PEDIATRIK BEMORDA SIYDIK NAYI UZUNLIGINI LAPAROSKOPIK USULDA CHUVALCHANGSIMON O'SIMTA (APPENDIKS) BILAN UZAYTIRISH

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Kalit so'zlar: siydik nayi, appendiks, laparoskopiya, rekonstruktiv jarrohlik, pediatriya

MaqsadPediatrik bemorlarda siydik nayi nuqsonlarini operativ davolash, ayniqsa, qaytalangan obstruksiya va siydik nayi uzunligining yetishmovchiligi mavjud bo'lgan hollarda o'ziga xos qiyinchilik tug'diradi. Ushbu tadqiqotda chuvalchangsimon o'simta (appendiks) yordamida siydik nayi rekonstruksiyasi amalga oshirilgan hamda ushbu usulning samaradorligi va qo'llash imkoniyati ko'rsatib berildi.

Material va usullar 2 yoshli qiz bola avval muvaffaqiyatsiz o'ng tomonlama ochiq usulda piyeloplastika amaliyoti o'tkazgan bo'lib, shundan so'ng obstruksiyasi qaytalanishi hisobiga nefrostomiya va stentlash amaliyotlari bajarilgan, ammo obstruktsiya barham topmagan. Rejalashtirilgan qayta amaliyot oldidan laborator tekshiruvlar me'yorida edi, shuningdek, buyraklar ssintigrafiya natijalari o'ng buyrakda obstruktiv egri chiziqni ko'rsatgan, ammo buyrak funksiyasi normal ekanligi aniqlangan. Operatsiyadan oldingi dastlabki reja laparaskopik qayta piyeloplastika bajarish edi, biroq operatsiya davomida o'ng yuqori siydik nayining qisqaligi aniqlandi. Shu sababli, appendiks siydik nayi rekonstruksiyasi (uzaytirish) uchun muqobil material sifatida ishlatildi va siydik nayi nuqsoni bartaraf etildi.

Natijalar Laparaskopik amaliyot muvaffaqiyatli va asoratlarsiz yakunlandi. Operatsiyadan keyingi tiklanish jarayoni muammosiz o'tdi. Ultratovush tekshiruvida kosacha-jomning kengayish belgilari kuzatilmadi, shuningdek, diagnostik ureteroskopiya anastomoz sohasining normal diametrda ekanligini tasdiqladi. Operatsiya davomiyligi – 535 daqiqani tashkil etdi. Siydik nayi stenti operatsiyadan 6 hafta o'tib olib tashlandi, shundan bir hafta o'tib nefrostoma naychasi ham olindi.

Xulosa Appendiks yordamida siydik nayini tiklash – pediatrik bemorlarda uzun siydik nayi nuqsonlarini bartaraf етиш учун samarali va amaliy usuldir, ayniqsa, an'anaviy yondashuvlar qo'llash mumkin bo'lmagan holatlarda. Ushbu holat laparaskopik yondashuvning rekonstruktiv jarrohlik bilan uyg'unligi ijobiy natijalar

berishini ko‘rsatadi. Ushbu yondashuvning uzoq muddatli muvaffaqiyat darajasi va takrorlanish imkoniyatlarini baholash uchun qo‘shimcha tadqiqotlar talab etiladi.

Laparoscopic Ureteral Lengthening Using the Vermiform Appendix in a Pediatric Patient

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Abstract: Surgical correction of ureteral defects in pediatric patients presents challenges, especially in cases with recurrent obstruction and ureteral shortening. This case describes a 2-year-old girl who had a history of failed open pyeloplasty and recurrent upper ureteral obstruction. Due to persistent narrowing, laparoscopic reintervention was planned. Intraoperatively, a short proximal ureter segment was identified, and the vermiform appendix was used as a substitute for ureteral lengthening.

The procedure was completed laparoscopically without complications. Postoperative recovery was uneventful. Follow-up imaging showed no signs of hydronephrosis, and ureteroscopy confirmed a patent anastomosis. The total operative time was 535 minutes. The ureteral stent was removed after 6 weeks, followed by nephrostomy tube removal one week later.

Conclusion: Use of the appendix for ureteral reconstruction in pediatric patients is a viable technique when conventional methods are not feasible. This case supports the compatibility of laparoscopic surgery with reconstructive approaches, although further studies are needed to assess long-term outcomes.

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