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## ANALYSIS OF THE FREQUENCY OF POSTOPERATIVE COMPLICATIONS WITH APPENDICITIS FOR 2021-2022

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**Abstract:** this article presents the results of a study of the incidence structure of acute appendicitis based on the collection of statistics from the archives of the Surkhandarya branch of the Republican Scientific Center for Emergency Medical Care (SBRSC EMC) and Central hospital of Termez city (CHTC) of Termez.

**Key words:** acute appendicitis, catarrhal appendicitis, phlegmonous appendicitis, gangrenous appendicitis, perforation, peritonitis.

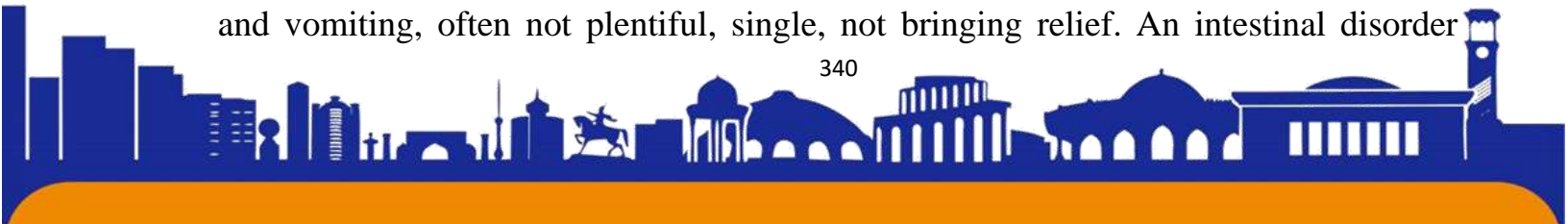
Acute appendicitis (appendicitis acuta) is the most common disease that a surgeon dealing with emergency surgery has to deal with [3, p. 15]. It usually occurs when the appendix is blocked by thick mucus inside the appendix, stool, foreign objects, or (less commonly) tumors.

The peculiarity of acute appendicitis is that it develops rapidly and is characterized by several stages, each of which has different symptoms [3, p. 87]:

- The initial stage, or it is also called catarrhal appendicitis. At this stage, there is a slight thickening and inflammation of the appendix. An appendicitis attack often occurs late at night or in the morning. The patient's condition during this period may be accompanied by pain in the upper abdomen and nausea. At first, the pain occurs around the navel or throughout the abdomen. It has a fuzzy bursting, pulling character. After 3-4 hours, the pain shifts to the right iliac region, where it remains.

- Purulent appendicitis occurs after catarrhal. At this stage, purulent foci form in the walls and cavity of the appendix. During this period, the pain moves from the upper abdomen to the region of the right side, becomes constant, stronger, aggravated when walking, lying on the left side;

- Phlegmonous appendicitis follows purulent. At this stage, there is a significant increase in the appendix, and it is almost completely saturated with pus. There is nausea and vomiting, often not plentiful, single, not bringing relief. An intestinal disorder





occurs: constipation or, on the contrary, loose stools, fever appears. The higher the temperature, the more pronounced the inflammation.

- Gangrenous appendicitis occurs when the previous forms of inflammation of the appendix are treated incorrectly and untimely. Microcirculatory disorders also join, as a result of which the wall of the appendix becomes necrotic. With this form of appendicitis, the pains, sharply expressed at the beginning, subside, the symptoms of peritoneal irritation decrease, against the background of normal temperature, tachycardia occurs up to 100-120 beats per minute.

- Rupture of the appendix. Some time after the onset of the stage of phlegmonous inflammation, the appendix may burst. At this stage, the pain usually decreases, but after a while it resumes with renewed vigor. A ruptured appendix is a very serious situation requiring urgent surgical intervention. Otherwise, the disease ends in death.

Goal of the work:

Analyze the statistics of the disease with acute appendicitis for 2021-2022, conduct a structural analysis of the incidence.

Materials: case histories for 2021-2022 of surgical hospitals SBRSC EMC and CHTC in Termez.

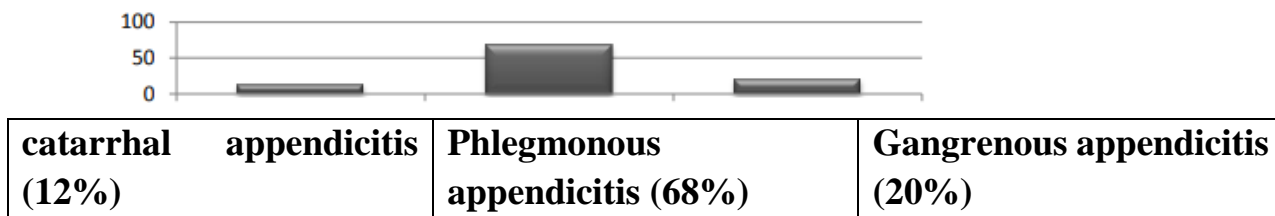
Acute appendicitis in modern surgical practice must be differentiated from various diseases, under which it is "disguised". It is acute appendicitis that is fraught with complications that adversely affect the patient's future life.

Therefore, the main goal of this work was to study the structure of the incidence of acute appendicitis in the city of Termez. For this, case histories for 2021-2022 from the adult surgery departments of SBRSC EMC and CHTC were studied. In 2021, 500 case histories were studied at SBRSC EMC, of which 57 cases accounted for acute appendicitis. Of these, 36 cases (63%) were female patients and 21 cases (37%) were male patients. By age composition, most of the cases occurred in patients of working age.

In 39 cases (68%), the diagnosis was Phlegmonous appendicitis, in 7 cases (12%) - Catarrhal appendicitis. Gangrenous appendicitis was observed in 11 patients (20%), 5 of them with perforation into the abdominal cavity. Complications of appendicitis were observed in 3 patients (5%). All of them were diagnosed with gangrenous appendicitis. Complications were local purulent peritonitis in 1 case, and appendix empyema in 2 cases.



**The frequency of occurrence of various forms of appendicitis according to the SBRSC EMC archive for 2021**



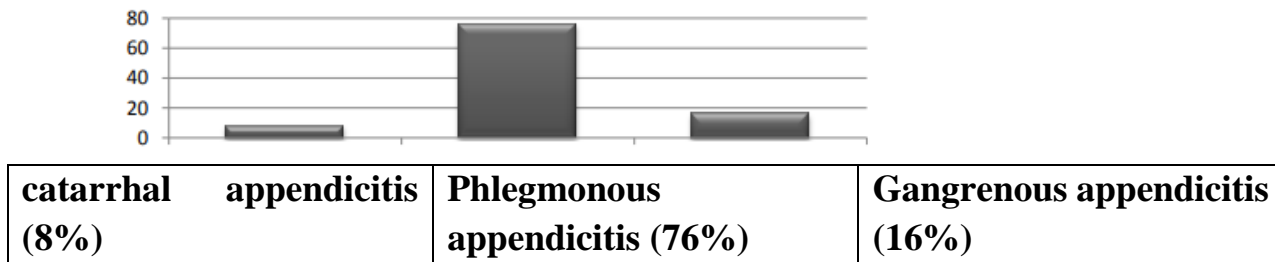
**Picture. 1. The frequency of occurrence of various forms of appendicitis for 2021 (SBRSC EMC archive)**

Most of the patients came from Termez (80%). In addition, there were patients from the regions.

In 2022, 500 case histories were studied at SBRSC EMC, of which 42 cases accounted for acute appendicitis. Of these, 20 cases (47%) were female patients and 22 cases (53%) were male patients. The age composition was also dominated by people of working age.

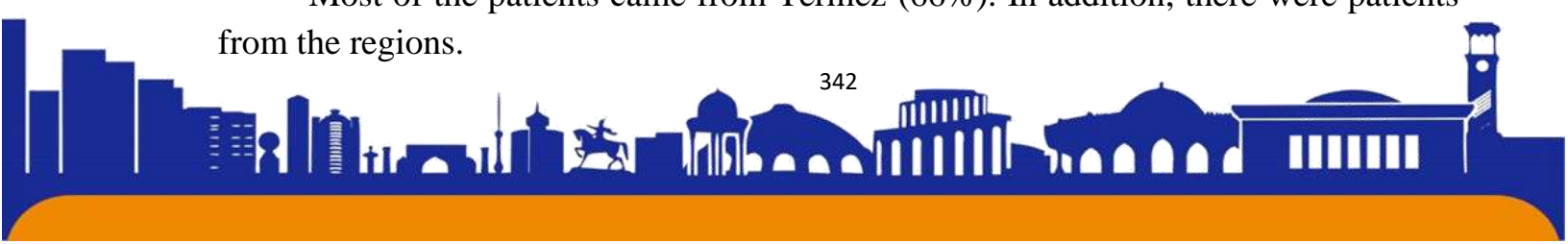
In 32 cases (76%), the diagnosis was Phlegmonous appendicitis, in 3 cases (8%) - Catarrhal appendicitis. Gangrenous appendicitis was observed in 7 patients (16%), including 2 cases with perforation into the abdominal cavity. Complications of appendicitis were observed in 3 patients (7%). All of them were diagnosed with gangrenous appendicitis. Complications were local serous peritonitis in all 3 cases.

**The frequency of occurrence of various forms of appendicitis according to the SBRSC EMC archive for 2022**



**Picture. 2. The frequency of occurrence of various forms of appendicitis for 2022 (SBRSC EMC archive)**

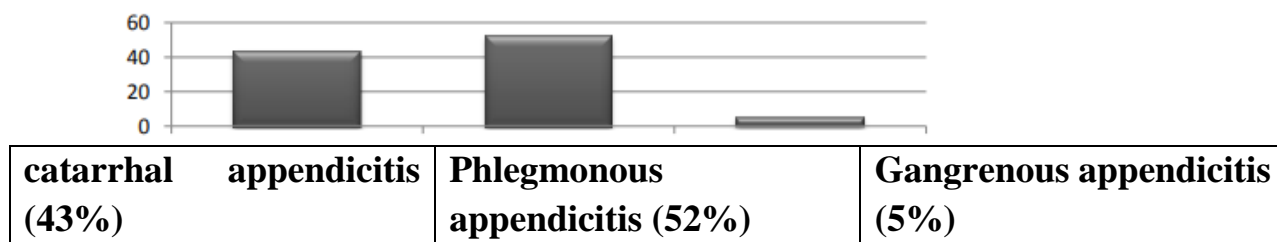
Most of the patients came from Termez (66%). In addition, there were patients from the regions.



In 2021, 800 case histories were reviewed at CHTC, of which 268 cases accounted for acute appendicitis. Of these, 152 cases (57%) were female patients and 166 cases (43%) were male patients. The age composition was dominated by people of working age.

In 141 cases (52%) the diagnosis was Phlegmonous appendicitis, in 114 cases (43%) - Catarrhal appendicitis. Gangrenous appendicitis was observed in 13 patients (5%), including 3 cases with perforation into the abdominal cavity. Complications of appendicitis were observed in 15 patients (6%). Complications were local serous peritonitis in 9 cases, local purulent peritonitis in 3 cases, and appendix empyema in 3 cases.

**The frequency of occurrence of various forms of appendicitis according to the CHTC archive for 2021**

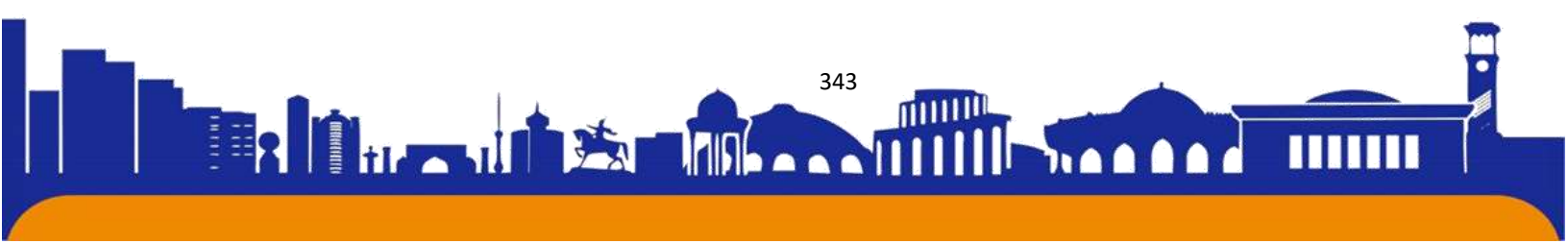


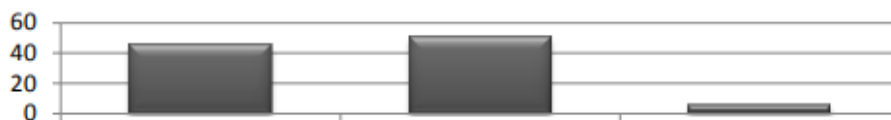
**Picture. 3. The frequency of occurrence of various forms of appendicitis for 2021 (CHTC archive)**

Most of the patients came from Termez. In 2022, CHTC reviewed 8,000 case histories, of which 239 cases were acute appendicitis. Of these, 122 cases (51%) were female patients and 117 cases (49%) were male patients. The age composition was dominated by people of working age.

In 119 cases (50%) the diagnosis was Phlegmonous appendicitis, in 108 cases (45%) - Catarrhal appendicitis. Gangrenous appendicitis was observed in 12 patients (5%), including 2 cases with perforation into the abdominal cavity. Complications of appendicitis were observed in 11 patients (4%). Complications were local serous peritonitis in 8 cases, local purulent peritonitis in 2 cases, and appendix empyema in 1 case.

**The frequency of occurrence of various forms of appendicitis according to the CHTC archive for 2022**





<b>catarrhal</b> <b>(45%)</b>	<b>appendicitis</b>	<b>Phlegmonous</b> <b>appendicitis (50%)</b>	<b>Gangrenous appendicitis</b> <b>(5%)</b>
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**Picture. 4. The frequency of occurrence of various forms of appendicitis for 2022 (CHTC archive)**

**Conclusions:**

- 1) phlegmonous appendicitis is most often diagnosed;
- 2) the incidence of appendicitis compared to previous years has become less, including due to advances in pharmaceuticals, improving the quality of nutrition and people's lives;
- 3) more erased forms of appendicitis appeared, especially in the elderly and children;
- 4) a large proportion of the incidence occurs among city residents of working age.

**Literature:**

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