



Journal of Academic Research and Trends in Educational Sciences

Journal home page:
<http://ijournal.uz/index.php/jartes>



Journal of Academic Research and
Trends in Educational Sciences
(JARTES)

VOL. 2, ISSUE 1

ISSN 2181-2675

www.ijournal.uz

EVALUATION OF THE EFFICACY OF SCLEROTHERAPY IN VENOUS PATHOLOGY

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KEYWORDS

high radio frequency, pulse,
varicose veins, sclerotherapy,
diabetes mellitus, flebectomy,
ethoxisclerol

ABSTRACT

To improve the quality of life of patients with dilated veins, suspected varicose veins and patients with comorbidities who do not have indications for a high level of invasiveness, to study the degree of change in working capacity and provide information about it.

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DOI: 10.5281/zenodo.7710673

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VENA QON TOMIRLAR PATOLOGIYASIDA SKLEROTERAPIYANING SAMARADORLIGINI BAHOLASH

KALIT SO'ZLAR:

yuqori radio-chastota,
impuls, kengaygan vena,
skleroterapiya, qandli
diabet, semizlik,
flebektomiya, etoksisiklerol

ANNOTATSIYA

Vena qon tomirlari kengaygan, varikoz kasalligiga shubha bo'lgan va yondosh kasalliklari tufayli bemorlarda yuqori darajadagi invazivlik amaliyotini olib borishga ko'rsatmalar bo'limganda hozirgi kunda invazivlik xususiyati juda kam bo'lgan yangi texnologik amaliyotni qo'llash orqali bemorlarning hayot sifati va mehnat qilish qobiliyati qay darajada o'zgarganligini o'rganish va shu haqida ma'lumot berish.

Kirish. Bugungi kunga kelib, skleroterapiya eng mashhur kaminvaziv jarrohlik usulibo'lgan usullardan biri bo'lib, bu nafaqat varikoz tomirlarini yo'q qilish, balki varikoz tomirlarida buzilgan gemodinamikani tuzatishga imkon beradi (patologik qon oqimini yo'q qilish - reflyukslar). Skleroterapiyaning mashhurligi uning arzonligi, texnik soddaligi va mavjudligi, deyarli mukammal estetik va funksional natijalari bilan bog'liq. Texnikaning asosiy kamchiliklari radikalizmning etarli emasligi - jarrohlik yo'li bilan olib tashlanmagan tomir rekanalizatsiya natijasida yana qon aylanishiga qo'shilishi mumkin yoki kasallikning rivojlanishi tufayli oldingi tomirlarning o'rnida yangi varikoz tomirlari paydo bo'lishi mumkin. Shu bilan birga, ko'pikli preparatlardan foydalangan holda skleroterapiyaning zamonaviy usullari, ultratovush tekshiruvi, reflyuks joylariga bir nechta maqsadli in'yeksiyalar, jarrohlik va endovazal termal obliteratsiya (EVTO) davolash bilan taqqoslanadigan natijalarga erishishga imkon beradi. Skleroterapiya uchun ko'rsatmalarning to'g'ri ta'rifi va uni yuqori malakali mutaxassis tomonidan amalga oshirilishi varikoz tomirlarini ishonchli yo'q qilishga imkon beradi, ayniqsa varikoz tomirlarining erta bosqichlarida.

Maqsad: Endovazal termal obliteratsiya va sklerozlovchi preparatlarni tomir ichiga in'yeksiya qilish usullari orqali oyoqlardagi varikoz kengaygan venalarni davolash, bunday kam invaziv jarrohlik usullari orqali bemorlarning mehnat qilish qobiliyati va hayot sifatini saqlab qolish.

Material va tekshiruv usullari: Tekshiruvlar Toshkent tibbiyot akademiyasi qon-tomir jarrohligi bo'limida vena qon tomirlari kengaygan va kengayishga shubha tug'ilgan, yondosh kasalliklari mavjud 25 ta bemorda kuzatish va amaliyot bajarish usulida olib borildi. Tekshiruvlar 2021-yil fevral oyidan 2023-yil fevral oyigacha olib borildi. Bunda bemorlarning 0, I, II darajadagi vena qon tomirlarining kengayishi kuzatilgan va kuzatilish xavfi bo'lgan, yondosh kasaliklari mavjud bemorlar, ayniqsa qandli diabet semizlik, yurak va qon-tomir kasalliklariga chalingan bemorlarda ochiq operatsiya usulda va zamonaviy yuqori radio-chastotali generator (YRCHG) orqali bajarilgan amaliyotlar bemorlarning hayot sifatini qay darajada o'zgartirganligi o'rganildi.

Natijalar: Tekshiruvlar yuza vena qon tomirlari 0, I, II, III darajadagi kengayishlar kuzatilgan. Kuzatilish xavfi bo'lgan va yondosh kasalliklari mavjud 25 ta bemorda o'rganildi. Shundan 24% (16/25) bemorda 0 darajadagi kengayish, 20% (5/25) bemorda I darajadagi kengayish, 16% (4/25) bemorda II darajadagi kengayish, 8% (2/25) bemorda III darajadagi yuza joylashgan vena qon tomirlarining kengayishi aniqlandi. Jami o'rganilgan 25 ta bemordan 32% (8/25) bemorda yondosh kasallik aniqlandi. Shundan 62,5% [5/8] bemor semizlik va arterial gipertenziya bilan, 25% (2/8) bemor qandli diabet bilan, 12,5% (1/8) bemor yurak va qon-tomir kasalligi bilan, jumladan o'tkir bosh miya qon aylanish yetishmovchiligin o'tkazgan (2010-yil) va vazni og'ir darajada ekanligi aniqlandi va qayd etildi. 0 darajadagi 4 ta bemorga, I darajadagi 3 ta bemorda, II darajadagi 2 ta bemorda, yurak va qon-tomir kasalligiga uchragan 1 ta bemorda, tana vazni og'ir bo'lgan 1 ta bemorda, qandli diabet bilan kasallangan 1 ta bemorda, ya'ni 48% (12/25) bemorlarda zamonaviy kam invaziv yuqori radio-chastotali generator bilan sklerozlash, Ill darajadagi 2 ta bemorda, tana vazni og'ir 3 ta bemorda, Il darajadagi 2 ta bemorda ya'ni 28% (7/25) bemorlarda ochiq usulda flebektomiya amaliyoti bajarildi. Qolgan 24% (6/25) bemorlarda sklerozlovchi skleroterapiya amaliyoti bajarildi. 0 va I darajadagi 58,3% (7/12) bemorlar 3 kun ichida, II darajadagi va yurak va qon-tomir kasalligiga uchragan 25% (3/12) bemorlar 7 kun ichida, tana vazni og'ir va qandli diabetga uchragan 16,7% (2/12) bemorlar 20 kun ichida to'liq hayot sifati va mehnat qilish qobiliyati tiklandi. Ochiq usulda flebektomiya bajarilgan bemorlar esa 15 kun ichida hayot sifati va mehnatga layoqatligi tiklandi. Zamonaviy kam invaziv yuqori radio-chastotali generator bilan bajarilgan sklerozlash amaliyotida asorat 8,3% (1/12) bemorda kuzatildi.

Xulosa: Zamonaviy kam invaziv yuqori radio-chastotali generator bilan bajarilgan sklerozlash amaliyotining sifati kasallikning darajasiga va bemorlarning yondosh kasalliklar bilan qay darajada kasallanganligiga bog'liqligi aniqlandi. Jumladan, bu usul bemorlar uchun kosmetik defekt yo'qligi va mehnat qilish qobiliyati tez tiklanganligi avzal bo'lib, kamchiliklari ba'zi hollarda bu apparatni ish sifatini beruvchi mikroto'lqinli energiya tufayli qandli qandli diabet bilan kasallangan bemorlarda yaralar keltirib chiqarishi mumkinligi aniqlandi. Bundan tashqari hozirgi vaqtida mualliflar tomonidan yaratilgan va takomillashtirilib borilayotgan apparat orqali qon tomirlarda hosil bo'ladigan tebranishlarni impuls larga aylantirib berib qon tomirning qay darajada ishlayotganligini bilish mumkin.

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