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Pathogenetic Mechanisms of Peritonitis Development in Patients with Acute Commissural Small Intestinal Obstruction

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BACKGROUND

The relevance, diagnosis and treatment of acute intestinal obstruction remains one of the most significant problems in modern surgery. Despite modern achievements and results obtained in this field of surgery, many methods of postoperative management of patients, and intensive care, the results of treatment of patients with acute intestinal obstruction remain insufficiently satisfactory, and the mortality rate in this pathology reaches 17-21%. The study aimed to establish the relationship between endogenous intoxication and oxidative stress in patients with acute intestinal obstruction, including those with complicated peritonitis, with the early

postoperative period and the development of complications.

MATERIAL AND METHODS

The work is based on studies of patients with acute intestinal obstruction who were in the surgical department of the Khorezm regional branch of the Republican Center for Emergency Medical Care from 2017 to 2023. Group 1 (n=29), patients with acute intestinal obstruction, in whom there were no manifestations of acute peritonitis intraoperatively. Group 2 (n=22), patients with acute intestinal obstruction, intraoperatively diagnosed with acute peritonitis. Endogenous intoxication syndrome was determined by the level of water-soluble and

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water-insoluble toxins, the content of which was determined by the albumin level. Lactic acid content was determined by reaction with paraoxydiphenyl and pyruvic acid by reaction with 2,4-dinitrophenylhydrazine. Based on these data, the hypoxia coefficient was calculated.

RESULTS

In patients with acute intestinal obstruction in the early stages after surgery, we studied the severity of endotoxemia. We conducted such studies in the early stages after surgery (up to 5 days). This is determined by the fact that during these periods, the "programs" of the course of recovery processes after surgery, which are based on the phenomena of endotoxemia, are formed more pronounced and prolonged. Studies have revealed something else. Laboratory studies have shown that one of the components of homeostasis violation in patients with acute intestinal obstruction is the phenomenon of general hypoxia, which is most pronounced in acute intestinal obstruction complicated by peritonitis. It has been established that in acute intestinal obstruction complicated by peritonitis, lipid peroxidation and phospholipase activity increased to a greater extent than in the uncomplicated form of ileus. The level of diene conjugates in the second group increased relative to normal throughout the follow-up period by 57.4%, 110.4%, 89.6% and 60.2% (p<0.05), respectively. At the same time, compared to the control group, it increased in the same period by 27.8%, 28.5%, 30.8% and 26.4% (p<0.05), respectively.

CONCLUSION

In acute intestinal obstruction, including those complicated by peritonitis, the course of the early postoperative period and the development of complications are associated with the phenomena of endogenous intoxication syndrome and lipid metabolism disorders. The established factual material of the conjugation of the clinical course of the early postoperative period with violations of several homeostasis parameters in acute intestinal obstruction was the basis for developing a method for predicting the course of the early period after surgery and the development of complications.