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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Keywords: ureteral reconstruction, appendix, laparoscopy, pediatric surgery, urinary tract

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.

12 YOSHLI O‘G‘IL BOLA BEMORDA IDIOPATIK XILURIYANING LAPAROSKOPIK DAVOSI

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Kalit so‘zlar: idiopatik xiluriya, limfa tomirlari, laparoskopiya, pediatriya, buyrak darvozasi
Maqsad Xiluriya – siydik tarkibida xilus (limfa suyuqligi) mavjudligi bilan tavsiflanadigan kam uchraydigan holat bo‘lib, unda siydik sutga o‘xshash yoki loyqa tus oladi. Endemik hududlarda xiluriyaning eng keng tarqalgan sababi parazitar infeksiyalar bo‘lsa-da, parazitlarga bog‘liq bo‘lmagan yoki idiopatik holatlar ham uchrashi mumkin. Ushbu maqolada uzoq muddatli idiopatik xiluriya bilan og‘rigan yosh bemor misolida laparoskopik yondashuvning samarali natijalari ko‘rsatib o‘tilgan.
Material va usullar 12 yoshli o‘g‘il bola bemor klinikamizga bir necha yildan beri davom etayotgan sutdek ko‘rinishga ega siydik ajratish shikoyati bilan murojaat qildi. Fizikal tekshiruvda hech qanday sezilarli anormallik aniqlanmadi, tanada limfadenopatiya yoki shish belgilari kuzatilmadi. Laborator tekshiruvlarda, shu jumladan *Wuchereria bancrofti* parazitini aniqlash sinovlari manfiy natija berdi, bu esa filariyal sababni istisno qildi. Operatsiya davomida diagnostik sistoskopiya o‘tkazilganda, chap ureteral teshikdan xilus chiqayotgani aniqlandi, bu chap tomonlama xiluriya tashxisini tasdiqladi. Shundan so‘ng, bemorga chap buyrak darvozasi limfa tomirlarini laparoskopik bog‘lash amaliyoti o‘tkazildi.
Natijalar Operatsiyadan keyingi qisqa davr ichida bemorda siydik rangi normal holatga qaytdi. Bemor operatsiyadan keyin muntazam ravishda kuzatildi. 6 oylik kuzatuv davomida xiluriya qayta takrorlanmadi, bemor hech qanday shikoyatlarsiz hayot sifatining sezilarli yaxshilanishini qayd etdi. Operatsiyadan keyingi davrda asoratlar kuzatilmadi.
Xulosa Idiopatik xiluriya kam uchrasa-da, hatto endemik bo‘lmagan hududlarda ham bolalarda sutdek ko‘rinishdagi siydik sabablari qatorida e’tiborga olinishi lozim. Ushbu holat shuni ko‘rsatadiki, laparoskopik buyrak darvozasi limfa tomirlarini bog‘lash usuli idiopatik xiluriyani davolash uchun xavfsiz va samarali usul bo‘lib, yaxshi natijalarga va bemor hayot sifati yaxshilanishiga olib kelishi mumkin.

Laparoscopic management of idiopathic chyluria in a 12-year-old male patient

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Keywords: idiopathic chyluria, lymphatic vessels, laparoscopy, pediatric urology, renal hilum
Abstract: Chyluria, a rare condition characterized by the presence of lymphatic fluid in the urine, results in a milky or cloudy appearance of the urine. While parasitic

infections are the most common cause in endemic regions, idiopathic, non-parasitic cases also occur. This report presents a 12-year-old male patient with long-standing idiopathic chyluria. Clinical evaluation showed no signs of lymphadenopathy or swelling, and parasitic testing, including for *Wuchereria bancrofti*, was negative. Diagnostic cystoscopy confirmed left-sided chyluria, and the patient underwent laparoscopic ligation of lymphatic vessels at the left renal hilum.
The postoperative period was uneventful, with normalization of urine color and no recurrence observed during 6 months of follow-up.
Conclusion: Although rare, idiopathic chyluria should be considered in children presenting with milky urine, even outside endemic areas. Laparoscopic ligation of renal lymphatics is a safe and effective treatment option that can significantly improve patient outcomes and quality of life.

1 YOSHGACHA BO'LGAN BOLALARDA SIYDIK-TOSH KASALLIGINI ENDOUROLOGIK YO'L BILAN DAVOLASH

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Kalit so'zlar: siydik-tosh kasalligi, endourologiya, PCNL, URS, yosh bolalar, nefrolitotripsiya

Maqsad 1 yoshga to'lmagan bemorlarda siydik-tosh kasalligini endourologik yo'l bilan davolash anatomik va fiziologik omillar sababli o'ziga xos qiyinchiliklarni keltirib chiqaradi. Ushbu tadqiqot bu yosh guruhidagi turli jarrohlik usullarining natijalarini baholashga qaratilgan.
Material va usullar 5 oylikdan 13 oylikkacha bo'lgan (o'rtacha 11 oy) 50 nafar pediatrik bemorlarning kasallik tarixi ma'lumotlari retrospektiv ravishda tahlil qilindi. Bemorlarning 33 nafari o'g'il, 17 nafari esa qiz bolalar edi. Tosh lokalizatsiyasi bo'yicha: chap tomonda – 22 holat; o'ng tomonda – 19 holat; ikki tomonlama – 6 holat; qovuq toshlari – 3 holatda aniqlangan. Oldindan stent qo'yish (prestenting) 15 nafar bemorda amalga oshirildi. Operatsiyadan keyingi drenaj usullari: nefrostomiya – 26 holat; nefrostomiya + stent – 9 holat; faqat stent – 8 holatda amalga oshirilgan. Bajarilgan jarrohlik amaliyotlari qatoriga: Perkutan nefrolitotripsiya (PCNL) – 38 holat; Ureterorenolitotripsiya (URS) – 7 holat; Perkutan sistolitotripsiya – 1 holat; Kombinatsiyalangan PCNL + URS – 1 holat;