

Bu esa chandiqlanishni kamaytirib, yumshoq tanglay harakatining erkinligini va nutqning aniqligini ta'minladi. 67 bemordan 39% (26 nafar) ovqatlanish va so'zlashishda ijobiy o'zgarishlar sezgan, 17% (11 nafar) da esa ora-nazal fistula to'liq bartaraf etilgan.

Xulosa

Mahalliy to'qimalar va buccal fat pad asosidagi oyoqchali loskutlar yordamida amalga oshirilgan jarrohlik usuli tug'ma tanglay yoriği va ora-nazal fistulani bartaraf etishda samarali deb topildi. Bu yondashuv nafaqat nutq va ovqatlanishni yaxshilaydi, balki bolalarning ruhiy holatiga ham ijobiy ta'sir ko'rsatadi.

A Novel Surgical Approach to the Repair of Hard and Soft Palatal Clefts and Oronasal Fistula in Children

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Keywords: palatal cleft, oronasal fistula, surgery, flap reconstruction, congenital defects, buccal fat pad, pediatric patients

Abstract:

This study proposes a new surgical technique for the repair of congenital hard and soft palatal clefts and oronasal fistulas in children. The procedure involves the use of local tissues and a pedicled flap from the buccal fat pad to reconstruct the oral defect. In a study of 67 pediatric patients, postoperative outcomes showed significant improvement in feeding, speech clarity, and psychological well-being. The technique prevented secondary scarring, preserved palatal mobility, and eliminated the oronasal communication in 17% of cases. This innovative approach proved to be effective both medically and socially in improving the lives of children with congenital craniofacial anomalies.

BOLALARDA UCHRAYDIGAN BRONXOOBSTRUKTIV SINDROMNI INTENSIV TERAPIYASIDA INGALYASION TERAPIYANING AHAMIYATI

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Kalit so'zlar: bronxoobstruktiv sindrom, bolalar, ingalyasion terapiya, reanimatsiya, nafas yetishmovchiligi, gipoksiya

Dolzarbliği Bronxoobstruktiv sindrom (BOS) bolalarda o'tkir nafas yo'llari kasalliklarining umumiy klinik belgisi sifatida namoyon bo'lib, bronxlarning yallig'lanishi, shish va ko'p miqdorda balg'am to'planishi bilan kechadi. Bu holat

o'tkir nafas yetishmovchiligi va gipoksiyaga olib keladi. BOS ayniqsa 3 yoshgacha bo'lgan bolalarda ko'p uchraydi, bu esa organizmning anatomik va fiziologik xususiyatlari bilan bog'liq. Uy sharoitida noto'g'ri davolash va shifokor tavsiyalarisiz dori vositalarini qabul qilish holatni yanada og'irlashtiradi.

Maqsad Bolalarda uchraydigan bronxoobstruktiv sindromni intensiv terapiyasida davolash usullarini takomillashtirish hamda ingalyasion terapiyaning klinik samaradorligini baholash.

Materiallar va usullar 2024 yil qish mavsumida Samarqand viloyat ko'p tarmoqli bolalar tibbiy markazining reanimatsiya va intensiv terapiya bo'limida BOS tashxisi bilan davolangan 52 nafar bola tahlil qilindi. Bemorlarning o'rtacha yoshi 0,2–4 yosh bo'lib, ular 2 guruhga ajratildi:

- 1-guruhga (28 nafar bemor) faqat an'anaviy davolash usullari qo'llanildi;
- 2-guruhga (24 nafar bemor) esa an'anaviy davolashga qo'shimcha tarzda ingalyasion terapiya (Pulmikort 0,25 mg + 2,0 ml 0,9% natriy xlor) «Ulaizer HOME» CH-02MY apparati yordamida qo'llanildi.

Barcha bemorlar kasallikning 2–3-kunida murojaat qilgan bo'lib, oldin uyda shifokor nazoratisiz siroplar va tabletkalar qabul qilgan. BOS belgilariga burun oqishi, yo'tal, hansirash, intoksikatsiya, taxikardiya va dispepsiya alomatlari kirgan. Hemodinamik ko'rsatkichlar davolashdan oldin va keyin «UM-300 Patient Monitor» orqali nazorat qilindi.

Natijalar 1-guruh bemorlarida BOS belgilarining pasayishi 3-kun atrofida kuzatildi, Ps 16–21%, NS 18–20%, sPO₂ 91–93% bo'ldi.

2-guruhda esa BOS belgilarining 86% kamaygani, Ps 24–25%, NS 20–22%, sPO₂ 94–96% gacha ko'tarilgani aniqlandi. Dispepsiya, bezovtalik va hansirashlar ancha kamaydi. Bemorlar uyqusining yaxshilangani kuzatildi. BOS belgilarining ijobiy o'zgarishi 1-guruhda o'rtacha $3,7 \pm 1,4$ kunda, 2-guruhda esa $2,7 \pm 0,6$ kunda qayd etildi.

Xulosa Tadqiqot natijalariga ko'ra, bolalarda bronxoobstruktiv sindromni davolashda an'anaviy muolajalar bilan birga ingalyasion terapiya qo'llanilishi samaradorlikni oshiradi. Bu bemorlarning umumiy holatini yaxshilaydi, nafas va yurak yetishmovchiligi belgilarini tezroq bartaraf etadi va reanimatsiya bo'limida yotish muddatini qisqartiradi.

The Role of Inhalation Therapy in the Intensive Treatment of Broncho-Obstructive Syndrome in Children

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broncho-obstructive syndrome, children, inhalation therapy, intensive care, respiratory failure, hypoxia

Abstract:

Broncho-obstructive syndrome (BOS) is a common clinical manifestation in pediatric patients characterized by bronchial inflammation, swelling, and excessive mucus production, often leading to acute respiratory failure and hypoxia. This study evaluates the effectiveness of inhalation therapy in the intensive treatment of BOS. A total of 52 children aged 0.2 to 4 years hospitalized during the winter season of 2024 were included. They were divided into two groups: the first (n=28) received standard treatment, while the second (n=24) additionally received inhalation therapy using Pulmicort (0.25 mg) and 0.9% sodium chloride via the "Ulaizer HOME" nebulizer. Clinical monitoring showed that the group receiving inhalation therapy had faster improvement in respiratory parameters, reduced hospital stay, and earlier resolution of symptoms such as shortness of breath, restlessness, and digestive discomfort. Oxygen saturation increased to 94–96%, and BOS symptoms improved by an average of 2.7 ± 0.6 days compared to 3.7 ± 1.4 days in the control group. These findings support the use of inhalation therapy as an effective adjunct to conventional treatment in pediatric intensive care settings for BOS.

YUZ-JAG‘ JARROHLIK AMALIYOTIDA NAFAS YO‘LLARI O‘TKAZUVCHANLIGINI TA‘MINLASH CHORA-TADBIRLARI

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Kalit so‘zlar: nafas yo‘llari, qiyin intubatsiya, retrograd intubatsiya, yuz-jag‘ jarrohligi, bolalar, anesteziya, traxeostomiya

Dolzarbli Bolalar jarrohlik amaliyotida nafas yo‘llari o‘tkazuvchanligini ta‘minlash muhim klinik jihatlardan biridir. Yuz-jag‘ sohasi bilan bog‘liq operatsiyalarda traxeal intubatsiya muammoli bo‘lishi mumkin va qiyin intubatsiya holati 4–18% holatlarda kuzatiladi. Bunday vaziyatlarda an‘anaviy usullarga muqobil sifatida retrograd intubatsiya usuli tavsiya etiladi.

Maqsad Yuz-jag‘ jarrohlik amaliyotida nafas yo‘llari o‘tkazuvchanligini ta‘minlashda retrograd intubatsiyaning samaradorligini baholash.

Material va usullar Samarqand viloyat ko‘p tarmoqli bolalar tibbiy markazi yuz-jag‘ jarrohlik bo‘limida 2019–2024 yillar davomida jag‘ ankilozi tashxisi bilan 16 nafar bola (9 nafar o‘g‘il, 7 nafar qiz, o‘rtacha yosh: $6,2 \pm 0,8$) operatsiya qilindi. Bemorlarning qiyin intubatsiya darajasi Mallampati testi bo‘yicha 4-darajada, ASA xavf darajasi 3-darajada baholandi. Barcha bemorlarga retrograd intubatsiya usuli qo‘llandi. Ushbu texnikada Tuohy ignasi yordamida traxeaga epidural kateter