Analysis of Nutritional Status of Patients with Chronic Hepatitis

Sh.Ya.Zakirkhojaev Tashkent Medical Academy

M.Kh.Talibdzhanova Tashkent Medical Academy

ABSTRACT

"Evaluation of the nutritional status of patients with chronic liver diseases and their dietary correction"

Keywords: chronic liver diseases, nutritional status, immune inflammatory response, damage to hepatocytes, diet therapy.

Adequate nutrition is the basis of normal functioning of the body of adults and children and is an important factor in maintaining resistance to environmental physical and chemical agents. A history of malnutrition significantly reduces the effectiveness of treatment for chronic diseases, injuries, burns, major surgical interventions, etc., and increases the length of hospital stay. Proper nutrition helps to prevent diseases, prolong life, increase the quality of life and it creates conditions for adequate adaptation to the environment. The aim of this research was to study a contribution of the actual diet of patients with chronic liver disease to the course of the disease.

Chronic hepatitis occupies one of the leading places in the structure of liver diseases. The social significance of chronic hepatitis is determined by the fact that they can progress to liver cirrhosis and hepatocellular carcinoma, which are characterized by a high level of disability and mortality [5]. Much less attention has been paid to factors associated with the characteristics of the body itself, which can potentially interact with the etiological agent and influence the effectiveness of drugs used to treat chronic hepatitis and, thereby, influence the outcome of treatment as a whole. Among such factors, little attention has so far been paid to factors associated with nutritional status, various disorders of which occur in a significant number of patients with chronic hepatitis [6]. These disorders, characterized by changes in body composition, actual nutrition and metabolism of basic macronutrients, represent a very interesting object for study in connection with predicting the effectiveness of treatment of chronic hepatitis of various etiologies, in particular viral, alcoholic, toxic, etc.

Purpose of the study. Study of the actual nutrition of patients with chronic hepatitis, determined as a factor in the development of the disease.

Materials and methods of research. The actual nutrition of patients with chronic hepatitis was studied in the general therapy department of the Tashkent Medical Academy. To assess the condition of patients, questionnaire methods and the survey method recommended by WHO were used, which takes into account certain food products regularly consumed by the patient outside the hospital for

breakfast, lunch and dinner. This takes into account the quantity and chemical composition of food and the degree of energy consumption. As is known, when carrying out sanitary and hygienic control and assessing the nutritional status of various population groups in specific working and living conditions in order to bring nutrition closer to the physiological optimum, on the one hand, indicators characterizing nutrition as an environmental factor are studied (energy value and chemical composition of diets , diet, etc.), and on the other – indicators of nutritional status, characterizing the health status of the surveyed groups. When studying nutrition, we used active questioning. Poor nutrition and non-compliance with the diet in chronic liver diseases create metabolic disorders in the body and contribute to the development of hepatitis or activation of chronic liver diseases with subsequent transformation into cirrhosis. In the actual nutrition of patients with chronic liver diseases, increased consumption of fats, carbohydrates, lack of vitamins, proteins and alcohol consumption with minimal energy consumption are important. The energy value of the diet was determined using the timing method.

The work examined the content of basic nutrients and food ingredients (proteins, fats and carbohydrates), some vitamins and mineral elements in the daily diets of 40 patients with chronic hepatitis.

Results and discussions. Non-compliance with diet No. 5 according to Pevzner was revealed in some patients. It was found that 31% of patients eat 4 times a day, 54% 5 times a day and 15% 6 times a day. The study found that 94% of patients eat at home and only 6% eat out.

Of the concomitant pathologies, 43% of patients had chronic cholecystitis, 21% had chronic gastritis, 5% suffered from gastric ulcers, 10% had a history of bleeding, and 28% of patients had varying degrees of anemia.

An extremely low consumption of fish products was noted, and in winter there was a low consumption of fresh vegetables, fruits and berries. At the same time, fatty, pasta and bakery products are consumed in some excess. The content of basic nutrients, especially animal proteins, is 61%, and the amount of vitamins C, B1, B2, B6 and the mineral elements potassium, calcium, magnesium, phosphorus, iron, copper, manganese in the diet is below normal and does not meet physiological needs.

The results of our research have shown that the daily diet contains a protein deficiency of 15%, a fat deficiency of 20-25%, especially polyunsaturated fatty acids, a deficiency of vitamins A, C, P, B1, B6, B12, excess consumption of carbohydrates: sucrose - by 40% due to bread products; there is a deficiency of microelements in the daily diet.

The patients' questionnaire noted the presence of milk, dairy products, suzma, cheese, etc. From meat and meat products: beef, lamb, chicken.

Vegetables: potatoes, carrots, beets, tomatoes; from fruits: apples, grapes, pomegranates, pears, persimmons, figs, peaches, citrus fruits; from grain products: bread, flour, peas, rice. The nutrition of women and men was studied separately. In general, the consumption of milk and dairy products averaged 300 ml, for women 250 ml, for men 200 ml. When comparing the results with hygienic standards, it was determined that their number was 2 times lower than hygienic standards. The amount of eggs in the daily diet is on average 12.6 g, of which for women it is 0.65 (9.3 g), for boys 16 g (1 piece), suzma 10-15 g, cheese 10-20 g. Analysis of meat and meat products consumed per day on average: 78 grams of beef, 77 grams for men, and 80 grams for women. Comparison of the results obtained with hygienic standards (176 g) is 2.2 lower than hygienic standards.

Analysis of grain and grain products consumed per day on average: bread for women 74 g, for men 94 g on average 84 g, rice in the average daily diet is 64 g of which for men 95 g, for women 33 g, peas 10- 15 gr, wheat flour 250-300 gr. The total amount of grain and grain products is 500-1400 g. A comparison of the results obtained with hygienic standards showed that grain products are 1.2 times higher than the norm. Analysis of vegetables and fruits consumed per day: potatoes 83.5 g, of which 72 g for women, and 95 g for men, carrots on average 46 g, of which 44 g for men, 48 g for women, cucumbers 10-11 gr., turnip 1 gr., tomato 20-30 gr., onion 0.10-0.15 gr., greens 1-5 gr. The total amount of vegetables and fruits is

190.5 grams. A comparison of the results obtained with hygienic standards showed 1.5-2 times lower.

Conclusions:

1. In the daily diet of patients with chronic hepatitis, the main protein foods, such as dairy products, meat, fish and chicken, are 10-25%, vitamin C, iron and PUFAs are 20-35% below the hygienic norm.
2. The value of basal metabolism is 1565 kcal for men, 1450 kcal for women, specific dynamic effects of food is 150.7 kcal, the total energy value is 2347.5 kcal for men, 2171.0 kcal for women.
3. It is necessary to carry out a dietary correction of the daily diet, additionally enriching it with proteins, amino acids such as lysine, monounsaturated fatty acids, in particular linolenic and arachidonic acid. It is proposed to enrich the diet with meat, liver, fish, dairy products and vegetables and fruits.
4. Strictly follow the ideal nutritional formula of 1:1:4 daily diet. Follow a 4-fold diet and diversify the range of daily diet, increase pectin substances by 5-10%.
5. It is suggested to take herbal teas with choleretic and hepatoprotective effects, juices of rose hips, dried apricots and other medicinal herbs.

Литература

1. В.А. Тутельян, чл.-корр. РАМН, профессор М.Г. Гаппаров, профессор А.В. Погожева и др, Методическое письмо. «Способ определения пищевого статуса больных и методы его коррекции специализированными продуктами лечебного питания в условиях стационарного и санаторно-курортного лечения»./Санкт-Ретербург,2004 год/.
2. Маевская М.В., Ивашкин В.Т. Печень и питание. Оптимальная диета при неалкогольной жировой болезни печени. Российский журнал гастроэнтерологии, гепатологии, колопроктологии. 2018;28(5):105-116
3. Маевская М.В., Маевский Р.М. Еда как образ жизни. Рос журн гастроэнтерол гепатол колопроктол 2016;26(5):104–15 [Mayevskaya M.V., Mayevsky R.M. Food as a lifestyle Rus J Gastroenterol Hepatol Colproctol. 2016;26(5):104–15 (In Rus.)].
4. Lu W., Li S., Li J., et al. Effects of omega-3 fatty acid in nonalcoholic fatty liver disease: a meta-analysis. Gastroenterol Res Pract. 2016;2016:1459790.
5. ПАТТАХОВА, М., & МУТАЛОВ, С. (2022). *Жигарнинг дори-дармонлар таъсирида зарарланиши* (Doctoral dissertation, Узбекистан, Ташкент).
6. Салаева, Д. Т., Зуфаров, П. С., & Якубов, А. В. (2008). Сравнительная оценка влияния ингибиторов протонной помпы на некоторые механизмы цитозащиты при экспериментальной гастропатии. *Современные наукоемкие технологии*, (3), 63-63.
7. Зокирхужаев, Ш. Я., Рустамова, М. Т., Паттахова, М. Х., Нарзиев, Н. М., Жалолов, Н. Н., & Муталов, С. Б. (2023). Коронавирус инфекцияси ва жигар зарарланиши.
8. Зокирхўжаев, Ш. Я., Рустамова, М. Т., Паттахова, М. Х., Жалолов, Н. Н., & Муталов, С. Б. (2023). Сурункали жигар касалликларида соғлом овқатланишнинг аҳамияти.
9. Паттахова, М. Х., & Муталов, С. Б. (2022). Хронические заболевания печени и особенности гуморальных факторов.
10. Якубов, А. В., & Паттахова, М. Х. (2009). Влияние компонентов и некоторых схем противоязвенной терапии на регенераторные процессы в слизистой ткани желудка при экспериментальной язве. *Фундаментальные исследования*, (7), 57-61.
11. Паттахова, М. Х., Якубов, А. В., & Саидова, Ш. А. (2008). Эффективность некоторых производных нитроимидазола на ферментативные механизмы цитозащиты в слизистой желудка при экспериментальной язве. *Современные наукоемкие технологии*, (3), 61-61.

12. Зокирхўжаев, Ш. Я., & Паттахова, М. Х. (2022). Clinical Features and Lab Values of Patients with Chronic Hepatitis after Covid-19.
13. Закирходжаев, Ш. Я., & Паттахова, М. Х. (2023). Анализ рациона питания больных при заболеваниях печени после перенесенного Covid-19.
14. Закирходжаев, Ш. Я., & Паттахова, М. Х. (2023). Коррекция диетического питания пациентов с заболеваниями печени после перенесенного Covid-19 с применением местных продуктов.
15. Зокирхужаев, Ш. Я., & Толибжонова, М. Х. (2024). Оценка питания пациентов с хроническими заболеваниями печени и их диетическая коррекция.
16. Зокирхўжаев, Ш. Я., Паттахова, М. Х., & Муталов, С. Б. (2024). Талабалар билан ўқув машғулотларини ўтказишда суҳбат кўринишидаги маъруза усулидан фойдаланиш.
17. Паттахова, М. (2021). Изучение пищевого статуса пациентов с хроническими заболеваниями печени.
18. Зокирхужаев, Ш. Я., & Толибжонова, М. Х. (2024). Изучение пищевого статуса пациентов с хроническими гепатитами.
19. Jalolov, N. N., Imamova, A. O., & Sultonov, E. Y. (2023). Proper nutrition of athletes, martial arts.
20. Jalolov, N., & Solihov, M. (2017). Сурункали жигар касалликларида хаққоний овқатланиш холатини ўрганиш.
21. Jalolov, N., & Parpiboeva, D. A. (2017). Лечебное питание при хронических заболеваниях печени.
22. Yaxyaevich, Z. S., Nodir o'g'li, J. N., Kuralbayevna, S. M., Andreevna, N. O., & Mamanovna, A. A. (2024). Nutritional Needs in Chronic Liver Disease. *Genius Repository*, *28*, 8-13.
23. Зокирхужаев, Ш. Я., Рустамова, М. Т., Паттахова, М. Х., Нарзиев, Н. М., Жалолов, Н. Н., & Муталов, С. Б. (2023). Коронавирус инфекцияси ва жигар зарарланиши.
24. Зокирхўжаев, Ш. Я., Рустамова, М. Т., Паттахова, М. Х., Жалолов, Н. Н., & Муталов, С. Б. (2023). Сурункали жигар касалликларида соғлом овқатланишнинг аҳамияти.
25. Закирходжаев, Ш. Я., & Паттахова, М. Х. (2023). Коррекция диетического питания пациентов с заболеваниями печени после перенесенного Covid-19 с применением местных продуктов.
26. Закирходжаев, Ш. Я., & Паттахова, М. Х. (2023). Изучение питания пациентов при заболеваниях печени послеперенесенного COVID-19.
27. Закирходжаев, Ш. Я., & Паттахова, М. Х. (2023). Жигар касалликларида нутритив статусни аниқлашнинг аҳамияти.
28. Рустамова, М. Т., Зокирхўжаев, Ш. Я., Паттахова, М. Х., Жалолов, Н. Н., & Муталов, С. Б. (2023). Сурункали касалликлари мавжуд беморларда covid–19 кечиши.