

## MODERN METHODS OF THERAPY OF ACUTE GASTRODUODENAL BLEEDING IN PATIENTS WITH SEVERE BURNS

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### ABSTRACT

*Among the causes of gastrointestinal bleeding, stress ulcers occupy the second place, second only to chronic ulcers of the stomach and duodenum and account for 10-20% of all causes of hemorrhage. Relapses of bleeding from acute stress ulcers, with a mortality rate of 60-90%, are particularly dangerous.*

**The Purpose of the Research:***To develop methods of treatment of patients with bleeding from acute gastroduodenal ulcers in severely burned.*

**Materials and Methods** *In the burn department of the Samarkand City Medical Association, 78 seriously burned people with bleeding from acute gastroduodenal ulcers have been cured over the past 10 years. The average age of patients was 51±16 years, of which 46.4% were over 60 years old. The total area of thermal damage to the skin indicated a significant severity of thermal injury, and was equal to 36.7 ± 7.7% of the body surface. All patients were divided into two groups. The main group (n=46) and the control group (n=36).*

**Results.** *As a result of the study, we found out that the risk of erosive and ulcerative lesions of gastroduodenal zones, including those complicated by gastroduodenal bleeding, increases with an increase in the total area of the burn lesion, especially with an area of more than 40% p.t. In this regard, it is necessary to perform EGDFS upon admission to the hospital of patients with burns of more than 40%, which allows timely detection of erosive and ulcerative changes from the gastroduodenal zones, to begin their treatment and prevention gastroduodenal bleeding.*

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*Increased development of vascular-endothelial dysfunction leads to vascular damage. This showed a marked development of endothelial dysfunction.*

*Argon plasma coagulation was the most effective method of hemostasis in bleeding from acute stressful gastroduodenal ulcers in severely burned patients, rather than injection and radio wave hemostasis.*

**Conclusions.** *Thus, stable hemostasis during bleeding from acute gastroduodenal ulcers in severely burned patients was achieved in the control group against the background of antisecretory therapy with H<sub>2</sub>-receptor blockers only in 77.8% of cases, in the main group against the background of antisecretory treatments and with the addition of dopamine D<sub>2</sub>-receptor blockers (domperidone) and L-arginine, stable hemostasis was achieved in 88.1% of cases.*

**KEYWORDS:** *Gastroduodenal, Hemostasis, Endothelial, Antisecretory, Ulcerative.*

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