



QANDLI DIABET ASORATLARIDA JIGAR PATOMORFOLOGIYASINI KOMPLEKS DAVOLASH

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Annotatsiya. Eksperimental diabetik oyoq sindromida jigar patomorfologiyasini o'rganish va kompleks davolash algoritmi orqali jigar biyokimyoviy jarayonlarini baholashdan iborat. Zamonaviy dori preparatlari orqali jigar to'qimasining morfologik xususiyatlarini, funksiyasini, fermentativ xususiyatlarini qandli diabet kasalligi fonida qayta tiklash orqali aniqlanadi.

Kalit so'zlar: Alloksan, jarrohlik debridman, dekapitatsiya, «Accu-Check» apparati, Student's koeffitsiyenti, gepatotsit, Disse bo'shlig'i.

COMPLEX TREATMENT OF LIVER PATHOMORPHOLOGY IN DIABETES COMPLICATIONS

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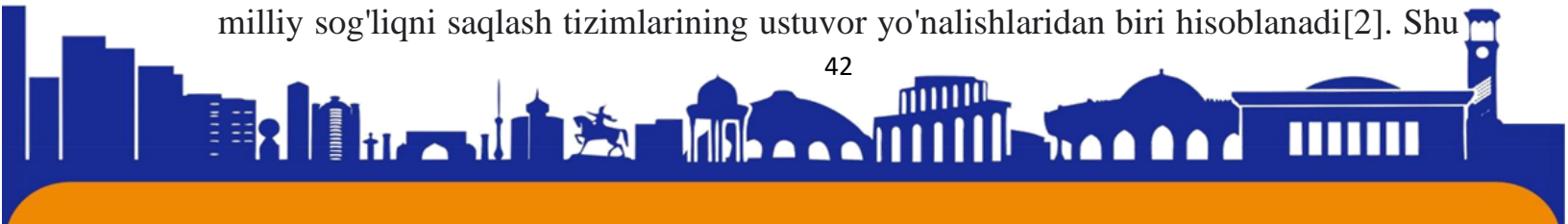
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Abstract. It consists of studying the pathomorphology of the liver in experimental diabetic foot syndrome and evaluating the biochemical processes of the liver through a complex treatment algorithm. It is determined by restoring the morphological properties, function, and enzymatic properties of the liver tissue against the background of diabetes through modern drugs.

Key words: Alloxan, surgical debridement, decapitation, "Accu-Check" device, Student's coefficient, hepatocyte, space of Disse.

Kirish. Qandli diabet - bu insulin yetishmovchiligi bo'lgan kasallik. Insulin yetishmovchiligi tufayli kech asoratlarga olib keladigan metabolik buzilishlar sindromiga kiradi[1]. O'lim darajasi va erta nogironlik tufayli qandli diabetni davolash milliy sog'liqni saqlash tizimlarining ustuvor yo'nalishlaridan biri hisoblanadi[2]. Shu





sababli, jigarga kichik nojo'ya ta'sirlar va qulaylik kabi fazilatlarga ega bo'lgan yangi davolash dori vositalarini izlash dolzarb muammo bo'lib qolmoqda[3]. Diabetologiya sohasida ushbu tadqiqotlar uchun diabetes mellitusning turli modellari qo'llaniladi. Ulardan biri alloksan diabet modelidir[4].

Tadqiqot maqsadi. Eksperimental diabetik oyoq sindromini kompleks davolashda patomorfologik jihatlarni hisobga olgan holda, alloksan preparati yordamida sun'iy ravishda yaratilgan qandli diabetda jigarni davolashni o'rganish.

Materiallar va tadqiqot usullari. Tadqiqot 2021-2022 yillarda Toshkent tibbiyot akademiyasining vivariysida saqlangan oq nasilsiz erkak kalamushlar ustida o'tkazildi. Ulardagi barcha jarrohlik manipulyatsiyalar insonparvarlik tamoyiliga muvofiq va umumiy behushlikdan foydalangan holda amalga oshirildi. Hayvonlar 2 guruhga bo'lingan: 1-guruh – o'zgarmagan guruh; 2-nazorat guruhi – an'anaviy terapiya yordamida alloksan sabab bo'lgan diabetik oyoqning eksperimental modellarini yaratilgan guruhi;

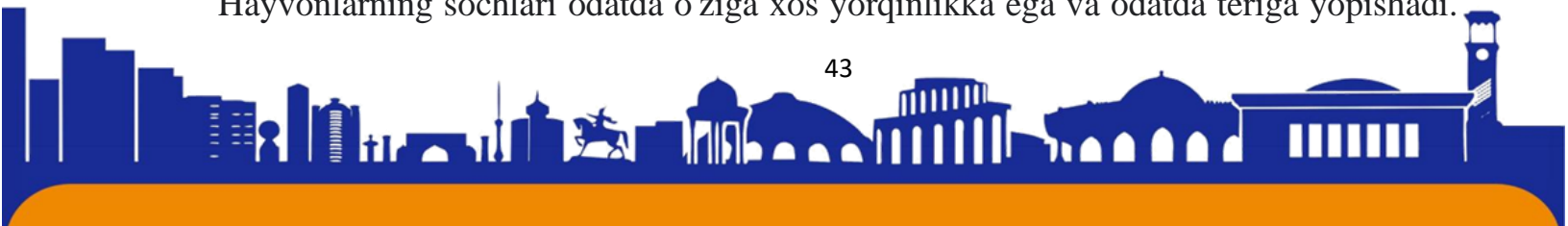
24 soatlik ochlikdan so'ng, kalamushlar vazni o'lchab ko'rildi, keyin 0,9% fiziologik eritmada suyultirilgan alloksan 2,0 gramm eritmasi hayvonlarga 100 gramm vazniga 20,15,12 mg alloksan dozasiga to'g'ri keladigan bir martalik dozalar shaklida intraperitoneal yuborildi.

Preparat kiritilgandan atigi 30 daqiqa o'tgach, hayvonlarga oziq-ovqat va suv berildi. 3 kun davomida hayvonlarning periferik qonida glyukoza konsentratsiyasini aniqlandi. Qandli diabet qondagi glyukoza konsentratsiyasini aniqlashdan 3 kun o'tgach tasdiqlandi.

Qandli diabetning (2-guruh) eksperimental modeli olindi. Qandli diabetning tasdiqlangan kuni uning rivojlanishining dastlabki kuni (DK) deb hisoblangan.

Jarrohlik muolajasi. Sinov kunida oyoqning o'ng panjaning teri yuzasi qirqib olingan va 70% etanoldan tayyorlangan mato bilan tozalandi. Har bir kalamushning o'ng orqa panjasining panjalari terisida skalpeldan foydalanib, qalinligi 2,0x5,0 mm gacha bo'lgan to'liq qalinlikdagi to'rtburchakl yaralar hosil qilindi. Har kuni jarohatlar an'anaviy davolash usuli (yodning 5% spirtli eritmasi va levomekol malhami) bilan tajriba oxirigacha olib borildi.

Kasallikning rivojlanishi hayvonlarning holatiga qarab baholandi, o'lim guruhlariga bo'linib, klinik belgilar (poliuriya, polidipsiya, polifagiya, vazn yo'qotish, teri yuzasi bujmayishi) va qondagi glyukoza darajasi bo'yicha qayd etildi. Hayvonlarning sochlari odatda o'ziga xos yorqinlikka ega va odatda teriga yopishadi.





Kalamushlar individual ravishda o'z qafaslariga joylashtirilgan silindrlı suv solingan idishlardan suv ichishidan oldin va suv ichishidan keyin suv miqdori o'lchanib turildi. Kundalik diurez qiymatlarini baholash uchun siydik kollektorlari yordamida individual siydik yig'ish amalga oshirildi.

1, 3, 7, 10, 14-kunlarda kalamushlar boshlarini kesish yo'li bilan tajribadan olib tashlandi.

Preparatning samaradorligini baholash hayvonlarni va ularning yaralarini vizual tekshirish asosida ham amalga oshirildi. Yara uchun preparatning samaradorligi mezonlari quyidagilardan iborat edi: jarohat sohasidagi yallig'lanish ko'rinishlarining davomiyligiga (shish, giperemiya, yara ekssudati), yara asosining holatiga e'tibor berish; granulyatsiya to'qimalarining paydo bo'lishi; yara nuqsoni maydonini kamaytirish; marginal epitelizatsiya ko'rinishi; jarohatni davolash vaqtini tezlashtirish.

Olingan natijalarning to'g'riligini aniqlash uchun Student t-koeffitsientidan foydalanildi. O'rganilayotgan belgining 5% dan ko'p bo'lmagan chastotali tasodifiy farqlari ishonchli deb tan olingan ($P < 0,05$).

Eksperimental diabetik tovon va jigar parchalari Karnoy eritmasiga solindi (eritma tarkibi - muzli sirka kislotasi - 10 qism, xloroform - 30 qism, etil spirti - 60 qism). Qismlardan gistologik mikropreparatlar tayyorlandi. Bu gistologik bo'limlarni bo'yashning eng keng tarqalgan usuli. Parafin bo'lakchalari xloroformda parafinlanadi va distillangan suvda yuviladi, so'ngra gematoksilin eritmasi bo'lakchalar ustiga 3 daqiqa davomida quyiladi. 10 daqiqa davomida toza oqar suvda yuvib tashlandi va kesilgan joylarni tekshirildi.

Toza oqar suvda yuviladi va bo'laklar 2 minutdan 3 minutgacha eozin bilan bo'yaladi, ksilenda tozalanadi va balzam bilan o'raladi. Natijada, hujayra yadrolari ko'k-binafsha rangga bo'yaladi. Sitoplazma pushti rangga bo'yalgan. Tadqiqot lyuminescent-mikroskopik usulda amalga oshirildi.

Tadqiqot natijalari.

Nazorat guruhi. Jigar to'qimasini mikroskopik tekshirish natijalari jigarda alloksan diabetini an'anaviy davolashdan so'ng 7-kunida gepatotsitlarning vakuolyar degeneratsiyasi darajasi biroz kamayadi. Jigar parenximasi lobulalarining ikkinchi morfofunktsional zonasida yanada aniqroq vakuolyar distrofiya saqlanib qoladi. Gepatotsitlarning vakuolyar degeneratsiyasi ba'zan jigar hujayralarining nekrobiozi va nekrozi bilan tugaydi. Jigar lobulalarining uchinchi va birinchi morfofunktsional

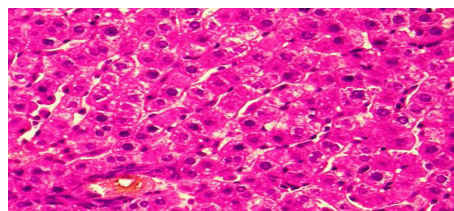




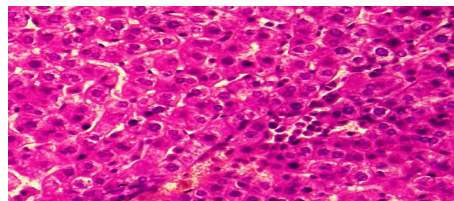
zonalarida gidrooptik distrofiya kamroq aniqlanadi, bu gepatotsitlar sitoplazmasining bo'shashishi va notekis bo'yalishi bilan namoyon bo'ladi.

Gepatotsitlarning yadro tuzilmalari har xil shakl va o'lchamda bo'lib, ularning aksariyati kariopiknoz va karioliz holatida bo'ladi. Perisinusoidal bo'shliq biroz kengaygan, ularning ba'zilarida bitta leykotsitlar mavjudligi aniqlanadi. Jigarda alloksan diabetini an'anaviy davolashdan so'ng 10-kunida gepatotsitlarda distrofik o'zgarishlar nisbatan kamayadi. Yuqorida aytib o'tilganidek, jigar lobulalarining ikkinchi morfofunktsional zonasida gepatotsitlar sitoplazmasining mayda tomchi vakuolyar distrofiyasi (1-rasm) saqlanadi. Disse bo'shlig'ining markaziy venasi, sinusoidlari va bo'shlig'i biroz kengaygan va to'liq qonli bo'lib qoladi. Tadqiqotning 14-kunida ba'zi joylarda jigar to'qimalarida limfoid hujayralar tomonidan yallig'lanish infiltratsiyasining kichik o'chog'i paydo bo'lganligi qayd etilgan (1-rasm). Jigar parenximasi tomonidan, oldingi davrlarga nisbatan, gepatotsitlarda distrofik o'zgarishlarning barqarorlashishi qayd etilgan, faqat ba'zi gepatotsitlarda mayda tomchi vakuolyar distrofiya saqlanib qoladi. Shu bilan birga, jigar hujayralarining yadro tuzilmalari biroz kattalashgan va giperxromli.

1. Rasm. Jigarning morfologik rasmi, an'anaviy davolash, 10 kun. Gepatotsitlardagi distrofik o'zgarishlarni barqarorlashtirish. Rang: G-E. SW: 10x40.



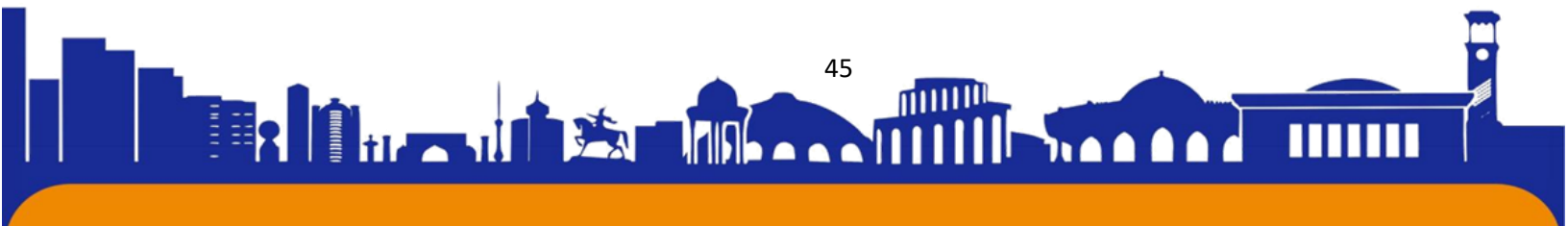
2.Rasm. Jigarning morfologik rasmi, an'anaviy davolash, 14-kun. Jigar to'qimalarida yallig'lanish infiltratsiyasi o'choqlari paydo bo'ladi. Rang: G-E. SW: 10x4



Xulosa. Jigarni an'anaviy davolashdan so'ng dinamikada morfologik o'rganish organing funktsional qobiliyatlarini qisman tiklashni ko'rsatdi. Eksperimental guruhda tajribani davom ettirishga qaror qildik.

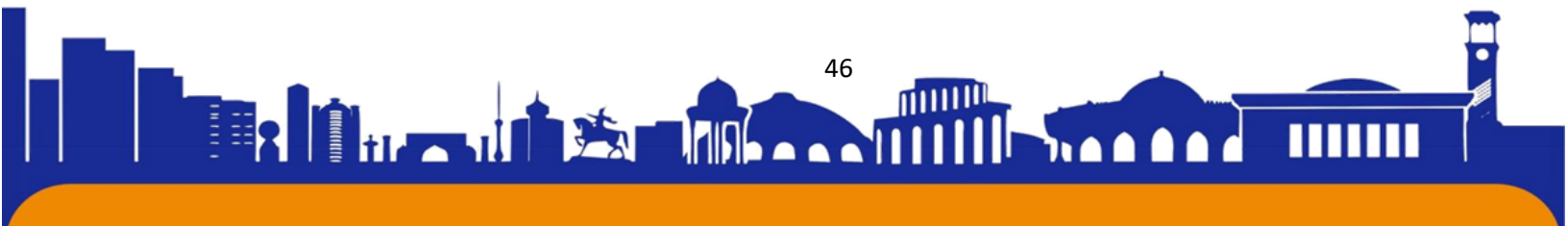
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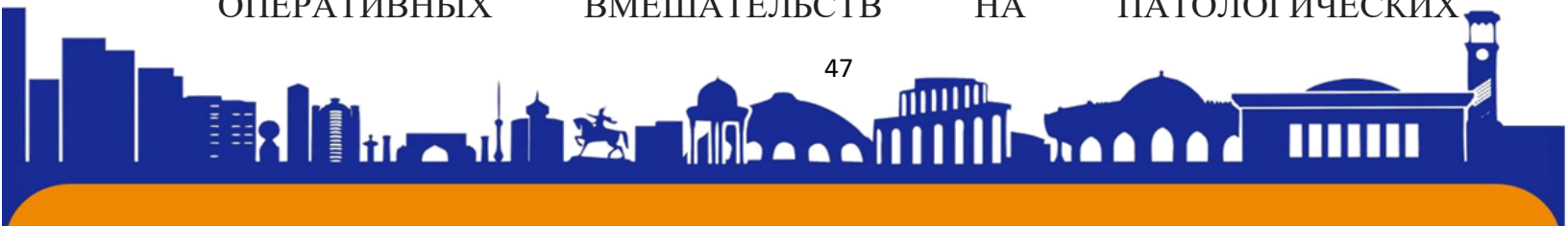


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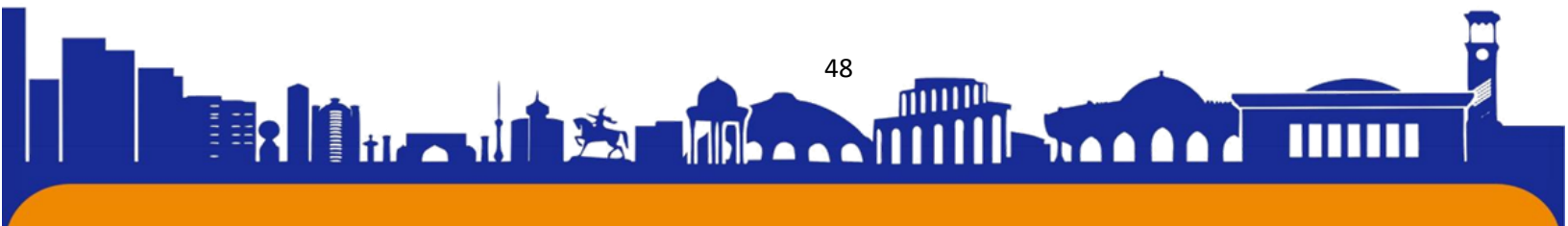
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