ДИАГНОСТИЧЕСКИЕ АСПЕКТЫ РЕЦИДИВНОЙ ГРЫЖИ ПОЯСНИЧНОГО ДИСКА

Мамаджанов Б.С. – Кафедра травматологии, ортопедии и нейрохирургии Андижанского государственного медицинского института, к.м.н. Доцент. Андижанское ш.

Кадыров Д.Р. – Ассистент кафедры хирургических болезней Среднеазиатского медицинского института. Ферганское ш.

Эшбоев Э.А. – Республиканский патологоанатомический центр Министерства здравоохранения Республики Узбекистан. Доктор философии. Доцент. Ташкентское ш.

Абстрактный. В данной научной работе анализируются особенности диагностики рецидива грыжи диска поясничного отдела. Целью исследования было оценить роль клинических, визуализирующих и лабораторных параметров в определении и прогнозировании вероятности рецидива. Подчеркнута важность современных методов диагностики, таких как клинические признаки рецидивной грыжи диска, возможности визуализации с помощью МРТ и КТ, мониторинга воспалительных процессов. Данная работа способствует улучшению качества жизни пациентов и оптимизации стратегии лечения за счет установления точного диагноза рецидивных грыж.

Ключевые слова: рецидив грыжи диска, диагностика, магнитно-резонансная томография, компьютерная томография, боль в спине, воспаление, лабораторное обследование, операция, инвалидность.

DIAGNOSTIC ASPECTS OF RECURRENT LUMBAR DISC HERNIATIONS

Mamajanov B.S. – Doctor of Medical Sciences, Associate Professor, Department of Traumatology, Orthopedics, and Neurosurgery, Andijan State Medical Institute. Andizhan.
Qodirov D.R. – Assistant, department of surgical diseases, Central Asian Medical Institute. Fergana.
Eshboyev E.A. – PhD, Associate Professor, Republican Pathoanatomical Center of the Ministry of Health of the Republic of Uzbekistan. Tashkent.

Annotation. This research analyzes the specific diagnostic features of recurrent lumbar disc herniation. The study focuses on assessing the role of clinical, imaging, and laboratory parameters in predicting recurrence likelihood. It highlights the clinical signs of recurrent disc herniation, visualization capabilities using MRI and CT, and the importance of modern diagnostic methods for monitoring inflammatory processes. This work contributes to improving patient quality of life and optimizing treatment strategies by establishing accurate diagnostics for recurrent herniation.

Keywords: recurrent disc herniation, diagnostics, magnetic resonance imaging, computer tomography, low back pain, inflammation, laboratory examination, surgery, disability.

BEL UMURTQALARI QAYTALAGAN DISK CHURRALARI DIAGNOSTIK JIHATLARI

Mamajanov B.S. – Andijon davlat tibbiyot instituti Travmatologiya, ortopediya va neyroxirurgiya kafedrasi t.f.d. dotsenti. Andijon sh.
Qodirov D.R. – Central Asian medical institute Xirurgik kasalliklar kafedrasi assistenti. Farg‘ona sh.
Eshboyev E.A. – O‘zbekiston Respublikasi Sog‘liqni saqlash vazirligi Respublika Patoanatomik markazi. PhD. Dotsent. Toshkent sh.

Annotatsiya. Ushbu ilmiy ish bel sohasidagi disk churralari qaytalanishining o‘ziga xos diagnostik xususiyatlarini tahlil qiladi. Tadqiqot qaytalash ehtimolini

aniqlash va prognozlashda klinik, tasviriy va laboratoriya parametrlarining rolini baholashga qaratilgan. Disk churralarini qaytalashning klinik belgilari, MRT va KT yordamida vizualizatsiya imkoniyatlari hamda yallig‘lanish jarayonlarini kuzatish kabi zamonaviy diagnostik usullarning ahamiyati yoritilgan. Ushbu ish qaytalagan churralarning aniq diagnostikasini yo‘lga qo‘yish orqali bemorlarning hayot sifatini yaxshilash va davolash strategiyalarini optimallashtirishga hissa qo‘shadi.

Kalit so‘zlar: qaytalangan disk churra, diagnostika, magneto rezonans tomografiya, kompyuter tomografiya, bel og‘riq, yallig‘lanish, labarator tekshiruv, operatsiya, nogironlik.

Relevance of the topic – Lumbar disc herniation disease is widespread worldwide and causes pain in the back and legs [1-2]. Surgical treatment of this disease is widely used [1,2]. However, there is a possibility of recurrence of hernia even after surgical intervention [2,3]. The average rate of recurrence is 5-15% [4,2]. Recurrent disc herniation is one of the main causes of spine pain and disability [6,5-1]. In addition, pain in the lumbar region of the spine and in the legs occurs due to compression of the nerve root as a result of spinal canal stenosis or cauda equina syndrome [8,11,12,13,14]. Clinical guidelines recommend a history and physical examination to rule out lumbar disc herniation (including recurrent disc herniation) [6,7,8]. However, the above two methods are not enough to diagnose the disease [8,9,10]. Diagnostic imaging methods can also be used before operations to determine this condition [15]. Diagnostic imaging can be performed by magnetic resonance imaging (MRT), computed tomography (CT). The widespread use of these effective and relatively safe tests in medicine has dramatically reduced the need for X-rays and myelography. Currently, the MRI examination method is

less harmful to the body through ionizing radiation and has the ability to see especially soft tissues [13,16].

The purpose of the study. The purpose of this study is to choose and implement an adequate examination method in recurrent lumbar disc herniation.

Research methods and materials. This retrospective study was conducted from January 2024 to August 2024 on 185 patients who underwent spinal disc herniation surgery at the neurosurgery department of Andijan State Medical Institute clinics. Clinical and anamnestic data of patients with recurrent lumbar disc herniation were analyzed. Magnetic resonance imaging (MRI) or computed tomography (CT) was recommended in postoperative patients with persistent or recurrent leg pain. Medical indicators and MRI, CT images of all patients were evaluated.

Research results and their evaluation. The obtained results were as follows: complaints, anamnesis, and clinical neurological examinations of all patients raised doubts about the diagnosis of disc herniation. Then, magnetic resonance imaging (MRI) or computed tomography (CT) was recommended to the patients. Among them, 23 (12.4%) had a recurrence, 162 (87.6%) had a primary disc herniation.

Summary. Patients' complaints, medical history, clinical neurological and physical examinations play an important role in the diagnosis of herniated lumbar vertebrae (including primary disc herniation). However, for preoperative diagnosis and selection of surgical tactics, computed tomography (MRT) or computed tomography (CT) examinations are the gold standard.

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