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## **EVALUATION OF THE EFFECTIVENESS OF EARLY DIAGNOSIS AND SURGICAL TREATMENT OF PATIENTS WITH CATARACTS**

*Resume:* Currently, there are about 37 million blind people and 124 million visually impaired people worldwide. Of these, 47% are cataract patients. Lens opacity of varying degrees occurs in 60-90% of people over the age of 60. Due to the general trend of population aging, the number of cataract cases is steadily increasing.

In this regard, the question arises of optimizing the approach to the organization of cataract surgery. The introduction of early surgical treatment of a paired eye (within the framework of a single hospitalization), according to some authors, reduces time and organizational problems, adding the benefits of early rehabilitation and quality of life of patients without loss of quality of treatment.

*Key words:* cataract, surgical treatment, lens, eyes, ophthalmology.

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## **ОЦЕНКА ЭФФЕКТИВНОСТИ РАННЕЙ ДИАГНОСТИКИ И ХИРУРГИЧЕСКОГО ЛЕЧЕНИЯ БОЛЬНЫХ С КАТАРАКТОЙ**

*Резюме:* В настоящее время во всем мире насчитывается около 37 млн слепых и 124 млн слабовидящих. Из них 47 % составляют пациенты с катарактой. Помутнение хрусталика различной степени встречается у 60–90 % людей, достигших 60 лет. В связи с общей тенденцией старения населения, количество заболевших катарактой неуклонно растет.

В этой связи встает вопрос об оптимизации подхода к организации хирургического лечения катаракты. Внедрение ранних сроков хирургического лечения парного глаза (в рамках одной госпитализации), по мнению некоторых авторов, позволяет сократить время и организационные проблемы, добавив преимущества ранней реабилитации и качества жизни больных без потери качества лечения.

**Ключевые слова:** катаракта, хирургическая лечения, хрусталик, глаза, офтальмология.

**Relevance.** Throughout the history of mankind, cataract has been and remains one of the main and most common causes of blindness. In fact, every person over the age of 55-60 suffers from cataracts; the only question is whether this affects his eyesight and to what extent. The word "cataract" comes from the Greek words "kate" - liquid and "act" - moving. The ancient Greeks believed that the gray color of the pupil in cataracts is a film that, like a waterfall, descends from top to bottom (falls down) on the pupil, eventually depriving a person of sight. A cataract is a partial or complete clouding of the lens. In this disease, the passage of light through optical media is disrupted, as a result of which visual acuity decreases from insignificant to light perception with correct light projection [1.5].

Cataracts are detected in patients from both developing and developed countries, regardless of their geographical location, they occur in people of all races, both sexes and different ages. In most cases, blindness caused by cataracts is curable, but this usually requires surgery.

Cataract surgery is still the "pearl" of ophthalmology, both literally and figuratively. This is the most common eye surgery [1, 2] well-developed technique in almost all aspects [3] high percentage of positive results [4,7] minimal number of complications; wide range of accessories for both the patient and the surgeon; irresistible psychological effect of rapid restoration of vision; fast cost recovery.

The success in cataract surgery is due to the fact that the intelligence of the international ophthalmological community over the past 40 years has been focused mainly on solving this issue. If we trace the subject of publications in the scientific literature, we can note an increase in the number of articles on cataract surgery and a steady decrease in publications on the achievements of prevention and treatment of the initial stages of lens opacity. Over the past 10 years, the latest reports are generally rare.

Despite the success of cataract surgery, the relevance of improving this area still remains.

At the same time, the thematic section on cataract prevention is currently very rarely included in the work plans of scientific and practical conferences and congresses of ophthalmologists.

**The purpose of the study.** To evaluate the comparative effectiveness of various options for surgical treatment of cataract patients and to develop approaches to adequate therapy of an actual combination of diseases; to improve the functional results of surgical treatment of patients with cataracts.

**Materials and methods.** We have developed a special questionnaire, through which 450 cataract patients were interviewed, 135 of them men and 315 women aged 56 to 78 years.

**The results of the study.** In 49.1% of cases, patients of the first group did not complain at all, in 27.3% of cases they noted the periodic appearance of "fog" in front of their eyes, in 23.6% of cases they complained of decreased vision in the distance or near.

In the second group, 32% did not actively complain, in 20% of cases they complained of periodic blurring (the appearance of a "veil") in the eyes or a decrease in distant vision, and in 48% they clearly noted a gradual decrease in distant and near vision.

Among the patients of the third group, complaints were absent in 6.6% of cases, periodic decrease in vision in the distance and near, distortion of objects

was noted by 15.6%, specific complaints about vision changes, including decreased vision in the distance and improved vision near, distortion of objects, the "halo" effect when looking at a light source, a change in color perception were presented by 77.8% of patients.

Conservative treatment for cataracts included: topical treatment with eye drops (taufon, quinox, catachrome, vitaiodural) during the month, followed by a break; general treatment — taking multivitamins, biologically active additives (dietary supplements), homeopathic remedies in courses for 1-2 months. 1-3 times a year.

In the first group, 105 people (63.6%) were completely satisfied with the existing visual acuity, 60 patients would like to improve it (36.4%), but without surgery.

Among the patients of the second group, 61 people (40.7%) were satisfied with the existing visual acuity, the remaining 74 (49.3%) of the respondents would like to improve it, but without surgery. Only 15 patients (10%) of this group under the age of 62 with binocular vision impairment (the difference in visual acuity between the eyes is more than 30%) agreed to cataract surgery. The reasons for refusing surgery were: fear of surgery (without explanation) — 91.9%; fear of surgical and postoperative complications — 7.4%; unsatisfactory general condition — 0.7%.

Patients of the third group were satisfied with the existing visual acuity in 39 cases (28.9%), 69 people (51.1%) would like to improve it without surgical treatment, 27 people (20%) with a decrease in distant vision to 0.5-0.4 actively chose the tactics of surgical treatment of cataracts. The reasons for refusing surgery were: fear of surgery (without explanation) — 34.3%; fear of surgical and postoperative complications — 63.9%; unsatisfactory general condition — 1.8%.

An analysis of the results of the study showed that, with initial cataracts and decreased visual acuity in the distance (up to 0.7), up to 100% of patients

are satisfied with the "status quo", and they prefer passive waiting tactics (74.5%), due to disbelief in existing methods of conservative treatment or preventive therapy (25.5%).

With immature cataracts with visual acuity up to 0.6-0.5, 49.3% of patients prefer conservative treatment. Only 10% choose surgical tactics to solve the problem. But the choice of surgical treatment is due to a decrease in vision in only 50% of patients, and in other cases, disbelief in the effectiveness of instilling drops on existing everyday examples.

With immature cataracts with a decrease in visual acuity to 0.4-0.3 in 20% of cases, patients choose surgical tactics to solve the problem. Even in the presence of reduced vision, which is really and significantly felt by a person, 62.2% of patients choose conservative treatment tactics due to fear of surgery and operational complications.

Conclusion. Thus, our study shows that about 9.3% of patients with initial and immature cataracts choose the tactics of active surgical treatment. The remaining 44.4% of patients choose active preventive conservative treatment tactics for various reasons, and 46.3% choose passive waiting.

The results obtained indicate the need not only to advertise medicines and implants, but also to promote medical knowledge, conduct more subtle explanatory work among the population about conservative and surgical treatment of cataracts.

The search for new methods of conservative treatment of cataracts is as relevant a direction of modern ophthalmology as the improvement and development of safer methods of surgical treatment of cataracts.

But the development of methods of preventive cataract treatment should proceed not only from the "philistine" opinion of patients, sometimes based on a misunderstanding of the essence of the disease, but also from objective prerequisites: rejuvenation of cataracts; protection from harmful environmental influences; metabolic disorders in the body; preservation of accommodation;

contraindications to surgical treatment due to the general condition of the body degenerative changes in intraocular structures against the background of tissue "aging".

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