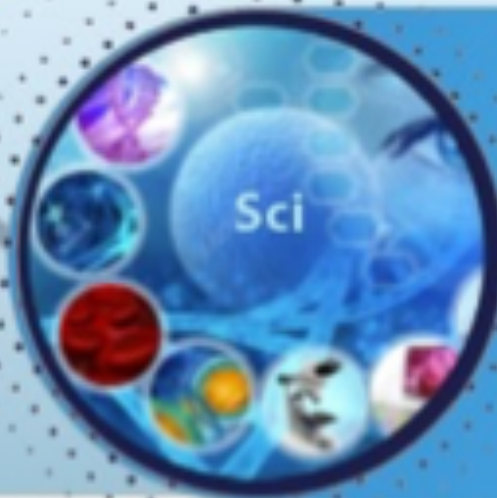




TASHKENT MEDICAL ACADEMY



Journal of Educational and Scientific Medicine



**Special Issue 5
Volume 2 | 2024**



OAK.UZ
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Science Education Commission of the Cabinet
Ministry of the Republic of Uzbekistan

ISSN: 2181-3175



Monitors:

giz Deutsche Zusammenarbeit für Internationalen Zusammenarbeit (GIZ) GmbH

ISSN: 2181-3175

Special issue of

«**JOURNAL OF EDUCATION AND
SCIENTIFIC MEDICINE**»

Volume 2, Issue 5

ISSN: 2181-3175

«**YUMSHOQ TO'MALAR XIRURGIK INFEKTSIYASI DOLZARB MUAMMOLARI**»

**Ilmiy-amaliy konferentsiyaning tezislari
to'plami**

Special Issue
Volume 2

Toshkent, 28 oktyabr, 2024

OAK.UZ
Google Scholar

Source: <https://www.oak.uz>
Ministry of Health of the Republic of Uzbekistan



Development of Methods for Predicting Peritonitis in Patients with Acute Adhesive Intestinal Obstruction

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BACKGROUND

It is known that urgent surgical intervention on the abdominal cavity organs in 20% of cases is caused by acute small intestinal adhesive obstruction, which is currently the most urgent problem. This is because it is the most common complication after operations on the abdominal cavity and pelvic organs. This figure ranges from 20-68%. The study aimed to develop a method for assessing the course of acute intesti-

nal obstruction and to determine its significance in evaluating the severity and predicting the course of the early postoperative period and the development of complications.

MATERIAL AND METHODS

The work is based on studies of patients with acute intestinal obstruction who were in the surgical department of the Khorezm regional branch of the Republican Center for Emergency Medical Care from 2017 to 2023. Group 1

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(n=29): patients with acute intestinal obstruction who had no intraoperative manifestations of acute peritonitis. Group 2 (n=22): patients with acute intestinal obstruction who were intraoperatively diagnosed with acute peritonitis.

RESULTS

In acute intestinal obstruction complicated by peritonitis, lipid peroxidation and phospholipase activity were increased to a greater extent than in the uncomplicated form of ileus. The level of diene conjugates in the second group increased relative to the norm during the entire follow-up period by 57.4, 110.4, 89.6 and 60.2% ($p < 0.05$), respectively. 28.5, 30.8 and 26.4% ($p < 0.05$), respectively. Analysis of studies of lipid metabolism in patients with acute intestinal obstruction shows that, regardless of the form of ileus, a significant intensification of membrane lipid peroxidation and activation of phospholi-

pase A2 occurs at the earliest stages of follow-up before surgery. Moreover, in patients whose acute intestinal obstruction was complicated by peritonitis, these pathological processes were more pronounced. This significantly aggravated the course of the early postoperative period, including an increase in the severity of the endogenous intoxication syndrome.

CONCLUSION

The developed method for predicting the course of the early postoperative period and the development of complications in patients with acute intestinal obstruction has a high degree of informative value both in uncomplicated (sensitivity 92.7%, specificity 83.2%) and complicated by peritonitis (sensitivity 96.2%, specificity 87.9%) conditions.