

CLINICAL AND PATHOLOGICAL FEATURES OF ULCERATIVE COLITIS AND
CROHN'S DISEASE

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THESIS

Introduction: In recent years, non-specific inflammatory bowel diseases, primarily ulcerative colitis, have received increasing attention due to the widespread steady increase in the number of patients suffering from this pathology, leading not only to a significant deterioration in the quality of life, but also to an increase in the number of cases of disability, and sometimes disability. Ulcerative colitis is a lifelong disease in which there is a high percentage of relapses with a tendency to progression and complications. Despite significant achievements in the field of studying the pathogenesis of inflammatory bowel diseases (IBD), there have been no fundamental changes in understanding their etiology, and, consequently, there are no methods of etiotropic therapy. The incidence of both ulcerative colitis and Crohn's disease worldwide is increasing every year, and mainly among the able-bodied population, which makes IBD a socially significant disease.

The purpose of the study: to provide a description of clinical observations of patients with nonspecific ulcerative colitis,

Materials and methods 15 patients (9 men and 6 women) with Crohn's disease (8 cases) and ulcerative colitis (9 cases) were studied. The average age of patients was 48 years for men and 50 years for women. Most of the patients were of working age. During macroscopic examination of the resected intestine, attention was paid to the prevalence of the process in the intestine and the presence of infiltrates in all layers of the intestine. They described in detail the ulcerative defects, their size and depth. We paid attention to the regional lymph nodes – their number and size. The condition of the serous membrane, the presence of vascular disorders and exudate in it were studied. The coprogram identified undigested muscle fibers, mucus, leukocytes and erythrocytes (the entire field of vision). During colonoscopy, the mucosa of the rectum and sigmoid colon with many punctate erosions is edematous, hyperemic, and the vascular pattern is not visible. The mucosa of the descending, ascending, caecum is slightly edematous, granular, focally hyperemic, vascular pattern is blurred. The mucous membrane of the ileum is edematous, fragile, with greenish mucus on the walls. A decrease in the tone of the right and left departments.

The results and their discussion The results of the histogram obtained in a number of studies indicate the following: in Crohn's disease, the thickness of the intestinal wall is often significantly increased. Slit-like ulcerative defects are detected in the mucous membrane, at the bottom of which signs of inflammation are found in the form of infiltration of the ulcer bottom by leukocytes, lymphocytes, histiocytes. In the mucous membrane adjacent to ulcerative defects, desquamation of the epithelium is detected, which leads to the denudation of the villi. The inflammatory infiltrate is represented by lymphocytes, plasma cells and eosinophils. This infiltration spreads to the muscle layer and

sometimes reaches the serous membrane. In some observations, the number of plasma cells increased significantly, which indicates the inclusion of immunological mechanisms in the pathogenesis of the disease. Attention is drawn to the hyperplasia of lymphoid nodules in the submucosal layer of the intestine, sometimes with the formation of light germ centers. There is hyperplasia of the cortical layer in the regional lymph nodes with large lymph nodes and large bright reproduction centers. If the inflammatory infiltrate reaches the serous membrane, then elements of inflammation are found in it.

Conclusion: Currently, inflammatory bowel diseases, in particular ulcerative colitis and Crohn's disease, are an extremely urgent problem. According to the World Gastroenterological Organization (WGO), modern methods of diagnosing diseases and pathological processes in terms of severity, frequency of complications and mortality, this pathology in the vast majority of countries occupies one of the leading places in the structure of gastrointestinal diseases. The incidence of both ulcerative colitis and Crohn's disease worldwide is increasing every year, and mainly among the able-bodied population, which makes inflammatory bowel diseases (IBD) socially significant diseases. The clinical picture of IBD is diverse, which often makes it difficult to diagnose and prescribe adequate therapy in a timely manner, and inevitably negatively affects the prognosis of diseases.

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