CRITERIA FOR DIAGNOSING AND ASSESSING COMMON RISK FACTORS FOR ACUTE ABDOMINAL DISEASES ASSOCIATED WITH COVID-19 AND POST-COVID SYNDROME

N. S. Mamasoliev

N. S. Khakimov

R. R. Nabiyev

Sh. A. Mamasolieva

D. M. Qalandarov

Andijan State Medical Institute

Relevance. Published sources of research conducted

This indicates that taking into account the unfavourable epidemiological situation associated with COVID-19 infection, an international registry was created dedicated to "Analysis of the dynamics of comorbid diseases in patients with SARS-COV2 (ACTIV SARS-COV-2) infection". This registry studied the impact of specific risk factors (obesity, smoking, arterial hypertension, old age) and chronic infectious diseases on the risk of developing severe and fatal consequences. This international registry once again confirms the importance of a comprehensive clinical and epidemiological study of chronic non-communicable diseases, including acute diseases of the abdominal cavity (AIDs), and on this basis, the need to develop models of their regional prevention in the Uzbek population with COVID-19.

The aim of the study is to study the epidemiological characteristics of acute abdominal diseases in the Uzbek population with COVID-19 among rural and urban residents.

Research material and methods: the object of research A population of 1,356 Uzbek men and women aged 18-90 years, who had been infected with SARS-COV2 and were being treated for COVID-19 in Andijan surgical and therapeutic hospitals and "COVID-19 centre hospitals" were recruited as a sample. The population study included the following: epidemiological study methods, instrumental examination methods, laboratory examination methods, surgical examination methods and clinical examination methods.

Research results. The diagnosis of CBC in patients with COVID-19 or post-COVID syndrome who were/are under hospital or outpatient observation was based on a comprehensive approach to analysis. The diagnosis was made based on patient complaints, anamnesis, general somatic and local examination, and data from a questionnaire, clinical, paraclinical (instrumental) and laboratory examinations.

Hemorrhagic CVA was also analyzed and assessed according to the criteria of Zatekhin I.I. et al. The international Sydney criteria were used to assess risk factors (prenosological conditions) for CVA [Kakharov A.A., 2017].

Common risk factors were assessed according to WHO criteria and international recommendations for non-communicable chronic diseases [WHO, 1996; ESC, 2018]: hypercholesterolemia was defined as a blood cholesterol value $\geq$ 5.2 mmol/l, hypertriglyceridemia as a blood triglyceride value $\geq$ 1.7 mmol/l, and hyperglycemia as a blood glucose value $\geq$ 5.6 mmol/l; arterial hypertension was defined as a level of SBP $\geq$ 140 and DBP $\geq$ 90 mmHg, a smoker was defined as a person who smoked at least once a day, an alcoholic was defined as a person who drank alcohol at least once a month, and a low fruit and vegetable intake was defined as a person who consumed less than 400 g of fruit and vegetables per day. The criteria recommended by WHO for use in preventive medicine were used to determine other risk factors and comorbidities [WHO, 2021].

LIST OF REFERENCES:

1. Арутюнов Г.П., Тарловская Е.И., Арютунов А.Г и др. Международный регистр «Анализ динамики коморбидных заболеваний у пациентов, перенесщих инфицирование SARS-CoV-2(FRNBDSARS-Cov-2)@ Кардиология. 2020;60(11):30-34

2. Воробьева О.В., Романова Л.Т. Ишемический инсульт головного мозга и острая сердечная недостаточность у больных сахарным диабетом после инфицирования SAR-Cov-2. Профилактическая медицина. 2022;25(2);61-63.

3. Временные методические рекомендации: «Болезни органов пищеварения в условиях пандемии новой коронавирусной инфекции (Covid-19). Версия 2 // Профилактическая медицина. -2021.-№5.-С.4-41.

4. Герман С.В., Зыкова И.Е., Модестова А.В., Ермаков Н.В. Распростран-ненность инфекции H.pyloriсреди населения Москвы. Рос журнал гастроэнтерол гепатол колопроктол. 2020;20(2)25-30.

5. Гриневич В.Б., Губонина И.В., Дощицин В.Л. и др. Особенности ведения коморбидных пациентов в период пандемии новой коронавирусной инфекции (Covid-2019). Нациоагнльный Консенсус 2020. Кардиоваскулярная терапия и профилактика. 2020;19(4):2630.

6. Драпкина О.М., Маев И.В., букулин И.Г. и др. Временные методические рекомендации: «Болезни органов пищеварения в условия пандемии новой коронавирусной инфекции (Covid-2019)». Профилактическая медицина. 2020;23:3-3:120-152.

7. Жилкова Е.А., Попова И.А., Рогова И.В., Гуревич К.Г. Оценка роли коморбидной патологии в развитии и течении Covid-2019 // Профилактическая медицина. – 2021 . – Т. 24. -№5(приложение). –С.88.

8. Ивашкин В.Т., Шелыгин Ю.А.. Абдулганиева Д.И. и др. Клинические рекомендации по диагностике и лечению болезни Крона у взрослых (проект). Колопроктология. 2020;19(2): -С.8-38.

9. Старков Ю.Г., Солодинина Е.Н., Шишин К.В., Плотникова Л.С., Кобесова Т.А., Дубова Е.А. Эндосонография в диагностике заболеваний органов гепатопанкреатобилдиарной зоны. Хирургия, журнал им. Н.И.Пирогова. 2009;6:10-6.

10. Схиртладзе М.Р.,Тимофеева А.А., Буверова Е.Л. и др. Боль в животе как первое проявление новой коронавирусной инфекции Covid-2019. Российский журнал гастроэнторологии, гепатологии, колопроктологии. 2020;30(6):57-62.

11. Чижова О.Ю., Белоусова Л.Н., Бакулин И.Г. Управление рисками желудочно-кишечных кровотечений у коморбидных больных с сердечно-сосудистыми заболеваниями. Рациональная фармакотерапия в кардиологии. 2018;14:4:583-590.

12. Шептулин А.А. Диарея пациентов с инфекцией Covid-2019. Российский журнал гастроэнторологии, гепатологии, колопроктологии. 2020;30(6):51-56.

13. Ungaro RC, Brenner EJ, Gearry RB, et al. Effect of IBD medications on COVID-19. outcomes: results from an international registry. Gut Epub ahead of print: 20 October 2020.https://doi.org/10.1136/gutjnl-2020-322539.

14. Wang F, Wang H, Fan J, Zhang Y, Zhao Q. Pancreatic Injury Patterns with Coronavirus Disease 19 Pneumonia. Gastroenterology. 2020;(1):367-370.

15. WHO: coronavirus disease (COVID-2019) situation reports, CDC: coronavirus disease 2019(COVID-19) in the US CDC: locations with confirmed COVID-19 cases, by WHO region, National Health Committee of the People's Respublic of China: outbreak report.

16. Zhou J, Wang X, Wu WKK, Cheung BMY, Zhang Q, Tse G. Proton pump inhibitor or famotidine use and severe COVID-19 desease: Epub ahead of print. PMID: 33177346.a propensity score-matched territory-wide study.Gut.2020: gutjnl-2020-323668. https://doi.org/10.1136/gutjnl-2020-323668.

17. Xiao F., Tang M, Zheng X, Liu Y, Li X, Shan H. Evidence for Gastrointestinal Infection of SARS – CoV – 2. Gastroenterology. 2020;158(6):1833.e3.

18. Zeng X., Shi Z.W., Yu J.J., Wang L.F., Luo Y.Y., Jin S.M., et al. Sarcopenia as a prognostic predictor of liver cirrhosis: A multicentre study in China. J Cachexia Sarcopenia Muscle. 2021; 12(6):1948-58. DOI:10.1002/jcsm.12797.

19. Zhang J, Dong X, Cao YY, Yuan YD, Yang YB, Yan YQ, Akdis CA, Gao YD. Clinical characteristics of 140 patients infected with SARS – CoV – 2 in Wuhan, China. Allergy. 2020;75(7):1730 – 1741.