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MINISTRY OF HIGHER AND SECONDARY
SPECIALIZED EDUCATION OF THE
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*Year of Proactive
Entrepreneurship,
Innovative Ideas
and Technologies*



TASHKENT PEDIATRIC MEDICAL INSTITUTE

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"YOUNG SCIENTIFIC ACHIEVEMENTS
IN THE FIELD OF PEDIATRICS"

ABSTRACT BOOK
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САҚЛАШ ВАЗИРЛИГИ
ЎЗБЕКИСТОН РЕСПУБЛИКАСИ ОЛИЙ ВА
ЎРТА МАҲСУС ТАЪЛИМ ВАЗИРЛИГИ
ТОШКЕНТ ПЕДИАТРИЯ ТИББИЁТ ИНСТИТУТИ

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TASHKENT PEDIATRIC MEDICAL INSTITUTE

*"Фаол тадбиркорлик, инновацион зоялар ва
технологияларни қўллаб-қувватлаш йили"* га
бағишланган

***“ПЕДИАТРИЯ СОҲАСИДА ЁШ ОЛИМЛАРНИНГ
ЮТУҚЛАРИ”***

РЕСПУБЛИКА ИЛМИЙ-АМАЛИЙ АНЖУМАНИ
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**ТЕЗИСЛАР ТЎПЛАМИ II - ҚИСМ
ABSTRACTS**

Тошкент, 17 - 18 апрел, 2018

THE FUNCTIONAL STATE OF HYPOPHYSIS – GONAD AXIS IN PATIENTS WITH POLYCYSTIC OVARY SYNDROME

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Actuality. The polycystic ovary syndrome (PCOS) - is the most frequent form of endocrinopathy, meets for 5-10%% women of reproductive age and is 80%%, and from some data, even 90%% all forms of hyperandrogenemiya.

Information about pathogenesis of PCOS is contradictory; The main step of the pathogenesis of SPCO is hyperproduction of LH of by the hypophysis, exposed at 40-80%% patients . On one of numerous theories, an increase secretion results in the increase of LH; by the hypothalamus of the gonadotropin-releasing hormone (GRH), secreted in the discrete mode under control sexual steroid hormones, monoamines and opiod peptides.

The main of investigation- to study the functional state of axis of hypophysis-gonads for women with SPCO.

Material and methods of investigation. Under our supervision in the department of neuroendocrinology of The Center of Endocrinology of PHM of Republic of Uzbekistan ambulatory in a period from September 2015 for July, 2016 120 patients of fertile age were inspected with polycystic ovary syndrome (PCOS).. Middle age of patients - $25,5 \pm 4,3$ years. .

The remoteness of disease hesitated in limits from 7 months to 9 years. 20 healthy women of corresponding age made a control group.

The complex of researches, including clinical (global analysis of blood and urine), biochemical (glucose of blood, test of tolerance to glucose) hormonal (LH, FSH, prolactin, estradiol, progesteron, free orchidic hormone, dehydroepiandrosteron (ДГЕА), 17 –oxyprogesterone, antimuller hormone (AMH), insulin on 14 day of cycle), was executed all patients, ULTRASONIC of uterus and ovaries (transabdominal and transvaginal) on 14 day of cycle with follikulometriya in a dynamics, and also magnetically-resonant tomography (MRI) of the Turkish saddle and questionnaire of patients.

Results. Patients were divided into two groups: 1 gr. - patients with primary sterility are 94 cases, 2 r. - patients with secondary sterility are 26 cases.

In a 1 group of patients with primary sterility the reliable decline of both pituitary and ovarian hormones was marked on a background hyperandrogenemiya and hyperprolactinemiya. So, as compared to the group of control on the 14ñ day of cycle were for certain mionectic LH, FSH, and also estradiol, progesteron, while free orchidic hormone, ДГЕА - were enhanceable as compared to control data.

In the second group of patients the reliable decline of pituitary hormones was also educed on a background hyperandrogenemiya and hyperprolactinemiya. while an ovarian function was within the limits of norm. So, as compared to the group of control on the 14ñ day of cycle were for certain mionectic LH, FSH, here free orchidic hormone, ДГЕА and AMH - were enhanceable as compared to control data.

Conclusions. The most expressed violations of the system of pituitary-ovarial function were found out in the first group of patients with PCOS with primary sterility, at that the reliable decline of the functional state of hypophysis-gonads was marked, namely decline of LH, FSH, estradiol and progesteron of plasma of blood on 14 day of menstrual cycle, that confirmed on ultrasound investigation of uterus and ovaries by impoverishment of follicle vehicle of ovaries, anovulation.

THE ASSESSMENT OF THE RISK FACTORS IN DEVELOPMENT OF THE ESSENTIAL HYPERTENSION AMONG SCHOOLCHILDREN OF TASHKENT CITY

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Relevance. Arterial hypertension (AH) is one of the topical medico-social problems of modern medicine, which isn't only with prevalence in population, but with high risk of vascular complications and disability in adults.

The aim of the investigation. To study of the risk factors (RF) of essential hypertension (EH) development among the children from 15-17 years by the screening outcomes.

Materials and methods. There were examined 254 children (of middle age 15.7 ± 0.3 year) by us, 133 of them were boys (52.4%) and 121 girls (47.6%). The assessment of risk factor was hold in several groups of children: with arterial hypertension (AH, the 1st group, n=19), with high normal arterial hypertension (AH) (HNAH, 2nd group n=24), and with normal AH (3rd group, n=211). There were calculated the risk integration coefficient (X) and the index of odds ratio (OR) by the results of the computation of individual risk indicators.

The results. The screening show, that the distribution of the factor by "Weighed gynecological anamnesis" were often registered in boys. The signs of endemic goiter, the obesity and the high weight gain in pregnant are going in descending order, which were specific of both gender. "The burden of CVD by the 1st degree of parentage" sign was the main factor of the both gender. "The fist born syndrome" is more common in boys than in girls. Index "X" by the factor of "artificial feeding till 6 month" was the firm factor risk of development of AH in boys (X=12.3), than in girls (X=10.8). The distribution of this factor by OR was the same with the integration indicators: OR=4.1 for boys and OR=3.8 for girls.

Index X by the factors of "Perinatal lesions of the central nervous system", "sleep duration" and "concomitant diseases" established that "Perinatal lesions of the central nervous system", the sign of "sleep duration" and "GIT disease" were the firm factors for boys (X=15,7, 10,7, 13,1 against 13,4, 7,9, 10,4 for girls), "posture infraction" and "flatfoot" for girls were X=12,7 against 9,9 for boys. The rank point of the risk development leading factors of AH by X among the children irrespective of age distributed in a such way: "The burden of CVD by the 1st degree of parentage" was the most significant (X=17,3 for girls and X=15,8 for boys) for both gender in

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