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LYMPHOTROPIC THERAPY OF PATIENTS WITH OPEN-ANGLE GLAUCOMA

Resume: The preservation of visual functions in primary open-angle glaucoma remains one of the most pressing problems in modern ophthalmology.

Despite the development of many methods of treating glaucoma, vision loss and even blindness from glaucoma are not uncommon. Over the past 3 decades, the frequency of blindness from glaucoma in our country and other developed countries has been steadily maintained at the level of 15% of the total number of all blind people

At the moment, more attention is being paid to a direct-acting neuroprotective drug that directly affects retinal neurons and optic nerve fibers by blocking the main factors of cell damage caused by ischemia.

Key words: lymphotropic therapy, open-angle glaucoma, eye diseases.

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ЛИМФОТРОПНАЯ ТЕРАПИЯ БОЛЬНЫХ ОТКРЫТОУГОЛЬНОЙ ГЛАУКОМОЙ

Резюме: Сохранение зрительных функций при первичной открытоуголыюй глаукоме остается одной из наиболее актуальных проблем в современной офтальмологии.

Несмотря на разработку множества методов лечения глаукомы, снижение зрения и даже слепота от глаукомы встречаются нередко. За последние 3 десятилетия частота слепоты от глаукомы в нашей стране и

других развитых странах устойчиво держится на уровне 15% от общего количества всех незрячих

В настоящий момент более пристальное внимание обращено к нейропротекторным препаратам прямого действия, непосредственно влияющим на нейроны сетчатки и волокна зрительного нерва путем блокирования основных факторов повреждения клеток, обусловленных ишемией.

Ключевые слова: лимфотропная терапия, открыто-угольная глаукома, глазные болезни.

Relevance. Diseases of the posterior part of the eye are ophthalmological pathology, which occupies a leading place among the causes of blindness and low vision[3,6]. It is necessary to choose the tactics of drug treatment in a timely and correct manner[7].

A method of treating dystrophic diseases of the posterior part of the eye has long been known, in which medicinal substances are injected into the space between the orbit and the tissues of the eye (parabulbarno)[2,4].

However, this method has a number of significant drawbacks: long treatment periods, the risk of eye tissue damage and penetrating eye injury with an injection needle, low absorption rate of the drug from the parabulbar space, a sufficiently long (suboptimal) route of drug delivery to the lesion, the inability to create a favorable concentration of the drug in the lesion, a large one-time daily course dose, a large volume and concentration of the injected substance [1,5].

The purpose of the study. To study the effectiveness of lymphotropic regional therapy in patients with glaucoma optic neuropathy (GON), at different stages of the glaucoma process.

Material and methods of research. Lymphotropic therapy was used in the treatment of 32 patients (58 eyes) with glaucoma optic neuropathy, at

different stages of the glaucoma process: initial glaucoma – 8 patients (16 eyes), advanced glaucoma - 14 patients (24 eyes), distant glaucoma - 10 patients (18 eyes). All patients had narrowing of the visual fields, decreased visual acuity, changes in the structure of the optic nerve disc (decrease in the thickness of the nerve fiber layer, expansion of the excavation of the optic nerve disc) according to optical coherence tomography (OCT). Intraocular pressure was medically compensated in all patients.

The results of the study. Analysis of peripheral vision after lymphotropic therapy revealed in patients of the main group a significant increase in the total field of vision by 59.43 ± 6.72° in 87.34% of patients. The expansion of peripheral vision boundaries was observed in the control group by a smaller amount (35.01 ± 5.35°) and in a smaller number of patients (70.25%, $p < 0.05$). In all four subgroups, the advantage of improving the visual field was retained by lymphotropic administration of drugs.

According to the effect on the vascular bed of the bulbar conjunctiva, the results in the main and control groups were approximately the same. Dilation of initially narrowed arterioles of the conjunctiva of the sclera after lymphotropic therapy was noted in 18.18% of eyes, in the control - in 17.80% of eyes (Fig. 4). An increase in the caliber of narrowed arteries on the optic nerve disc was determined in patients of the main group in 27.03% of cases, which was 2.14 times more common than in

Results of lymphotropic therapy in the mastoid process with heparin and emoxypine in patients with open-angle glaucoma with normalized IOP

Patients of the main group II after treatment determined the increase of visual acuity at 0,14 ± 0,01 have 83,05% of eyes in the control group - 0,04 ± 0,02 have of 33.00% of eyes ($p < 0.05$)

Studies found that after lymphotropic therapy in the mastoid region, the total field of view increased by 65,91 ± 4,45° from 88,06% of patients in control by 19.81 ± 4,87° from 60,00% of patients ($p < 0.001$).

When analyzing peripheral vision by stages of glaucoma, it was revealed that the effect of lymphotropic therapy on patients with stage II of the disease is more significant (improvement by 78.10 ± 6.87 ° in 94.90%) than on patients with stage III (improvement by 74.47 ± 3.17 ° in 80.49%). In the control, the indicator of the total field of vision increased in patients with stage II glaucoma by 24.24 ± 3.13° in 60.70%, with stage W - by 28.71 ± 5.13 ° in 65.52%.

Thus, the results of lymphotropic therapy in the mastoid process compared with the control demonstrated a qualitatively new level of treatment for the restoration of both peripheral and central vision not only in patients with advanced stage of glaucoma, but also with residual visual functions.

After lymphotropic treatment in patients with the initial stage of glaucoma, there was an increase in visual acuity by 0.1-0.2, a decrease in the number of relative cattle by 26%, the stability of the thickness of the nerve fiber layer and the excavation of the optic nerve disk was noted.

After lymphotropic treatment in patients with advanced stage of glaucoma, there was an increase in visual acuity by an average of 0.2, a decrease in the number of absolute cattle by 7% and relative cattle by 21%, stability of the thickness of the nerve fiber layer and the excavation of the optic nerve disc.

After lymphotropic treatment in patients with advanced stage of glaucoma, there was an increase in visual acuity by 0.2-0.3, a decrease in the number of absolute cattle by 3% and relative cattle by 16%, an increase in the thickness of the nerve fiber layer by 10% and a decrease in the excavation of the optic nerve disk by 5% were noted in 2 eyes.

Conclusion. The positive effect of lymphotropic therapy on visual functions in patients with glaucoma optic neuropathy has been clinically confirmed. With regular courses of treatment (2-3 courses per year), stable intraocular pressure in patients with GON is observed in 98.4% of cases, an increase in visual acuity is observed in 68.3% of cases, stability of the visual

fields in 81.5% of cases, a stable picture of DNZ according to OCT is observed in 67.7% of cases.

The use of lymphotropic therapy makes it possible to improve trophism and microcirculation in the vessels of the optic nerve, reduces the severity of pathological reactions caused by an etiological factor, the therapeutic concentration of the medicinal substance is rapidly achieved, the trauma risk of manipulation decreases, the volumes and concentrations of injected substances decrease.

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