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ТИББИЁТДАГИ ИННОВАЦИЯЛАР: ЁШ ОЛИМЛАР НАЗАРИ

ЎҚУВ-УСЛУБИЙ АНЖУМАН
МАТЕРИАЛЛАРИНИНГ ТЎПЛАМИ

"INNOVATIONS IN MEDICINE: VIEW OF YOUNG SIENTISTS"

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large defects and defects of primary type. Secondary hernias following fundoplication do not need a redo fundoplication, but require an adequate crural repair with mesh. Laparoscopic repair of these uncommon hernias is safe, effective and provides all of the benefits of minimally invasive surgery.

RISK OF OCCURRENCE PERFORATION DUODENAL ULCER WITH MULTIFATORIAL CAUSES

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Background: The lessening prevalence of *Helicobacter pylori* and make better of duodenal ulcer treatment, such as proton pump inhibitors or eradication therapies for *H. pylori* resulted in reduction of the rate of not complicated peptic ulcer disease in recent 10 years. On the other hand, a lot of studies have shown questionable results showing constant incidence of complicated duodenum ulcer disease, which may be due to multifactorial risk factors including the growth usage of non-steroidal anti-inflammatory drugs or acetylsalicylic acid.

Materials and methods: We examined 60 patients who were diagnosed with duodenal ulcer from January 2017 through August 2017 at surgery department of 1st Republican clinical hospital which base of the department of faculty surgery of Tashkent medical academy.

Results: All identified a total of 60 benign complicated duodenal ulcer patients. Men were superiority than women, 48 and 12 in turn. The average age was 53 years.

Approximately one third of patients were identified with postoperative complication. Another interesting view, among all patients only 11 patients used non-steroidal anti-inflammatory drugs always. It means, that duodenal ulcer which caused by *Helicobacter pylori* infection was more higher. Unfortunately, we could not investigate test to *Helicobacter pylori* infection. However, most main causes of duodenal ulcer especially when it complicated with perforation does not matter. Multivariate analysis showed that older age and other pathological process and sicknesses were risk factors for non-steroidal anti-inflammatory drugs perforation duodenal ulcer.

Conclusion: Elderly patients with another added disease are followed with non-steroidal anti-inflammatory drugs is considered perforation of duodenal ulcer. But, do not think about *Helicobacter pylori* is important etiology of perforation duodenal ulcer.

Key words: *Helicobacter pylori*; Non-steroidal anti-inflammatory drugs; perforation; duodenal ulcer.

THE MEANING OF THE LEUCOCYTE FORMULA PARAMETERS IN THE DIAGNOSTICS OF ACUTE APPENDICITIS DURING PREGNANCY

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Laboratory diagnosis of acute appendicitis in pregnant women is accompanied by a number of difficulties associated with physiological changes in the body of a

woman during gestation. Clinical diagnosis of acute appendicitis has traditionally come first among other diagnostic methods, but the informative value of many appendicular symptoms during pregnancy is low. The most common laboratory method remains a clinical blood test. There are reports that the level of leukocytes has no practical significance in the diagnosis of acute appendicitis and the more so does not allow to assume its form. Meanwhile, the possibility of a clinical blood test for acute appendicitis in pregnant women is not enough to reveal.

Purpose of the study. Determination of the diagnostic value of leukocytes and neutrophils level in acute appendicitis during pregnancy.

Material and methods. There were examined 79 pregnant women with suspicion of acute appendicitis. Individual parameters of the leukocyte formula of every woman were studied.

Results of the study. The study revealed significant fluctuations in the number of leukocytes in pregnant women, but their increase in destructive forms is obvious. Low leukocytosis does not disprove the diagnosis of acute appendicitis, and the presence of only an increased number of common leukocytes, without taking into account the shift of the leukocyte formula, does not allow to consider them a diagnostic criterion for acute appendicitis in pregnant women. Usually elevated leukocytosis testifies in favor of appendicitis and, in general, displays the depth of the inflammatory process. But taking into account the fact that in pregnant women, leukocytosis is a physiological phenomenon, therefore, it is not possible to consider the nature of the inflammatory process, the destruction in the appendix and talk about the morphological form of appendicitis with such changes in leukocytosis. Considering the presence of physiologically elevated white blood cells count in peripheral blood during pregnancy, leukocytosis was assumed to be $10.0 \times 10^9 / L$ and higher.

An important criterion, in our opinion, is the change in neutrophil counts in peripheral blood. In women with confirmed diagnosis of acute appendicitis, the content of stab and granulocyte granulocytes increased, which indicated the severity of the intoxication process due to the increase in inflammatory changes. When comparing the catarrhal and destructive forms of the disease, there was a significant increase in these parameters ($p < 0.05$), which indicated the presence and depth of the inflammatory process in the appendix and allowed to clearly distinguish the serious stage of the inflammatory process from the pronounced destructive one. At the same time, the number of lymphocytes showed the opposite dynamics.

Conclusions. Thus, the leukogram indexes have a high informative value in assessing the severity of the inflammatory process and destructive changes in acute appendicitis in pregnant women. However, the presence of leukocytosis as a diagnostic criterion for acute appendicitis in pregnant women should be considered only in conjunction with neutrophilia.

ASSESSMENT OF THE DIAGNOSTIC SCORE SCALES IN ACUTE APPENDICITIS

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Acute appendicitis is an abdominal surgical pathology requiring immediate diagnosis and performing surgical intervention. In the total number of diseases re-