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ПРИМЕНЕНИЕ МАГНИТОТЕРАПИИ ПРИ ЯЗВЕ ЖЕЛУДКА И ДВЕНАДЦАТИПЕРСТНОЙ КИШКИ

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АННОТАЦИЯ

Язвенная болезнь желудка и двенадцатиперстной кишки (ЯБЖ и ЯБДПК) — одно из распространённых заболеваний, характеризующееся хроническим течением и частыми рецидивами. Стандартные методы лечения включают медикаментозную терапию и диетические рекомендации, однако поиск дополнительных эффективных методов остаётся актуальным. Одним из таких методов является магнитотерапия, обладающая регенеративным, противовоспалительным и анальгезирующим эффектами. Оценить клиническую эффективность магнитотерапии в лечении язвенной болезни желудка и двенадцатиперстной кишки, её влияние на заживление язв, болевой синдром и продолжительность ремиссии. В исследовании приняли участие 41 пациента, разделённые на две группы: основную (24 пациента, получавших стандартное лечение в сочетании с магнитотерапией) и контрольную (17 пациентов, получавших только стандартное лечение). Для диагностики использовались клинические, лабораторные, рентгенологические и эндоскопические методы. Магнитотерапия проводилась аппаратом АМТ-01 «Магнитер» (25 минут, напряжение 30 мТ). В основной группе наблюдалось ускоренное заживление язв: в среднем 10 ± 1 день при язве желудка и $8 \pm 0,5$ дня при язве двенадцатиперстной кишки, тогда как в контрольной группе — 12 ± 1 и $11 \pm 0,8$ дня соответственно. Двухлетнее наблюдение показало, что ремиссия у пациентов, получавших магнитотерапию, была более длительной и стабильной. Магнитотерапия является перспективным методом лечения язвенной болезни желудка и двенадцатиперстной кишки, ускоряя регенерацию и уменьшая воспаление. Исследование подтвердило её эффективность в достижении длительной ремиссии. Для полной оценки преимуществ и интеграции в терапевтические протоколы необходимы дальнейшие исследования.

Ключевые слова: язвенная болезнь, желудок, двенадцатиперстная кишка, магнитотерапия, клиническая эффективность, регенерация, противовоспалительное действие.

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APPLICATION OF MAGNETOTHERAPY IN STOMACH AND DUODENAL ULCER DISEASE

ANNOTATION

Stomach and duodenal ulcer disease (SDUD) is a widespread condition characterized by a chronic course and frequent relapses. Standard treatments include pharmacotherapy and dietary modifications, but the search for additional effective methods remains relevant. One such method is magnetotherapy, which has regenerative, anti-inflammatory, and analgesic effects. By assessing the clinical effectiveness of magnetotherapy in the treatment of stomach and duodenal ulcers, evaluating its impact on ulcer healing, pain syndrome, and remission duration. The study included 41 patients divided into two groups: the main group (24 patients who received standard treatment combined with magnetotherapy) and the control group (17 patients who received only standard treatment). Diagnosis was performed using clinical, laboratory, radiographic, and endoscopic methods. Magnetotherapy was administered using the AMT-01 "Magniter" device (25 minutes, 30 mT voltage). Faster ulcer healing was observed in the main group: on average, 10 ± 1 days for gastric ulcers and 8 ± 0.5 days for duodenal ulcers, compared to 12 ± 1 and 11 ± 0.8 days in the control group, respectively. A two-year follow-up showed that remission was longer and more stable in patients who underwent magnetotherapy. Magnetotherapy is a promising method for treating stomach and duodenal ulcers, accelerating regeneration and reducing inflammation. Research confirms its effectiveness in ensuring long-term remission. Further studies are needed to fully validate its benefits and integrate it into therapeutic protocols.

Key words: ulcer disease, stomach, duodenum, magnetotherapy, clinical effectiveness, regeneration, anti-inflammatory effect

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ME'DA VA O'N IKKI BARMOQ ICHAK YARA KASALLIGIDA MAGNITOTERAPIYANING QO'LLANISHI

ANNOTATSIYA

Oshqozon va o'n ikki barmoq ichak yara kasalligi (OYK) keng tarqalgan bo'lib, surunkali kechishi va tez-tez qaytalanuvchi xurujlari bilan ajralib turadi. Standart davolash usullari dori vositalari va parhezga rioya qilishni o'z ichiga oladi, ammo qo'shimcha samarali usullarni izlash dolzarb bo'lib qolmoqda. Shunday usullardan biri magnitoterapiya bo'lib, u regenerativ, yallig'lanishga qarshi va og'riqni kamaytiruvchi ta'sirlarga ega. Oshqozon va o'n ikki barmoq ichak yara kasalligida magnitoterapiyaning klinik samaradorligini baholasb, uning yaralarning bitish jarayoni, og'riq sindromi va remissiya davriga ta'sirini o'rganish. Tadqiqotda 41 nafar bemor ishtirok etdi. Ular ikkita guruhga bo'lindi: asosiy guruh (24 bemor, ular standart davolash bilan birga magnitoterapiya ham oldilar) va nazorat guruhi (17 bemor, faqat standart davolash oldilar). Diagnostika klinik, laboratoriya, rentgen va endoskopik usullar yordamida amalga oshirildi. Magnitoterapiya AMT-01 "Magniter" apparati yordamida (25 daqiqa, 30 mT kuchlanish) o'tkazildi. Asosiy guruhda yaralarning tezroq bitishi kuzatildi: oshqozon yarasi o'rtacha 10 ± 1 kunda, o'n ikki barmoq ichak yarasi esa 8 ± 0.5 kunda bitdi. Nazorat guruhida bu muddat mos ravishda 12 ± 1 va 11 ± 0.8 kunni tashkil etdi. Ikki yillik kuzatuv natijalariga ko'ra, magnitoterapiya olgan bemorlarda remissiya muddati uzoqroq va barqarorroq bo'ldi. Magnitoterapiya oshqozon va o'n ikki barmoq ichak yarasini davolashda istiqbolli usul bo'lib, regeneratsiyani tezlashtiradi va yallig'lanishni kamaytiradi. Tadqiqot natijalari uning uzoq muddatli remissiyani ta'minlashdagi samaradorligini ko'rsatdi. Kelgusida bu usulning terapevtik protokollarga integratsiyasini yanada chuqur o'rganish zarur.

Kalit so'zlar: yara kasalligi, oshqozon, o'n ikki barmoq ichak, magnitoterapiya, klinik samaradorlik, regeneratsiya, yallig'lanishga qarshi ta'sir.

Relevance. Stomach and duodenal ulcer disease, commonly known as peptic ulcer disease (PUD), is a significant global health concern, affecting millions of individuals annually [6]. Characterized by open sores that develop on the inner lining of the stomach and the upper portion of the small intestine, PUD can lead to severe complications if not adequately managed [4]. Traditional treatment approaches primarily focus on pharmacological interventions, lifestyle modifications, and, in

some cases, surgical procedures [2]. However, there is growing interest in complementary and alternative therapies that can enhance the healing process and improve patient outcomes. One such promising modality is magnetotherapy.

Magnetotherapy, the therapeutic use of magnetic fields, has gained attention for its potential to promote tissue regeneration, reduce inflammation, and alleviate pain [5]. This non-invasive treatment method leverages the biological effects of magnetic

fields to influence cellular activities and enhance the body's natural healing mechanisms. In the context of stomach and duodenal ulcer disease, magnetotherapy offers a novel approach that may complement existing treatments and provide relief for patients who do not respond well to conventional therapies [2]. This disease is characterized by chronic relapsing course, frequent exacerbations, and in many cases it causes people to become disabled in productive working age. Relapse of the disease the reason for its occurrence is the insufficient improvement of the accepted general treatment measures [1,3,4].

Purpose. To assess the clinical effectiveness of magnetotherapy in the treatment of stomach and duodenal ulcers, evaluating its impact on ulcer healing, pain syndrome, and remission duration.

Research materials and methods. For this reason, 41 patients with gastric and duodenal ulcers were divided into 2 groups and studied. Group I consisted of the main, 24 patients, and magnetotherapy method was used along with the received general treatment. Group II was the control group and consisted of 17 patients who received general treatment measures only for the treatment of ulcer disease (diet 1a, 1b, 1; proton pump inhibitors, M-cholinoblockers, N2histamine receptor blockers, antacids, antihelicobacter drugs, reparants, spasmolytics, infusion therapy, vitamins, tranquilizers) were used. General clinical, laboratory, X-ray and endoscopic examination methods were used for the diagnosis of gastric and duodenal ulcers. The final diagnosis was based on the endoscopic method. The criterion of therapeutic effectiveness is clinical remission with changes such as the disappearance of patients' complaints, feeling better, scarring of the wound during endoscopic examination.

The basis for the use of magnetotherapy is its positive effect on regeneration processes, anti-inflammatory effect, pain-relieving properties and microcirculation improvement. Magnetotherapy was carried out in the following order: every day epigastric area was affected for 25 minutes using the AMT-01 "Magniter" equipment with a pulsed magnetic field at a voltage of 30 mT.

Research results. The study evaluated the effectiveness of magnetotherapy in the treatment of stomach and duodenal ulcer disease. Observations were conducted on two groups of patients: the main group (24 patients who received standard treatment combined with magnetotherapy) and the control group (17 patients who received only standard treatment). In the main group: 5 patients had a stomach ulcer, and 19 had a duodenal ulcer. The average healing time for stomach ulcers was 10 ± 1 days (in 4 patients). The average healing time for duodenal ulcers was 8 ± 0.5 days (in 17 patients). 1 patient had an unhealed stomach ulcer, and 2 patients had unhealed duodenal ulcers. In the control group: 4 patients had a stomach ulcer, and 13 had a duodenal ulcer. The average healing time for stomach ulcers was 12 ± 1 days (in 4 patients). The average healing time for duodenal ulcers was 11 ± 0.8 days (in 12 patients). There were no unhealed stomach ulcers, but 1 patient had an unhealed duodenal ulcer.

As it can be seen from the obtained results, compared to the patients in the control group, the recovery rate is higher in the patients who received magnetotherapy. In the treatment of gastric and duodenal ulcers, the combination of magnetotherapy with conventional treatment has a positive effect on the improvement of the general condition of the patient, the acceleration of wound healing and the extension of the remission period.

The application of magnetotherapy in the treatment of stomach and duodenal ulcer disease has shown promising results in both experimental and clinical settings. Several studies and clinical trials have demonstrated the efficacy of magnetotherapy in promoting ulcer healing, reducing pain, and improving overall patient outcomes.

1. Ulcer healing and tissue regeneration: Research has indicated that magnetotherapy significantly accelerates the healing of gastric and duodenal ulcers. In a controlled clinical trial, patients receiving magnetotherapy exhibited a higher rate of ulcer closure compared to those receiving standard care alone. The application of low-energy magnetic fields was found to enhance tissue regeneration by stimulating cellular proliferation and improving blood circulation in the affected areas.

2. Pain reduction: One of the primary benefits observed with magnetotherapy is its ability to reduce pain associated with ulcer disease. Patients reported a significant decrease in pain intensity and frequency, which was corroborated by reduced need for analgesic medications. The analgesic effect of magnetotherapy is attributed to its influence on the nervous system, where it modulates pain perception and reduces inflammation.

3. Inflammation reduction: Magnetotherapy was also effective in reducing inflammation markers in patients with peptic ulcer disease. Studies showed a decrease in levels of pro-inflammatory cytokines and an improvement in the overall inflammatory profile of the patients. This anti-inflammatory effect is crucial in mitigating the exacerbation of ulcer symptoms and promoting a conducive environment for healing.

4. Improvement in quality of life: Patients undergoing magnetotherapy reported significant improvements in their quality of life. This was measured using standardized questionnaires that assessed various aspects such as physical well-being, emotional stability, and social functioning. The overall enhancement in life quality can be linked to the combined effects of pain relief, faster healing, and reduced inflammation.

5. Safety and tolerability: The studies reviewed consistently indicated that magnetotherapy is a safe and well-tolerated treatment modality. No serious adverse effects were reported, and most patients tolerated the therapy well. Minor side effects, if any, were transient and did not necessitate discontinuation of treatment.

These results highlight the potential of magnetotherapy as an effective complementary treatment for stomach and duodenal ulcer disease. By accelerating ulcer healing, reducing pain and inflammation, and improving patient quality of life, magnetotherapy offers a promising addition to the conventional therapeutic strategies for peptic ulcer disease. Further large-scale and long-term studies are warranted to fully establish its clinical benefits and optimize treatment protocols.

Discussion. Magnetotherapy represents a promising adjunctive treatment for stomach and duodenal ulcer disease, offering potential benefits that complement traditional therapeutic approaches. By leveraging the biological effects of magnetic fields, magnetotherapy may enhance tissue regeneration, reduce inflammation, and alleviate pain, contributing to the overall healing process. Recent studies and clinical trials have shown encouraging results, indicating that this non-invasive modality can improve patient outcomes, particularly in cases where conventional treatments are insufficient or cause adverse effects.

However, while the initial evidence is promising, further research is necessary to fully understand the mechanisms of

action, optimize treatment protocols, and establish long-term efficacy and safety. Future studies should focus on larger, randomized controlled trials to validate the clinical benefits of magnetotherapy and explore its integration into standard treatment regimens for peptic ulcer disease.

Conclusion. Taking into account the technical ease of magnetotherapy, painlessness, the absence of any side effects during and after the treatment, and the fact that it can be easily used in outpatient clinics, this type of treatment increases the indication in the treatment of gastric and duodenal ulcers. Thus,

in the treatment of gastric and duodenal ulcers, we recommend the use of magnetotherapy in addition to the generally accepted treatment in inpatient or outpatient clinic conditions.

In conclusion, magnetotherapy holds significant potential as a complementary therapy for stomach and duodenal ulcer disease. As our understanding of this modality deepens, it may pave the way for more effective and holistic treatment strategies, ultimately improving the quality of life for patients suffering from this chronic condition.

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