



MINISTRY OF HEALTH OF THE
REPUBLIC OF UZBEKISTAN



MINISTRY OF HIGHER
EDUCATION, SCIENCE AND
INNOVATIONS OF THE REPUBLIC
OF UZBEKISTAN



ANDIJAN STATE
MEDICAL INSTITUTE

www.adti.uz

October 6, 2023

International scientific and practical conference on

“Problems of Modern Surgery”

MATERIALS



Andijan

"PROBLEMS OF MODERN SURGERY"



SCIENTIFIC EDITOR

M.M.MADAZIMOV

RESPONSIBLE EDITORS

**K.Z.SALAKHIDDINOV
J.A.JOHONGIROV
G.N.MAMATKHUJAEVA**

**MEMBERS OF THE
EDITORIAL BOARD**

**X.T.MUSASHAYXOV
G.M.XODJIMATOV
SH.Y.BUSTANOV**

**COMPUTER GRAPHICS
EDITORS**

**F.A.ABDULXODIMOV
Y.S.GROMOV**

ANDIJAN STATE MEDICAL INSTITUTE

indications for surgical intervention were set. After 24 hours from the moment of admission, the patient was taken for diagnostic laparoscopy. The first trocar is inserted supraumbilically for 5mm and 10mm manipulation through both iliac regions. At the diagnostic stage of laparoscopy: in the abdominal cavity, about 200 ml of serous exudate. During revision: the large intestine is moderately swollen throughout its entire length, increased in diameter along its total length up to 8-10 cm, there is blood and gases in the lumen. The jejunum is collapsed, the terminal ileum is enlarged, and contains blood. Upon further revision, at 1.0 m from the ileocecal angle, an ileal diverticulum with a size of 4x2.5 cm with a broad base was found, blood is distal to the diverticulum throughout the lumen of the small intestine, blood is proximal to the diverticulum in the small intestine for 50 cm, blood is above the small intestine sleeping state. It was decided to perform a laparoscopically assisted diverticulectomy. The trocar wound was enlarged to 3.5 cm, and the diverticulum was removed from the damage. The D.M. was opened: in the lumen, there was dark blood with clots, on the apex from the side of the mucous membrane, the lumen was ulcerated, and a venous vessel up to 2-3 mm in diameter was found. Extraperitoneal wedge-shaped excision of Meckel's diverticulum was performed.

Postoperative diagnosis: Meckel's diverticulum is complicated by diverticulitis and intestinal bleeding. Severe post-hemorrhagic anemia. Multiple organ failure. The patient was discharged home on the 6th day after the operation in satisfactory condition. At discharge: HB 82g / l, erythrocytes - 2.95×10^{12} / l. Conclusion. In the presence of ongoing bleeding from the gastrointestinal tract, when no sources of bleeding have been identified with FGDS and FCS, the diagnosis "Meckel's diverticulum of the ileum, complicated by bleeding" comes to the fore. Diagnosis of Meckel's diverticulum is rarely diagnosed in the absence of complications. One of the popular methods for diagnosing Meckel's diverticulitis is diagnostic laparoscopy. This clinical case proves once again that in adults, the diagnosis of Meckel's diverticulum should be considered when bleeding from the gastrointestinal tract occurs.

EPITHELIZATION OF WOUND SURFACES IN DIABETIC FOOT SYNDROME

Kasimov U.K., Yoruklov A.Sh.
Tashkent medical academy

Relevance. In Europe, it is estimated that about 1.5–2 million people live with various types of wounds, with chronic ones being the dominant type. In the United States, chronic wounds resulting from acute wounds simultaneously affect approximately 6.5 million people.

The problem of treating chronic wounds remains relevant, especially difficulties arise in the treatment of wounds against the background of diabetes mellitus. Treatment of wounds must be observed in strict accordance with the phases of the wound process.

Target. Evaluation of the wound-healing activity of the original combination drug "Timogel" in comparison with the drug "Levomekol" to identify the possibility of recommending timogel for wide clinical use.

Material and research methods. The object of the study was an original wound-healing gel-based drug "Tymogel", which contains the antibacterial drug metronidazole, the antiseptic Chlorhexidine and the immunomodulatory thyoptin.

The drug "Levomekol" (Nizhpharm, Russia), which contains chloramphenicol and methyluracil, was used as a comparison drug.

The study is based on the results of observation of 60 patients who were treated at the Republican Center for Purulent Surgery and Surgical Complications of the multidisciplinary clinics of the Tashkent Medical Academy of the Republic of Uzbekistan. The patients were divided into 2 groups: the main group, in which the drug "Timogel" was used - 30 patients, and

the control group, in which the comparison drug "Levomekol" was used - 30 patients. The groups were comparable according to clinical, anamnestic and laboratory data.

The criteria for inclusion of patients in the study were the following diagnoses: a) surgical infections of soft tissues of various locations that developed against the background of diabetes (carbuncle, cellulitis, purulent-necrotic lesions of the feet, trophic ulcers). Patients were informed and included in the study after their written consent to participate in this clinical study.

Drug prescription scheme. Patients of the main group (30 people) were prescribed Timogel in the form of applications to the wound 1-2 times a day against the background of basic therapy (antihyperglycemic drugs, as well as antibacterial drugs and anticoagulants) during their hospital stay. The patients who made up the comparison group (30 people) received Levomekol in a similar way, according to the instructions, against the background of similar basic therapy. The volume of Levomekol and Timogel drugs used was selected individually depending on the area of the wound.

A complete blood count was performed once a day before treatment; 1 analysis on days 3 and 7 during treatment; measurement of wound area dynamics on days 1 and 7; cytological examination using the fingerprint method: 1 analysis on days 1, 7 and bacterial culture from the wound: 1 analysis on days 1 and 3.

Cytological studies were carried out using the fingerprint method according to the M.P. method. Pokrovskaya and M. S. Makarov.

Research results. One of the main criteria for the course of a wound process is its local appearance, which especially needs to be taken into account in the presence of diabetes mellitus. The use of the drug "Timogel" made it possible to clean the wound from necrotic tissue much earlier, with a reduction in the area of the wounds by 70%, in comparison with the ointment "Levomekol", where this figure corresponded to 40% on the 7th day of use. Timogel more effectively cleanses the wound from purulent-necrotic masses by 78% than the drug "Levomekol" (45%).

Determination of the number of leukocytes, which characterizes the activity of the inflammatory process on the surface of the wound, was carried out by imprinting on a glass slide with further staining with hemotoxylineosin. The result of counting the number of leukocytes in the field of view showed that their number decreases in the group of patients "Timogel" by 41.3%, in the group "Levomekol" - by 25%. When studying the indicators of intoxication and the course of the inflammatory process, it was revealed that when using the drug "Timogel" there was a significant decrease in ESR in comparison with the drug "Levomekol". Thus, in both groups on the day of admission this indicator was almost the same; after 3 days of treatment it decreased by 3 times, or by 67.1% in the Timogel group, and in the Levomekol group - by 1.3 times, or by 25.2%. This fact indicates that the inflammatory process and intoxication decrease faster when using Timogel. A similar picture is observed in the dynamics of leukocytes. In patients in the Timogel group, the number of leukocytes decreased by 1.42 times or by 29.7%, and in the group of patients receiving Levomekol by 1.24 times or by 19.7%. Atypical development of surgical infection in diabetes is not always accompanied by high levels of leukocytosis, which indicates suppression of the body's reactivity, despite the severity of local manifestations and the presence of intoxication. However, the use of the drug "Timogel" made it possible to stop the purulent-inflammatory process with the normalization of the leukocytosis rate, which manifested itself in a less pronounced form when using the ointment "Levomekol". that the inflammatory process and intoxication decrease faster when using Timogel. A similar picture is observed in the dynamics of leukocytes. In patients in the Timogel group, the number of leukocytes decreased by 1.42 times or by 29.7%, and in the group of patients receiving Levomekol by 1.24 times or by 19.7%. Atypical development of surgical infection in diabetes is not always accompanied by high levels of leukocytosis, which indicates suppression of the body's reactivity, despite the severity of local manifestations and the presence of intoxication.

However, the use of the drug "Timogel" made it possible to stop the purulent-inflammatory process with the normalization of the leukocytosis rate, which manifested itself in a less pronounced form when using the ointment "Levomekol". that the inflammatory process and intoxication decrease faster when using Timogel. A similar picture is observed in the dynamics of leukocytes. In patients in the Timogel group, the number of leukocytes decreased by 1.42 times or by 29.7%, and in the group of patients receiving Levomekol by 1.24 times or by 19.7%. Atypical development of surgical infection in diabetes is not always accompanied by high levels of leukocytosis, which indicates suppression of the body's reactivity, despite the severity of local manifestations and the presence of intoxication. However, the use of the drug "Timogel" made it possible to stop the purulent-inflammatory process with the normalization of the leukocytosis rate, which manifested itself in a less pronounced form when using the ointment "Levomekol". In patients in the Timogel group, the number of leukocytes decreased by 1.42 times or by 29.7%, and in the group of patients receiving Levomekol by 1.24 times or by 19.7%. Atypical development of surgical infection in diabetes is not always accompanied by high levels of leukocytosis, which indicates suppression of the body's reactivity, despite the severity of local manifestations and the presence of intoxication. However, the use of the drug "Timogel" made it possible to stop the purulent-inflammatory process with the normalization of the leukocytosis rate, which manifested itself in a less pronounced form when using the ointment "Levomekol". In patients in the Timogel group, the number of leukocytes decreased by 1.42 times or by 29.7%, and in the group of patients receiving Levomekol by 1.24 times or by 19.7%. Atypical development of surgical infection in diabetes is not always accompanied by high levels of leukocytosis, which indicates suppression of the body's reactivity, despite the severity of local manifestations and the presence of intoxication. However, the use of the drug "Timogel" made it possible to stop the purulent-inflammatory process with the normalization of the leukocytosis rate, which manifested itself in a less pronounced form when using the ointment "Levomekol". Atypical development of surgical infection in diabetes is not always accompanied by high levels of leukocytosis, which indicates suppression of the body's reactivity, despite the severity of local manifestations and the presence of intoxication. However, the use of the drug "Timogel" made it possible to stop the purulent-inflammatory process with the normalization of the leukocytosis rate, which manifested itself in a less pronounced form when using the ointment "Levomekol". Atypical development of surgical infection in diabetes is not always accompanied by high levels of leukocytosis, which indicates suppression of the body's reactivity, despite the severity of local manifestations and the presence of intoxication. However, the use of the drug "Timogel" made it possible to stop the purulent-inflammatory process with the normalization of the leukocytosis rate, which manifested itself in a less pronounced form when using the ointment "Levomekol".

When analyzing the microbial flora from the wound in the groups of patients "Timogel" and "Levomekol", microorganisms were identified with a slight difference in percentage: staphylococcus 84 and 85%; Pseudomonas aeruginosa 9 and 7%; streptococcus - 7 and 8%, respectively. During the treatment process, after 3 days in the Timogel group, microorganisms were not sown in the wounds, while in the Levomekol group, Pseudomonas aeruginosa 3% and staphylococcus were detected in the wounds.

It was shown that when treated with Timogel, 29 patients had good tolerability - 97.7%; 1 patient had slight redness that did not require discontinuation of the drug. Patients in the Levomekol group (22 people) tolerated the drug well - 73.3% of patients. In 8 patients, a local allergic reaction occurred that did not require discontinuation of the drug. During the study, there were no reasons for stopping the use of Timotel related to the occurrence of side effects or due to the lack of clinical effect.

Conclusion. The data obtained indicate that the drug "Timogel" accelerates the course of the wound process, promotes wound cleansing, the appearance of granulation and epithelization

of the wound surface, is highly effective and can be recommended in a set of measures for the treatment of chronic wounds against the background of diabetes mellitus.

ROLE OF PHOTODYNAMIC THERAPY AND TOPICAL ANTIBIOTICS IN THE TREATMENT OF CHRONIC SUPPURATIVE OTITIS MEDIA

Khamdamov B.Z., Nurov U. I. Uktamov I. G.
Bukhara State Medical Institute

Introduction. Chronic suppurative otitis media (CSOM) chronic inflammation of the Eustachian tube of the middle ear, the mastoid cavity and mastoid cells. It is the most common infectious ear disease in children, as well as in young people. CSOM is characterized by chronic, periodic or persistent otorrhea for at least 2 weeks through perforation in the eardrum.

Antibacterial agents are the most commonly used treatment for CSOM. They can be used locally (in the form of drops, ointments on the affected area) or systemically. It is preferable to use local antibacterial drugs or photodynamic therapy in uncomplicated CSOM. The advantage of these is related to the absence of gastrointestinal disturbances and other systemic negative effects, high concentration in the center of infection, ease of use and high efficiency.

At present, against the background of the emergence of a large number of different synthetic antibiotics, the microbial flora of CSOM has undergone clear changes. The emergence of a large number of polyresistant strains and changes in the bacteriological profile of patients with CSOM make clinicians search for drugs that are effective in the treatment of this disease. Antibacterial agents are the most commonly used treatment for CSOM. They can be used locally (in the form of drops, ointments on the affected area) or systemically.

Purpose of the study: assessment of the effects of local antibiotics and photodynamic therapy for people with CSOM

Material and methods. In the period from January 2021 to December 2022, a retrospective of the medical history of 200 patients of the otorhinolaryngology clinic with a diagnosis of acute otitis will be conducted. In patients aged from 18 to 73 years (average life expectancy of 45.8 ± 6.4 years), the duration of the disease ranged from 2 to 34 years (average life expectancy of 26.7 ± 2.4 years).

Patients with diabetes mellitus who are allergic to topical antibiotics or photosensitizers, as well as patients with complaints of severe itching in the ears with otomycosis in their Anamnesis, symptoms of otomycosis during otoscopy, that is, black spots on the bone part of the external auditory canal, skin of the external auditory canal or white plaque, are not attracted to the study.

After hospitalization, all patients underwent standard anamnesis collection, endoscopic examination of ENT organs, tonal threshold audiometry, if local complications were suspected (granulation or cholesteatoma development), computed tomography of the temporal bones was performed, microbiological examination was performed by taking swabs from the ear before starting antibiotic therapy.

Patients with CSOM have undergone clinical and biochemical blood tests to determine the activity of the inflammatory process and to determine the accompanying conditions that affect the course of CSOM.

The criteria of treatment efficiency were the normalization of the general condition of the patients, the cessation of pathological discharge from the ear, and the normalization of the otoscopic picture. Treatment is usually started 2-4 days after the first symptoms of chronic otitis media appear.

Results. Analyzing the medical history of the patients revealed the main complaints of patients diagnosed with "Aggravation of CSOM", their leaders were otorrhea, ear pain,

"PROBLEMS OF MODERN SURGERY"



ХИРУРГИЧЕСКАЯ ТАКТИКА ПРИ СОЧЕТАННЫХ ПОВРЕЖДЕНИЯХ КОСТНО-МАГИСТРАЛЬНЫХ АРТЕРИЯХ КОНЕЧНОСТЕЙ	441
Юлдошев А.А., Хожакбаров А.Х., Саттаров А.А., Иброхимов М.М.	
АНАЛИЗ ОШИБОК ПРИ ЗАБОЛЕВАНИЯХ МОЛОЧНОЙ ЖЕЛЕЗЫ	442
Якуббекова С.С., Мамарасулова Д.З., Урманбаева Д.А.	
КОМПЛЕКСНОЕ УЛЬТРАЗВУКОВОЕ ИССЛЕДОВАНИЕ ДЛЯ ДИФФЕРЕНЦИАЛЬНОЙ ДИАГНОСТИКИ УЗЛОВЫХ ОБРАЗОВАНИЙ ЩИТОВИДНОЙ ЖЕЛЕЗЫ	443
Якуббекова С.С., Мамарасулова Д.З., Урманбаева Д.А.	
ОСЛОЖНЕНИЯ РЕКОНСТРУКТИВНО-ПЛАСТИЧЕСКИХ ОПЕРАЦИЙ ПРИ ЛЕЧЕНИИ ФОНОВЫХ ЗАБОЛЕВАНИЙ, ПРЕДРАКА И РАННИХ ФОРМ РАКА ВУЛЬВЫ	444
Якуббекова С.С., Мамарасулова Д.З., Урманбаева Д.А.	
ТАКТИКА ХИРУРГИЧЕСКОГО ЛЕЧЕНИЯ БОЛЬНЫХ С ГЛУБОКИМИ ОЖОГАМИ	445
Якубжон Эркинович ХУРСАНОВ, Абдурахим Абдурахманович АВАЗОВ	
DIAGNOSIS AND TREATMENT OF GALL BLADDER POLYPS	446
Akhmedov F.Kh., Jumaeva M.M., Hasanova D.A.	
POSSIBILITIES OF LAPAROSCOPIC-ASSISTED SURGERY FOR MEKKEL DIVERTICULITIS COMPLICATED WITH BLEEDING	447
Iskhakov N.B., Iskhakov B.R., Alizhanov A.A., Bazarbayev U.R.	
EPITHELIZATION OF WOUND SURFACES IN DIABETIC FOOT SYNDROME	448
Kasimov U.K., Yoruklov A.Sh.	
ROLE OF PHOTODYNAMIC THERAPY AND TOPICAL ANTIBIOTICS IN THE TREATMENT OF CHRONIC SUPPURATIVE OTITIS MEDIA	450
Khamdamov B.Z., Nurov U. I. Uktamov I. G.	
ENDOVIDEOSURGICAL METHODS FOR THORACOABDOMINAL INJURIES	452
Khodjimatov GM, Yahyoev SM, Sidikov MP	
ANALYSIS OF THE RESULTS OF SURGICAL TREATMENT OF PATIENTS WITH THORACOABDOMINAL INJURIES	453
Professor Khodjimatov GM, Yahyoev SM, Sidikov MP	