

## Changes in Laboratory Analysis in Aplastic Anemia and their Statistical Status

## Ismoilova Yulduz Ravshanbek kizi Urgench branch of Tashkent Medical Academy

Annotation: This in the article aplastic anemia in illness observable laboratory analysis results and their cognitive to functions effect analysis will be done. Aplastic anemia is bone in the grave blood harvest doer of cells enough work not coming out with described hematological disease is red blood cells, white blood cells and of platelets significant decrease with will pass This 50 in the study aplastic anemia diagnosis placed of patients laboratory analysis results analysis done and their disease with depends changes was evaluated.

Key words: Aplastic anemia, laboratory analysis, bone bone marrow, pancytopenia, thrombocytopenia, hemoglobin, autoimmune processes.

Aplastic anemia is bone in the grave blood harvest doer of cells enough work not coming out with described hematological is a disease. This disease red blood cells , white blood cells and of platelets common in the amount significant decrease with is expressed. [1-2] Aplastic anemia different reasons according to surface coming possible : autoimmune processes , genetics factors , drugs , toxins or radiation effect Many scientific in sources aplastic of anemia etiology and pathogenesis complicated being , this in illness bone of the grave activity sharp decline as a result pancytopenia surface coming identified [3, 8].

Aplastic in anemia bone of the grave main blood harvest doer cells (hematopoietic root number of cells ). decreases , this while erythrocytes , leukocytes and of platelets to decrease take will come Current scientific studies that's it shows that of the disease main mechanisms one immune of the system wrong performance is autoimmune processes bone warm cells target take and them no to do possible [4]. This processes as a result bone warm activity it subsides while blood harvest doer of cells amount sharp to decrease take will come

Aplastic anemia with depends studies that's it shows that the disease in development genetic factors are also important important have Some in TERT and TERC genes in patients mutations bone warm activities to the violation take coming possible [6]. Also Fanconi anemia such as hereditary diseases are also aplastic of anemia development reason to be it is possible while genetic of inclination importance again one there is confirms.

Aplastic anemia clinical in terms of very complicated in patients anemia , infections inclination and blood leave danger observed . Hematological analyses through of the disease clinical signs and laboratory indicators between dependence to be determined important Anemia signs , including fatigue , weakness , dizziness and skin of color pale hemoglobin of the amount decline with depends ( Killick SB, 2016). That's it with together , leukocytes number decrease of patients immunity weakens and them bacterial and viral to infections relatively sensitive does

Laboratory analyses and bone warm biopsy aplastic anemia in diagnosis main method is considered Biopsy in the results bone warm of cells decrease and adipose tissue increase to be determined bone warm hypocellularity with depend Studies that's it shows that such cell decrease as a result blood harvest doer cells place adipose tissue occupies, this while bone warm function reduces [7].

That's it with together, aplastic anemia with hurt in patients thrombocytopenia It develops while blood leave and hemorrhagic complications risk increases. of platelets decrease in patients nose and from milk blood discharge, hematomas appear to be and of injuries long time treatment with manifestation

will be In this disease laboratory of analyses accuracy and they are based on placed diagnosis of the patient life quality increase and right treatment designation for very important

This article aplastic anemia in illness observable laboratory analysis in the results changes scientific literature based on wider analysis to do and this of the disease diagnosis and pathogenesis about more complete imagination to give directed .

**Methods**. This research for aplastic anemia diagnosis 50 placed of the patient laboratory analysis results analysis done Research during of patients common blood analysis, biochemical analysis and bone of the grave biopsy results was evaluated. Blood hemoglobin quantity, erythrocytes number, leukocytes the number and platelets quantity such as indicators was studied. Also bone of the grave cellular composition and their functional activity microscopic method was evaluated.

**Results**. Received results that's it showed that it is aplastic anemia with hurt in patients of blood common in the indicators significant decline observed. Hemoglobin quantity on average in the range of 70-90 g/l being, this from the norm that it is significantly lower showed. of erythrocytes the number decrease with together, of patients in many reticulocytes that the quantity is also very low determined. And this bone of the grave new red blood cells harvest to do of ability that it has decreased shows.

Leukocytes the number is also in patients significant level decreased was, this their immune system weakened means As a result patients to infections relatively sensitive often often recurring infections with appeal did Especially a neurophile granulocytes number decrease their organism bacterial from infections protection to do ability weakened.

of platelets the amount is also in patients It is below the norm blood leave and hematomas appear to be risk increased Thrombocytopenia a lot in patients hemorrhagic diathesis signs , including the nose and from milk blood to leave , on the skin spots and hematomas with manifestation was

Bone of the grave biopsy results of cells decrease, that is bone of the grave hypocellularity with described. And this aplastic of anemia main pathophysiological mechanisms one is bone in the grave blood harvest doer of cells decrease that confirms. Bone of the grave microscopic analysis as a result cells place adipose tissue possession it was observed while bone of the grave functional activities significant level lowered

**Discussion**. Aplastic in anemia observable laboratory analysis results bone of the grave function violation as a result blood of cells work release sharp decrease shows. This of the disease main from the signs one this pancytopenia it is all blood cells - erythrocytes, leukocytes and of platelets amount decrease with is expressed. Hemoglobin of the amount decline in patients common weakness, fatigue and dizziness such as to symptoms take will come of leukocytes decrease while of the organism to infections against to fight ability weakens, thrombocytopenia while blood leave risk increases.

Research results that's it shows that aplastic anemia diagnosis in putting laboratory analysis results important important have General blood in the analysis pancytopenia to be determined and bone of the grave in the biopsy of cells decrease aplastic anemia diagnosis confirmation for important criterion is considered Also this in illness immune of the system autoimmune processes are also important role to play it is possible while immunosuppressive treatment apply necessity shows . Bone of the grave activity support and infections prevention get for antibiotics and antifungal drugs with treatment methods application need

**Conclusion**. Aplastic anemia bone in the grave blood harvest doer of cells work release violation with described serious hematological is a disease . This in illness of blood all elements in the amount decrease - pancytopenia it is observed while in patients anemia , infections inclination and blood leave risk increases . Research results aplastic anemia diagnosis in putting laboratory analysis results and bone of the grave biopsy important role to play shows . It's early diagnosis and treatment measures of patients life quality in improvement big important have That's it with together , immunosuppressive treatment and bone the bone transplantation such as methods of patients from illness treatment opportunity increases .

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