

**Material and methods:** From August 2018 to August 2019, in our medical center 52 infant patients underwent tubuleless mini-PCNL with antegrade stent tether. All procedures performed by Storz MIP system 12F nephroscope, using 16F metallic sheath. Stone fragmentation was performed holmium laser and pneumatic lithotripter. All cases was finished with antegrade stent placement with proximal tether via percutaneous tract, which protected by a clear occlusive bandage. The prolene thread was sutured through the proximal lumen of stent and from inside to outside which contributed to the easy removal while minimizing damage to surrounding tissue with the tip of the stent.

**Results:** A total of 52 children - (42 male, 10 female), with a mean age 54,5 (17-75) months were included in this study. The mean size of the stones was 19.0 (15-24) mm. Renal stones were located in renal pelvis (n=34), lower pole (n=1), middle pole/upper pole {n=7). All intrarenal access was performed in the prone position under ultrasound and fluoroscopic guidance. Stone free rate was 98%. Mean operative time was 68.5 (45-92) min. Hospital stay time was 2-3 days in all cases. In all cases ureteral stent removed by tether via flank without anesthesia, in 40 (76%) cases in third day and in 12 (24%) cases in fifth day after surgery<sup>7</sup>. There was no incidence of bleeding and pain during stent removal.

**Conclusions:** Tubeless mini PCNL with stent tether is safe and effective technique for preschool children which avoids possibility of postoperative cystoscopy, anaesthesia, hospital stay and allows easy access to calyceal system for second look nephroscopy when it needs.

## TREATMENT OF PATIENTS WITH PROGRESSING PRIMARY GLAUCOMA WITH NORMALIZED INTERNAL EYE PRESSURE

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**Relevance.** Despite significant advances in microsurgical treatment of glaucoma, glaucomatous optic neuropathy (GON) continues to progress in more than half of patients. It is proved that the main pathogenetic factors of its development after normalization of IOP are hemomicrocirculation disorders and the associated violation of transcapillary exchange in the optic nerve. This causes damage to the axons of the ganglion cells, leading to their apoptosis and death. According to leading glaucomatologists, the pathogenetically targeted treatment is the use of medications with neuroprotective and antioxidant effects. In clinical medicine, in particular, in the treatment of ischemic brain conditions, the drug of complex action, Gliatilin, is widely used. Gliatilin - choline alfoscerate is a central cholinomimetic with a primary effect on the central nervous system.

The composition of the drug includes 40.5% of choline released from the compound in the brain; choline is involved in the biosynthesis of acetylcholine (one of the main mediators of nervous excitation). Alfoscerate is biotransformed to glycerophosphate, which is a precursor of phospholipids. Acetylcholine has a positive effect on the transmission of nerve impulses, and glycerophosphate is involved in the synthesis of phosphatidylcholine (membrane phospholipid), resulting in improved membrane elasticity and receptor function.

Gliatilin increases cerebral blood flow, enhances metabolic processes and activates the

structure of the reticular formation of the brain, and also restores consciousness in traumatic brain damage.

It has a preventive and corrective effect on factors of involutional psycho- organic syndrome, such as a change in the phospholipid composition of the membranes of neurons and a decrease in cholinergic activity.

The aim of the work was to study the feasibility and clinical effectiveness of the use of gliatilin in patients with unstable glaucoma with persistently normalized I OP.

**Materials and methods.** Under observation were **45** patients (**81** eyes) with an unstable course of POAG with persistently normalized I OP. Among them were 49 eyes with developed and 32 with advanced stages of glaucoma. The age of patients ranged from 51 to 73 years, and the level of IOP - from 18 to 23 mm Hg. Patients were divided into two groups, comparable in age, sex, stages of glaucoma, the level of **I OP**.

The first group included 17 patients (34 eyes). These patients underwent traditional treatment, including parabolbar injections of 0.5 ml of 1% solution of em oxipin, intravenous drip infusions of 50-100 mg of pentoxifylline, 250 mg of ascorbic acid and oral administration of lipoic acid 25 mg 3 times a day.

The second group consisted of 28 people (45 eyes). Patients of this group, instead of intravenous infusion of pentoxifylline and ascorbic acid, received intramuscular injections of 1000/4.0 Gliatilin per day and intravenous infusions of 200 mg of Actovegin. The duration of treatment in both groups was 10 days.

All patients underwent visometry and perimetry with the determination of the total boundaries of the field of view (CPS). We also studied the indicators of regional hemodynamics - the linear velocity of blood flow in the suprablock artery (LSC NBA); studied the level of microcirculation of the bulbar conjunctiva; ocular perfusion pressure (P perf.) was determined using the Lobstein formula.

**The results of the study.** The effectiveness of treatment was evaluated immediately after its completion. In both groups, at the end of treatment, there was a varying degree of positive dynamics in visual functions. Thus, the increase in GPA in patients of the 1st (control) group was on average 1.9%, and in the 2nd (main) group - by 19.7%. In addition, in this group of patients, a decrease in the size and number of relative paracentral cattle was revealed. In 45.6% of the eyes of patients of the 1st and 53.3% of the eyes of the 2nd group, an increase in visual acuity was revealed above the initial level by 5.2% and 22%, respectively (p **0.05**).

An increase in regional hemodynamics and microcirculation in patients of both groups was also detected, but their degree also turned out to be different. So, the NSC BFV increased by 7.1% (p <0.05) in the control group and by 36.2% (p <0.02) in patients receiving gliatilin: Ocular Rperf. - increased by 6.1% and by 38.8%, respectively (p <0.02). Biomicroscopy showed a significant increase in DA by 1.9% and 13.1%, respectively; PFC in 1 mm<sup>2</sup> field of view at 13.6% and 50%, respectively (p <0.03).

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