

**PATHOLOGICAL CHANGES OF KIDNEYS IN PATIENTS AFTER
POLYCHEMICAL THERAPY.**

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Relevance of the topic: Minimizing the complications of polychemotherapy, choosing the optimal treatment tactics in the treatment of oncological patients is one of the most urgent issues in the world. Chemotherapy is associated with the risk of developing nephrotoxicity, which can be manifested by acute tubular damage, acute tubulointerstitial nephritis, glomerular damage. The toxicity of drugs depends on the dose and frequency of their use. Drugs containing platinum, such as methotrexate, phosphamide and its derivatives, have a direct toxic effect on the epithelium of the proximal convoluted tubules by damaging DNA, reducing the amount of energy reserves of the cell, changing the balance of ions inside the cell, and synthesizing reactive oxygen species.

The purpose of the work: to study the clinical laboratory, morphological, morphometric, immunohistochemical aspects of kidney damage in patients living in the city of Urganch treated with polychemotherapy.

The obtained results: deterioration of kidney function, occurrence of proteinuria and renal hypertension in patients, increase of creatinine and urea in clinical and laboratory analysis, occurrence of proteinuria and microalbuminuria, appearance of signs of inflammation in kidney nephrons and interstitial tissue, reduction of kidney size, immunological disorders in kidney tissue were found.

Conclusion: in conclusion, it can be said that in the clinical results, symptoms such as kidney dysfunction, hypertension, proteinuria and edema were observed in patients. These symptoms appeared as a result of adverse effects of polychemotherapy. In the laboratory results, increased levels of creatinine and urea, the appearance of proteinuria and microalbuminuria indicated renal dysfunction. interstitial inflammation as a result of kidney biopsies or microscopic examinations in the morphological results, nephritis and other pathologies were detected. in the morphometric results, there was a decrease in the size of the

kidneys and changes in the structures that control production in the nephrons. immunohistochemical results revealed immunological changes in kidney tissue, including changes in antigen and antibody reactions. At the same time, it is important to strengthen the processes of early diagnosis, effectiveness of treatment and monitoring in order to reduce the effect of polychemotherapy on the kidney. These results are the basis for the development of new methods for the detection and treatment of adverse effects of polychemotherapy in the kidney.

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