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FATTY LIVER DISEASE OF VARIOUS ETIOLOGIES

Resume. Due to significant alcohol consumption in Russia, an increase in the prevalence of obesity, insulin resistance and metabolic syndrome, there is an increase in chronic liver diseases. In alcoholic illness, there are several variants of damage to the liver parenchyma caused by systematic alcohol consumption: steatosis, alcoholic hepatitis (AH) and cirrhosis of the liver.

Thus, the data of previous studies are contradictory and indicate the feasibility of studying psychovegetative features in patients with fatty liver dystrophy of various etiologies. The number of comparative studies of alcoholic and non-alcoholic steatohepatitis by clinical parameters is rare, especially in the Russian literature.

Key words: chronic liver diseases, steatosis, alcoholic hepatitis, biochemical studies, steatohepatitis.

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ЖИРОВАЯ БОЛЕЗНЬ ПЕЧЕНИ РАЗЛИЧНОЙ ЭТИОЛОГИИ

Резюме. В связи со значительным употреблением алкоголя в России, увеличением распространенности ожирения, инсулинореэистентности и метаболического синдрома наблюдается рост хронических заболеваний печени. При алкогольной болезни встречается несколько вариантов повреждения паренхимы печени, вызванного систематическим употреблением алкоголя: стеатоз, алкогольный гепатит (АСГ) и цирроз печени.

Таким образом, данные предыдущих исследований противоречивы и свидетельствуют о целесообразности изучения психовегетативных особенностей у пациентов с жировой дистрофией печени различной этиологии. Количество сравнительных работ, изучающих алкогольные и неалкогольные стеатогепатиты по клиническим параметрам единичны, особенно в отечественной литературе.

Ключевые слова: хронических заболеваний печени, стеатоз, алкогольный гепатит, биохимических исследований, стеатогепатита.

Relevance of the research topic. Due to significant alcohol consumption in Russia, an increase in the prevalence of obesity, insulin resistance and metabolic syndrome, there is an increase in chronic liver diseases. In alcoholic illness, there are several variants of damage to the liver parenchyma caused by systematic alcohol consumption: steatosis, alcoholic hepatitis (AH) and cirrhosis of the liver. Several main factors predispose to the development of alcohol disease: the amount of alcohol

consumed, nutritional status, genetic polymorphism of enzymes involved in the metabolism of alcohol, and gender. Among hospitalized patients with alcoholic liver disease, the frequency of alcoholic hepatitis is from 10 to 30 % according to the results of histological studies.

Thus, the data of previous studies are contradictory and indicate the feasibility of studying psychovegetative features in patients with fatty liver dystrophy of various etiologies. The number of comparative studies of alcoholic and non-alcoholic steatohepatitis by clinical parameters is rare, especially in the Russian literature. In connection with the above, a comprehensive comparative study of steatohepatitis of various etiologies is very relevant.

The purpose of the study. To study and evaluate the relationship between the clinical picture, vegetative status, psychological characteristics and quality of life indicators in patients with steatohepatitis of alcoholic and non-alcoholic etiology.

Material and methods of research. Patients with steatohepatitis (based on the results of ultrasound and biochemical studies) were divided into 2 groups, depending on the amount of alcohol consumed. Men who consumed more than 40 g and women who consumed more than 20 g of pure ethanol per day were assigned to the group of alcoholic steatohepatitis (59 people). Group 2 of non-alcoholic steatohepatitis - patients who do not abuse alcohol (61 people). The study included 30 people (control group) of similar age and gender, without signs of liver damage, in the absence of possible etiological factors of liver damage. All patients underwent clinical, biochemical, immunological methods of research, ultrasound, FGDS, analysis of heart rate variability (HRV). The study also used psychological tests (the Heck-Hess scale for assessing neurosis, the Spielberger Personal Anxiety scale, the Eysenck test questionnaire, the SMALL profile, the Giessen Questionnaire for Somatic Complaints) and the Quality of Life questionnaire (the Nottingham Health Profile (NHS)).

The results of the study and their discussion. Clinical studies When collecting complaints and objective examination of patients revealed syndromes of autonomic disorders, pain and dyspepsia. Manifestations of asthenovegetative syndrome in patients with steatohepatitis were expressed in weakness, fatigue in the group of NASH - 52.46 %, AH - 50.85 %; decreased ability to work in the group of NASH - 39.24 %, AH - 25.42 %; sleep disorders of NASH - 88.52 %, AH - 100 %; decreased memory - NASH - 19.67 %, AH - 37.29 %; heart attacks of NASH - 59.01 %, AH - 61.02 %; alternation of constipation and diarrhea in the group of NASG - 29.51 %, AH-64.40 %. Epigastric pain (in the NASH group - 55.74.7 %, and ASG - 33.9 %) and dyspeptic complaints (in the NASH group - 59.02% and AH - 37.29 %) prevailed in the NASH group. Endoscopic changes in the form of erosive gastritis were more common in patients with AH-61.02 %, NAST-14.75 %, and changes characteristic of gastroesophageal reflux disease in the AH group - in 67.78% and NASH-in 68.85 %. Pain and discomfort in the right hypochondrium were observed in the NASH group - 62.3 %, AH-15.25 %, the presence of gallstone liver disease at the stage of concretions or biliary sludge was more common in the NASH group-62.30 %, compared with the AH group - 8.47 % ($p<0.05$). According to the biochemical parameters, differences in the syndromes of cholestasis and cytolysis were obtained in all 3 groups ($p<0.05$). Moreover, the De Rigis coefficient (AST/ALT ratio) in the group with AH was 1.46; and in the group with NASH - 0.77.

Conclusion.

1. Steatohepatitis of alcoholic etiology has a more severe course of cytolysis and cholestaea than steatohepatitis of non-alcoholic etiology, and is also combined with more pronounced damage to the mucous membrane of the upper gastrointestinal tract ($p<0.05$). At the same time, patients with steatohepatitis of alcoholic etiology, in contrast to patients with steatohepatitis of non-alcoholic etiology, to a lesser extent present complaints of a vegetative and dyspeptic nature.

2. In patients with steatohepatitis various etiologies were abuses at all levels of autonomic regulation - decrease in parasympathetic tone and reactivity, motorelectric and baroreflexes mechanisms, the weakening of the activity of the subcortical nerve centers, and reduced humoral regulation, a shift in autonomic homeostasis in the prevalence of the sympathetic nervous system. Adaptive disorders in steatohepatitis of alcoholic etiology are more pronounced than in steatohepatitis of non-alcoholic etiology.

3. In the group with AH, the influence of the sympathetic nervous system significantly prevails in the initial vegetative tone, and the vegetative reactivity is distributed by hypersympathicotonic (50.9 %) and by asympathicotonic types (44.1 %). In the group with NASH', vegetative reactivity is distributed in three directions: hypersympathicotonia (37.7 %), asympathicotonia (31.2%) and normotonia (31.1%) in approximately equal proportions.

References

1. Alazhil L., Yar M. Diseases of the liver and biliary tract in children: Translated from French-M.: Medicine, 2012.

2. Bluger A. F., Novitsky I. N. Practical hepatology. - Riga: Zvaigzne, 2004. - pp. 255-267.

3. Bogomolov P. O., Shulpekova Yu. O. Non-alcoholic fatty liver disease: steatosis and non-alcoholic steatohepatitis. gastroenterol., hepa-tol. - 2004. - No. 3. - p. 20-27.

4. Vetshev P. S. Cholelithiasis and cholecystitis / / Klin, perspective. gastroenterol., hepatol. - 2005. - No. 1. - pp. 16-24.

5. Ivashkin V. T., Pavlov Ch. S., Lukina E. A., etc. Features of iron metabolism in patients with chronic viral hepatitis of various etiologies / / Ros. Sib. gastroenterol., hepatol., coloproctol.: Trudy IV ROS. of gastroenterology. weeks, 2018. - Vol. 8, no. 5. - p. 167.

6. Lebedev V. M., Gubsky L. V. Hepatic encephalopathy in the surgical treatment of patients with portal hypertension / / Klin. med. -2014. -№ 2 (73). -Pp. 37-39.
7. Levina A. A., Tsibulskaya M. M., Tsiba N. N., etc. Dynamics of iron metabolism in patients with hereditary hemochromatosis before and after treatment / / The wedge. diagnostics. - 1998. - No. 8. - S. 31.
8. Mayevskaya M. V., buyeverov A. O. Old and new approaches to the treatment of alcoholic liver disease // ROS. Sib. of gastroenterology., gepatol., koloproktol. - 2003. - No. 6. - P. 65-68.
9. Buyeverov A. O. // ROS.med.Sib. 2003. Volume. 5. no. 1. p. 32.
10. Damulin I. V. / / Russian Medical Journal. 2005. no. 2. p. 44.
11. Tsitnik K. A. Suchasnagasstraenterologiya No. 2 (82) • 2015 P. 124-135
12. Chazov E. I. Ischemic heart disease and the possibility of improving the effectiveness of its treatment. Forum. Ischaemic heart disease 2000; No. 1: pp. 2-5.
13. Gayrabekova F. R. Dynamics of troponin T content in blood serum in patients with ischaemic heart disease before and after coronary artery stenting/ F. R. Gayrabekova, M. A. Chichkova // Modern high-tech technologies. - 2012. - No. 5. - p. 5-7.
14. Gayrabekova F. R. Dynamics of acute phase response as a diagnostic marker of the syndrome of "small myocardial injuries" before and after stenting of coronary arteries / F. R. Gayrabekova, Yu. M. Chichkov / / Cardiovascular diseases. -2013. - Volume 14. - No. 6. - p. 283.
15. Atherosclerosis. Secondary prevention of atherothrombosis after surgical treatment of CHD. Educational and methodical manual / M. A. Chichkova, F. R. Gayrabekova, V. N. Meshcheryakov, E. A. Belova. - Astrakhan: Publishing House "Astrakhan State Medical Academy", 2012. - 216s.
16. Akarasereenont P., Nuamchit T., Thaworn A. et al. The level of nitric oxide in the blood serum of patients with coronary heart disease. Assoc. Thai. 2001; 84 (suppl. 3): S730 – S739.

17. Chazov E. I. The problem of treatment of patients with ischemic heart disease. Therapeutic archive 2009: No. 9: pp. 5-9.
18. Metelitsa VI New in the treatment of chronic ischemic heart disease., M., 1999, p. 209