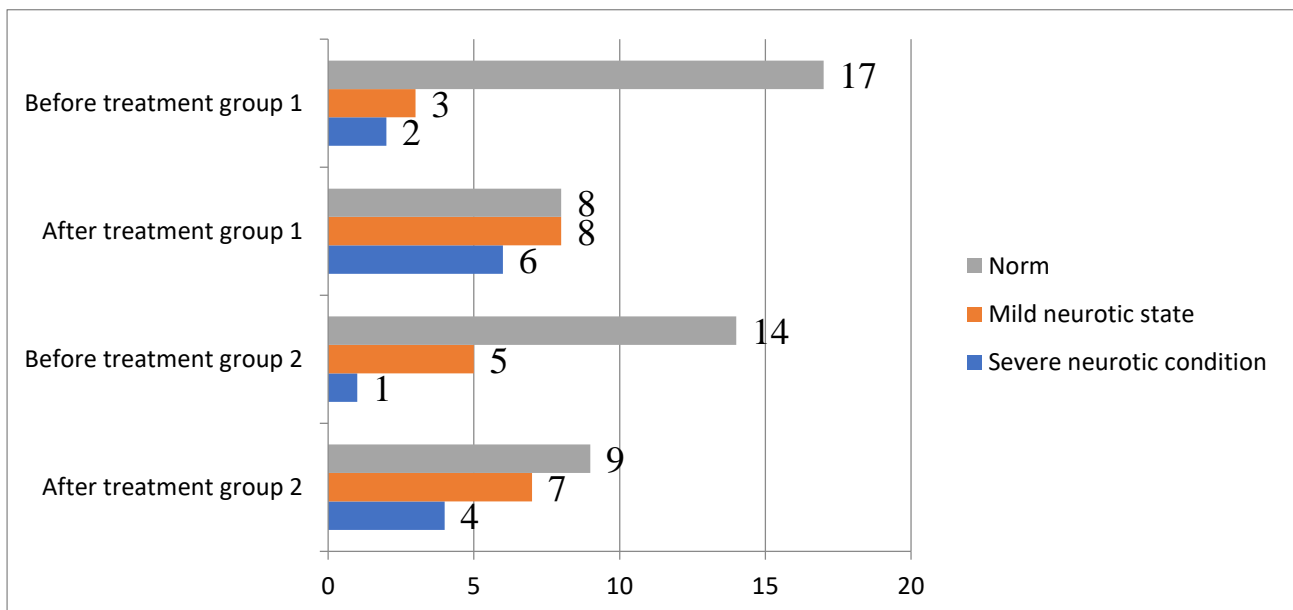
* - P<0,05

Anxiety levels were re-examined on an outpatient basis after patients completed a full course of treatment for 1 month.

When analyzing the results after treatment, there were 14 patients in the 1st group (9 patients before treatment, 5 patients with a mild neurotic status, 1 patient (1%) with a severe neurotic status and the 2nd

group with a normal condition). In 14 patients (9 patients before treatment, 5 patients with mild neurotic status, 1 patient (1%) with severe neurotic status, i.e. after effective psychopharmacotherapy, the number of patients with neurotic disorders significantly decreased in group 2. (Figure 2)

Figure 2.



* - P<0,05

Analysis to determine neurotic status

Conclusion. In conclusion, it should be noted that the use of rational-emotional psychotherapy in combination with antidepressants in patients with neurotic disorders can reduce morbidity and restore working capacity, further accelerate recovery from the disease, and increase adherence to basic treatment.

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УДК: 6167.618.2

ВЛИЯНИЕ ПАТОГЕНЕТИЧЕСКОЙ ТЕРАПИИ ЦЕРВИКАЛЬНОЙ ИНТРАЭПИТЕЛИАЛЬНОЙ НЕОПЛАЗИИ НА КЛИНИЧЕСКОЕ СОСТОЯНИЕ ШЕЙКИ МАТКИ И ВЛАГАЛИЩА

Камилова И.А., Ахмедова Г.А., Парвизи Н.И., Кобилжонова М.У.

BACHADON BO'YNI INTRAEPITELIAL NEOPLAZIYASINING PATOGENETIK TERAPIYASINING BACHADON BO'YNI VA QINNING KLINIK HOLATIGA TA'SIRI.

Kamilova I.A., Akhmedova G.A., Parvizi N.I., Qobiljonova M.U.

INFLUENCE OF PATHOGENETIC THERAPY OF CERVICAL INTRAEPITHELIAL NEOPLASIA ON THE CLINICAL STATE OF THE CERVIX AND VAGINA

Kamilova I.A., Akhmedova G.A., Parvizi N.I., Kobilzhonova M.U.

Ташкентская медицинская академия

Maqsad: bachadon bo'yni intraepitelial neoplaziyasining patogenetik terapiyasining bachadon bo'yni va vagina-ning klinik holatiga ta'sirini baholash. **Material va usullar:** klinik tekshiruv asosida bemorlarning ikki guruhi tanlandi. Asosiy guruh CIN bilan kasallangan 226 bemordan iborat edi. Nazorat guruhiga profilaktika ko'rigidan o'tish uchun ayollar poliklinikalariga murojaat qilgan yoshi, ijtimoiy va oilaviy ahvoli taqqoslanadigan 165 nafar bemor kiritildi. **Natijalar:** a'lo deb baholangan davolash natijalari asosiy guruhda 41 (61,2%) bemorda qo'lga kiritildi, bu nazorat guruhiga qaraganda 2,2 baravar ko'pdir, bunday natijaga 18 ta bemorda erishilgan. (27,7%) ayollar. Shu