

SURUNKALI POLIPOZ RINOSINUSIT BILAN KASALLANGAN BEMORLARDA BURUN BITISHINI BAHOLASH VA DAVOLASH USULLARI

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Annotatsiya. Tadqiqot maqsadiga muvoffiq, 22 yoshdan 65 yoshgacha bo‘lgan polipli rinosinusit bilan og‘rigan 87 nafar bemorning asosiy shikoyati burun bilan nafas olishning buzilishi bo‘lgan leykotrien retseptorlari blokatori - montelukast preparatining burun obstruksiyasining qaytalanishini davolash va oldini olishda samaradorligini o‘rgandik.

Kalit so‘zlar: polipli rinosinusit, bazal membrana, bezlar, kistalar.

Muammoning dolzarbligi. LOR a‘zolarining umumiy kasallanish tuzilishida burun va paranasal sinuslarning shikastlanishi klinikaga tashriflar tahlilida ham, kasalxonada davolanayotgan bemorlar guruhida ham birinchi o‘rinni egalladi, rinosinusit 44-46% ni tashkil qiladi.

Kirish. Bugungi kunga qadar leykotrien retseptorlari blokatorini qo‘llash muddati bo‘yicha tavsiyalar yo‘qligi sababli, biz bronxial astma bilan og‘rigan 4-5 yoshli bolalarda 72 hafta davomida montelukast preparatini qo‘llashning tavsiya etilgan davomiyligini asos qilib oldik. Ushbu davrda, adabiyotga ko‘ra, ushbu preparatni qabul qilishda kiruvchi yoki nojo‘ya ta’sirlar kuzatilmagan.

Tadqiqotning maqsadi. Polipli rinosinusitni davolashga bag‘ishlangan ko‘plab tadqiqotlarga qaramay, bu muammoning eng qiyin va munozarali masalalaridan biri burun to‘siqlarini farmakologik nazorat qilishning eng samarali usullarini izlash bo‘lib qolmoqda, bu esa burun bilan nafas olishning etarligini iloji boricha uzoqroq saqlashga imkon beradi.

Materiallar va tadqiqot usullari. Tadqiqot tekshiruvlari davomida 1-jadvalda keltirilgan turli darajadagi burun obstruksiyasi bilan og‘rigan polipli

rinosinusit bilan og'rigan bemorlarning ahvolini klinik va laboratoriya baholashdan so'ng, davolash leykotrien retseptorlari blokatori - kuniga bir marta 5 mg montelukast preparati bilan buyurildi.

1-jadval

**Bemorlarda burun obstruksiyasini klinik va laborator baholash
polipli rinosinusitda**

Laboratoriya ko'rsatkichlar.	POLIPNING TARQASHI				Norm (o'rtach a qiymat)
	JARAYON				
	I bosqich	II bosqich	III bosqich	IV bosqich	
Nafas olishni sub'ektiv baholash	6-7	4-5	2-3	0-1	10 ball
SOP	606	501	276	0-25	700 ml/s
SS	0,25	0.3	0,54	0,69	0,14 Pa/sm²
pCO2	42.6	47.7	50. 2	50.8	38,5 mmol/l
pO2	32.6	26.4	24. 6	19.4	39,0 mmol/l
LT C4	0,17 4	0,20 3	0,24 6	0,35 6	0,256 nmol/mg
Eozinofill ar	1,2 %	1,2 %	1,3 %	4,7 %	1-6%
Jami	6- 6,9%	20- 23%	43- 49,4%	18 - 20,7%	87 - 100%

Leykotrien retseptorlari blokerini qo'llashning terapevtik ta'siri polipli rinosinusit bilan og'rigan bemorlarda 14 kun, 1 oy, 6 oy va 1 yildan keyin endoskopik va laboratoriya parametrlari yordamida dastlabki ma'lumotlarga nisbatan baholandi.

Ikki hafta davomida davolashning endoskopik monitoringi 87 (70,1%) bemorning 61 tasida polipli to'qimalar hajmining o'rtacha 1/3 qismiga kamayganligini ko'rsatdi.

Bemorlarni o'rganish va nazorat guruhlariga kiritish bemorning hujjatlashtirilgan roziligi va TTA 2-klinik shifoxonasining LOR bo'limiga yuborilishi bilan amalga oshirildi. Barcha bemorlar operatsiyadan oldingi to'liq klinik tekshiruvdan o'tkazildi, shu jumladan burun bo'shlig'ini endoskopik tekshirish, rentgenografiya. kasallikning og'irligi va darajasini baholash uchun paranasal sinuslarning.

Xulosa. Bizning tadqiqotlarimiz shuni ko'rsatdiki, polipli rinosinusit bilan og'rigan bemorlarda burun obstruksiyasini davolashda leykotrien retseptorlari blokatoridan foydalanish III-IV bosqichli burun polipozi bo'lgan 61 (73,8%) bemorlarning 45 tasida jarrohlik yo'li bilan murojaat qilmasdan burun bilan nafas olishning yetarliligini tiklashga imkon berdi.

Burun bo'shlig'idagi polipli to'qimalar hajmining kamayishi burun nafas olish holatiga sezilarli ta'sir ko'rsatdi, bu rinomanometriya, kislota-baz muvozanati va qondagi leykotrien C4 konsentratsiyasi ko'rsatkichlarida aks etadi.

Foydalanilgan adabiyotlar ro'yxati

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