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ВАЖНОСТЬ ИММУНОКОРРЕКТИВНОЙ ТЕРАПИИ В ЛЕЧЕНИИ НЕСПЕЦИФИЧЕСКОГО ЯЗВЕННОГО КОЛИТ

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АННОТАЦИЯ

Неспецифического язвенного колит (НЯК), представляет собой хроническое воспалительное заболевание толстой кишки, характеризующееся рецидивирующим течением и периодами ремиссии, сопровождающимися воспалением слизистой оболочки. Несмотря на значительные достижения в традиционной терапии, включающей аminosалицилаты, кортикостероиды и иммунодепрессанты, у многих пациентов сохраняются стойкие симптомы, частые обострения и снижение качества жизни. В этой связи иммунокорректирующая терапия рассматривается как перспективное направление, направленное не только на подавление воспаления, но и на восстановление баланса иммунной системы.

Ключевые слова: кортикостероиды, традиционное лечение, иммунная система, воспаление.

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THE SIGNIFICANCE OF IMMUNOCORRECTIVE THERAPY IN THE TREATMENT OF NON-SPECIFIC ULCERATIVE COLITIS

ANNOTATION

Ulcerative colitis (UC), historically referred to as non-specific ulcerative colitis, is a chronic inflammatory disease of the colon characterized by relapsing and remitting mucosal inflammation. Despite significant advances in conventional therapy, including aminosaliclates, corticosteroids, and immunosuppressants, many patients continue to experience persistent symptoms, frequent exacerbations, and reduced quality of life. In this context, immunocorrective therapy has emerged as a promising direction aimed at restoring immune system balance rather than merely suppressing inflammation.

Keywords: corticosteroid, conventional treatment, immune system, inflammation.

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NOSPESIFIK YARALI KOLITNI DAVOLASHDA IMMUNOKORREKTIV TERAPIYANING AHAMIYATI

Nospesifik yarali kolit (NYaK), yo'g'on ichakning surunkali yallig'lanish kasalligi bo'lib, u qaytalanib turuvchi va remissiya davrlari bilan kechuvchi shilliq qavat yallig'lanishi bilan tavsiflanadi. Aminosalitsilatlar, kortikosteroidlar va immunodepressantlarni o'z ichiga olgan an'anaviy davolash usullarida sezilarli yutuqlarga erishilganiga qaramay, ko'plab bemorlarda hozirgi vaqtgacha doimiy kasallikning simptomlari, kallikning tez-tez qaytalanish holatlari va bemorlarning hayot sifatining pasayishi kuzatilib kelmoqda. Shu nuqtai nazardan, immunokorrigirlovchi terapiya faqat yallig'lanishni bostirish emas, balki immun tizimi muvozanatini tiklashga qaratilgan istiqbolli yo'nalish sifatida namoyon bo'lmoqda.

Kalit so'zlar: kortikosteroid, an'anaviy davolash, immun tizimi, yallig'lanish

The relevance of research. The study is relevant in light of the fact that ulcerative colitis (UC) is one of the most serious and poorly understood problems in gastroenterology. This disease is characterized by a long chronic course, repeated exacerbations and severe complications, which leads to a high level of disability, especially among young and able-bodied people. In recent years, increasing attention has been paid to the role of the immune system in the pathogenesis of UC, which largely determines its development and prognosis.

Purpose of the study. The purpose of the study is to develop clinical and immunological characteristics and principles of immunocorrective treatment of nonspecific ulcerative colitis, taking into account its severity and form. To achieve this goal, the following tasks were identified:

1. Identification of features of changes in cellular and humoral immunity in patients with mild, moderate and severe UC, as well as depending on the form of the disease.

2. Study of the functional activity of natural killer cells in patients with varying degrees of severity of the disease and its forms.

3. Evaluation of the effectiveness of treatment of ulcerative colitis using immunocorrective drugs.

Materials and methods of research. For the study, 96 patients were selected with a diagnosis of ulcerative colitis, who were under observation in the gastroenterological department of GMO No. 1 in Samarkand in the phase of exacerbation of the disease. Participants ranged in age from 15 to 67 years, including 49 men and 47 women. All patients were subjected to standard examination methods, including biochemical, radiological, endoscopic (sigmoid-fibroskopy, kolonofibroskopy), immunological, bacteriological and histological studies of intravital colon biopsies. The control group consisted of 25 practically healthy individuals aged 17 to 56 years. The distribution of patients according to the severity of the disease, clinical forms and localization of the process was carried out in accordance with the classification of ulcerative colitis presented in Table No. 1.

In our study, 59.4% of patients were diagnosed with the chronic relapsing form of ulcerative colitis (UC), the chronic continuous form was 36.4%, and the acute form was 4.2%. A mild course of the disease was detected in only 20% of patients with a chronic relapsing form. A moderate course of the disease was observed in 56.3% of patients, while a severe course was observed in 22.9%.

The assessment of immune status was carried out in accordance with established diagnostic standards. The absolute and relative content of T-lymphocytes, subpopulations of theophylline-resistant and theophylline-sensitive cells, as well as the state of the B-link of the immune system, the concentration of immunoglobulins of classes A, M, G, the number and functional activity of natural killer cells (NK) were measured. The obtained data were subjected to statistical processing.

Research results. The study included clinical and immunological characteristics of patients with mild ulcerative colitis (UC). 20 patients aged 17 to 65 years, including 8 men and 12 women, were observed. Of these, 13 were also diagnosed with other diseases, such as chronic hepatitis, chronic cholecystitis and acute appendicitis. Analysis of the

immune status of patients in this group revealed a decrease in the relative number of lymphocytes and T-lymphocytes, as well as an increase in the relative and absolute number of B-lymphocytes and immunoglobulins of classes A and M. Indicators of the functional activity of natural killer cells showed only a downward trend.

For patients with moderate severity of UC (54 people), a decrease in the number of T-lymphocytes, mainly T-suppressor ones, as well as an increase in B-lymphocytes was detected. These changes were accompanied by an increase in the concentration of immunoglobulins of class A and M. It was established that UC of moderate severity occurs with a more pronounced clinical picture of the disease and a deficiency of the T-immune system, as well as an imbalance of subpopulations of the T-immune system.

The study carried out clinical and immunological characteristics of patients with severe ulcerative colitis (UC). In 22 patients aged 22 to 51 years, severe UC was diagnosed. Of these, 4 people had an acute form, 14 had a chronic continuous form, and 4 had a chronic recurrent form of the disease. Against the background of a normal number of lymphocytes in the peripheral blood, a sharp decrease in T-lymphocytes was observed. This decrease was most pronounced in patients with acute and chronic continuous forms of the disease with local and general complications. At the same time, against the background of T-lymphocyte deficiency, a decrease in lymphocyte subpopulations, such as T-helpers and T-suppressors, was observed.

In general, in severe UC, pronounced changes in the immune system are noted, associated with the activity of the pathological process in the colon. The worsening deficiency of the T-immune system is accompanied by a pronounced imbalance of T-cell subpopulations and inhibition of the functional activity of natural killer cells. These changes can lead to the development of autoimmune reactions and systemic damage to various organs, including the gastrointestinal tract, liver, heart and blood. Inappropriate use of antibiotics can worsen immune system deficiency and contribute to the prevalence and severity of the disease process.

Conclusions. The findings of the study confirm that disturbances in the immune system in patients with ulcerative colitis (UC) depend on the form of the disease, the severity of its course and the activity of the pathological process. Low levels of functional activity of natural killer cells (NKC) indicate a severe course and poor prognosis of the disease, which makes them an important criterion for diagnosing the severity of UC.

Therefore, assessing the state of the immune system (cellular and humoral immunity) in UC can be a useful tool for determining the form and severity of the disease. It is also recommended to use the determination of the functional activity of NK as an additional immunological diagnostic criterion. A decrease in this activity reflects the severity of the pathological process and the form of the disease, this is especially pronounced in the severe course of the acute form.

When choosing immunomodulatory drugs, the individual sensitivity of T-lymphocytes to them should be taken into account for more targeted therapy.

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