

CLINICAL FEATURES OF CHRONIC VIRAL HEPATITIS C, DUE TO CONSOLIDATED DISEASES

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Relevance. CHCV is one of the most significant diseases. According to WHO, 3% of the world's population is infected with the hepatitis C virus. 3-4 million are registered worldwide. new cases of infection. ChVHC disease reduces ability to work, increases the risk of developing serious complications, increases the cost of medical resources, and increases mortality. There is a high risk of developing liver cirrhosis and hepatocellular carcinomas. Statistics show that more than 360 thousand people die from complications of chronic hepatitis C in the world every year. The cessation of normal hepatic intestinal circulation of bile acids leads to activation of the intestinal flora, disruption of the mechanism of neutralization of bacterial lipopolysaccharides by conjugation with bile acids, and increased absorption of endotoxins without bacteremia. All of the above indicates the extreme relevance of the chosen topic.

Target. Studying the features of the course of chronic viral hepatitis C against the background of concomitant diseases. Materials and methods. We observed 31 patients with a verified diagnosis. . The main selection criteria were: HCV genotypes I and II. high level of viremia, high transaminase activity. absence of liver cirrhosis. Morphological studies of the liver were not performed. Studies on HCV RNA in blood serum were carried out using the PCR method in "Real time" mode in the reference laboratory of the Research Institute of Virology of the Republic of Uzbekistan. Research results. 26 patients had impaired intestinal microbiocinosis. During the observation, patients complained of irregular bowel movements. Abdominal pain, bloating and other dyspeptic symptoms. Candidiasis and klebsiellosis were diagnosed in the laboratory, and Proteus and Campylabacillosis pathogens were cultured. All examined patients had problems with the functional state of the gallbladder and biliary tract. Complaints such as morning bitterness in the mouth, pain in the right hypochondrium, and heaviness were noted. In 19

subjects, symptoms of chronic colitis with a spastic nature were noted. Patients with impaired intestinal biocinosis were given the necessary corrective therapy.

As a result of the treatment, all patients showed a clear improvement in their well-being. Patients noted a decrease in complaints and stabilization of laboratory parameters. In a short time, patients noted a reduction in stool frequency, decreased bloating, weight gain, and improved appetite.

Conclusion. Patients with chronic viral hepatitis C should be examined regularly for the functional state of intestinal microbiocinosis. Early inclusion of corrective therapy leads to a significant reduction in the damaging effect of the virus on the normal functioning of the intestinal microflora. In turn, this leads to an improvement in the patient's immune system.

Literature.

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