



## Pancreas Injuries: Modern Approaches to Diagnosis and Surgical Treatment

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### ABSTRACT

Pregnant women may feel unwell during pregnancy if they have severe anemia; Increased chances of premature birth; There is a high risk of infection after childbirth. According to statistics, 40% of pregnant women suffer from anemia.

The purpose of the study: To study the causes of anemia in pregnant women and the symptoms of anemia. The article provides information on the causes of anemia in pregnant women, their identification and symptoms that distinguish anemia from other diseases.

### Keywords:

Pregnancy, causes and symptoms of pregnancy anemia.

### Introduction

According to WHO, the frequency of pancreatic injuries is 1-3% for closed and 6-8% for open injuries of the abdominal cavity. Injuries to the pancreas, like injuries to other organs, tend to increase, which is the reason for the increase in this group of patients. The relevance of this issue is also associated with the severity of the condition of the victims, difficulties in recognizing the injury and its treatment. In the group of isolated injuries of the pancreaticoduodenal zone, mortality varies from 5 to 7%, and with combined and multiple injuries it is 20-30%. Mortality in combined trauma of the pancreas is 12.2-63.4%, tends to increase and depends on its cause, localization and severity of pancreatic injury, the number and severity of associated complications, as well as the severity of traumatic and hemorrhagic shock.

According to domestic and foreign authors, pancreatic injuries are accompanied by severe complications in 36.8-75.5% of cases and lead to consequences - acute post-traumatic pancreatitis (AFTP) and multiple organ dysfunction syndrome (SPD).

**Purpose of the study.** To study a retrospective analysis of surgical treatment in patients with pancreatic injuries.

**Materials and research methods.** We analyzed the results of surgical treatment of 76 patients with pancreatic injury from 2000 to 2020, among which there were 52 (68%) men and 24 (32%) women. The analysis of clinical material was carried out in accordance with the improved classification of Pancreas Injury Scale There were 39 (51.3%) victims with a pancreatic injury of degree I, 11 (14.5%) -

degree II, 14 (18.4%) - III, 12 (15.8%) - IV. In 36 (47.4%) patients, traumatic injury was localized in the body of the pancreas, in 12 (16%) - in the tail, in 10 (13.1%) - in the head, in 5 (6%) - in the isthmus. Polyfocal damage to the pancreas occurred in 40 (53%) patients. All patients were examined clinically, objectively, laboratory, instrumental.

The choice of the method of surgical treatment of patients with pancreatic injuries according to the severity was carried out in each case individually and depended on the nature of the injury and the severity of the patient's condition at the time of the operation. Drainage and resection surgical interventions with flow drainage of the omental sac and drainage of the abdominal cavity were used.

**Results of the study and their discussion.** Of 76 patients with I and II severity of pancreatic injury, 40 (53%) underwent surgical correction of other concomitant injuries. At III and IV severity, 26 (34%) patients underwent laparotomy, suturing of the pancreatic head, tamponade and through drainage with the formation of omentobursostomy .

Penetrating wounds of the pancreas in 7 (9%) patients were found during the revision of the abdominal cavity with the obligatory opening of the omental sac and visual revision of the gland and retroperitoneal space. Retroperitoneal and parapancreatic hematomas, hemorrhages in the omental sac, hemorrhages in the parenchyma of the gland, its injuries of varying severity and localization indicated damage to the pancreas . Intraoperatively, direct signs of pancreatic injury were noted in 19 (25%) patients, indirect signs were observed in 45 (59%) patients, no signs were found in 5 (6%) patients. When examining the pancreas, the following were characteristic: the presence of hematomas with or without violation of the integrity of the peritoneum covering the pancreas; ruptures of the parenchyma of various depths, areas of crushing of the parenchyma of the gland, foci of steatonecrosis . Indirect signs of trauma to the pancreas in stab wounds included: penetrating wounds of

the stomach, colon, duodenum, gastrocolic ligament.

Laparotomy, duodenal suturing, cholecystostomy, through drainage of the omental sac were performed in 13 (7%) patients with grade IV pancreatic injury. The following complications were revealed in the operated patients: infected pancreatic necrosis, pancreatic abscess, infected pancreatic pseudocyst, intra-abdominal abscess, adhesive intestinal obstruction, diffuse postoperative peritonitis, arrosive bleeding.

### Conclusions.

Thus, the conducted studies show that the approach to surgical treatment of patients with pancreatic injury should be differentiated, exclude the possibility of postoperative complications, as well as increase the effectiveness of surgical correction and reduce postoperative mortality.

### References:

1. Bozhenkov Yu.G., Shalin S.A. Prevention of pancreatitis in case of damage to the pancreas // Surgery. - 2003. - No. 2. - S. 49-52.
2. Bryusov P.G., Efimenko N.A., Rozanov V.E. Provision of specialized surgical care for severe mechanical concomitant trauma // Vestn . surgery. - 2001. - No. 1. - pp. 43-46
3. Abakumov M.M., Lebedev N.V., Malyarchuk V.I. Diagnosis and treatment of abdominal injuries // Surgery. - 2001. - No. 6. - S. 24-28.
3. Yeramishantsev A.K., Molitvoslovov A.B., Filin A.V. Traumatic injuries of the pancreas // Surgery. - 1994. - No. 4. - P. 13-17.
4. Rayimov, G. N. (2021). Experience of using Minimally Invasive Interventions in Patients with Closed Trauma of the Abdominal Organs. *CENTRAL ASIAN JOURNAL OF MEDICAL AND NATURAL SCIENCES*, 2(6), 349-352.
5. Demidov V.A., Chelnokov D.L. Treatment of pancreatic injuries // Surgery. - 2009. - No. 1. - P.44-48.

6. Urman M.G. Abdominal trauma. - Perm: IPK Zvezda, 2003. - 259 p.
7. Khalzov A.V. Comparative evaluation of the effectiveness of various methods of surgical treatment of patients with complete transverse rupture of the pancreas: Abstract of the thesis . dis . ... cand. honey . n auk. - Novosibirsk, 2003. - 18 p.
8. Rayimov, G. N., & Saloxitdinov, N. A. (2021). To the Question of Diagnostics of Thoracoabdominal Injuries. *CENTRAL ASIAN JOURNAL OF MEDICAL AND NATURAL SCIENCES*, 2(5), 442-444.