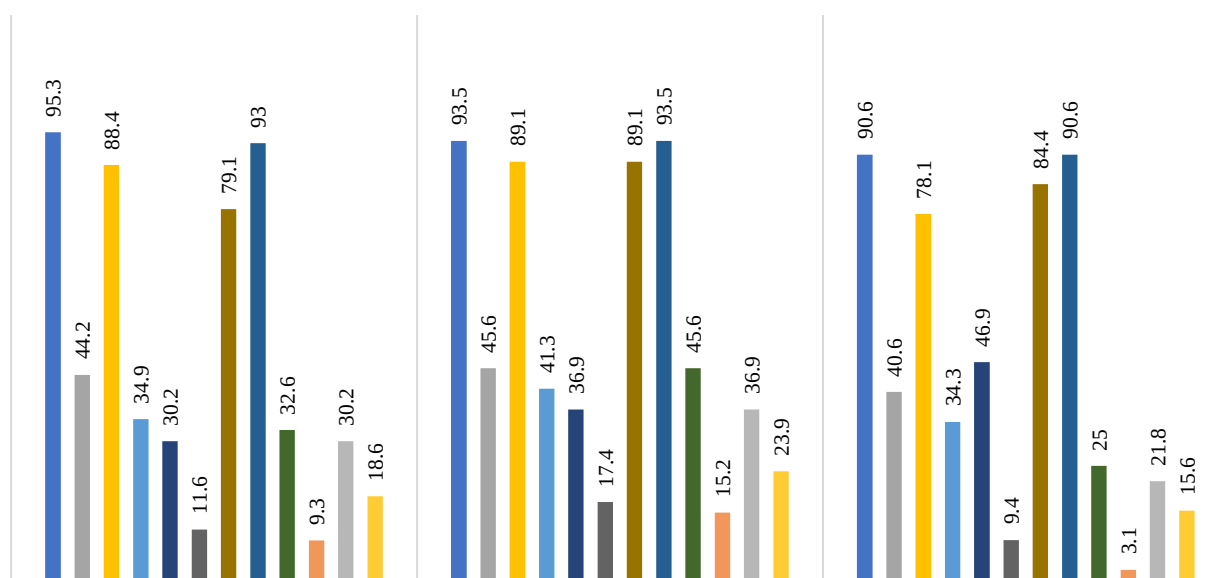


Comparative Characteristics of the Premorbid Background of Clinical Curve

Ruzikulova Yulduz Babarakhimovna
Bukhara State Medical Institute

Relevance of the study. When analyzing the occurrence of nasal obstruction in patients treated with a deviated nasal septum against the background of a premorbid disease by group according to their complaints and clinical signs, the following results were obtained. Patients in the control group treated with a deviated nasal septum against the background of a premorbid disease complained of difficulty breathing through the nose in 41 (95.3%) cases. In the patients of the main group, difficulty breathing was detected in 43 (93.5%) patients, while in the traditional group it was detected in 29 (90.6%) cases, and the division of patients into groups according to this symptom is almost the same. In the control group, patients with a deviated nasal septum against the background of a premorbid disease, nasal congestion was observed in 19 (44.2%) cases, in the main group in 21 (45.6%) cases, and in the traditional group in 13 (40.6%) patients were recorded in children. Although this indicator differs numerically in groups, it has almost the same indicator in terms of percentage.



1 - picture. Distribution of patients with premorbid nasal septum curvature according to complaints and clinical symptoms

(88.4%) patients (with premorbid disease) complained of headaches, in the main group, 41 (89.1%) patients complained of headaches, and in the traditional group, 25 (78.1%) patients complained of headaches. The relatively low incidence of this indicator in the traditional group is explained by the absence of premorbid background - concomitant diseases in this group of patients. In the control group patients with a premorbid disease of the nasal septum, sleeping with their mouth open, complaints of dry throat were observed in 15 (34.9%) children, in the main group, patients slept with their mouth open, complained of dry throat in 19 (41.3%) cases, and in the traditional group, patients slept with their mouth open, complained of dry throat in 11 (34.3%) cases. was observed in this case, and the groups have almost the same indicator according to this indicator.

In the control group, patients with a deviated nasal septum on the background of a premorbid disease complained of frequent sore throat in 5 (11.6%) patients, in the main group, patients complained of frequent sore throat in 8 (17.4%) cases, and in the traditional group, patients complained of frequent

sore throat in 3 (9.4%) cases. The relatively low incidence of this indicator in the traditional group is explained by the absence of premorbid background - concomitant diseases in this group of patients.

(79.1%) children of the control group patients with nasal septum curvature against the background of premorbid disease, weakness and rapid fatigue were observed in 41 (89.1%) cases of patients in the main group, and in 27 (84.4%) cases of patients in the traditional group, this indicator was relatively similar in the control groups. observed.

In patients suffering from a premorbid disease of the nasal septum, a complaint of decreased sense of smell on the 2nd-3rd day of the operation was detected in 40 (93.0%) patients in the control group, in 43 (93.5%) cases in the main group, and in 29 (90.6%) patients in the conventional group. This complaint is found in more than 90.0% of patients of all groups and is one of the main complaints that assess the patient's general condition.

In patients with premorbid nasal septum curvature, 14 (32.6%) patients in the control group, 21 (45.6%) patients in the control group, and 8 (25.0%) patients in the traditional group had 8 (25.0%) patients with prolapse of the jaw teeth. This clinical sign has a high reliability level ($r < 0.05$) in the main group. Patients suffering from nasal septal curvature premorbid disease complained of hearing loss in 4 (9.3%) children in the control group, in 7 (15.2%) cases in the main group, and in 1 (3.1%) child in the traditional group.

This clinical sign has a high level of reliability ($p < 0.05$) in the traditional group, but this is due to the small number of observations. In patients with a deviated nasal septum on the background of a premorbid disease, neurosis was detected in 13 (30.2%) sick children in the control group, in 17 (36.9%) in the main group, and in 7 (21.8%) in the traditional group. The occurrence of this clinical sign was relatively evenly distributed across groups.

Cosmetic defects in the face-jaw area were found in 8 (18.6%) patients in the control group, cosmetic defects in the face-jaw area in 11 (23.9%) patients in the main group, cosmetic defects in the face-jaw area in 7 (21.8%) patients in the conventional group. Although the frequency of cosmetic defects in the face-jaw area is numerically less common in the traditional group, there are no strong differences between them in terms of percentage.

Acidosis in the wound area is important for the regeneration and healing processes. It was also determined in the concentration of hydrogen ions (pH environment) of the mucous membrane in the nasal septum. The alkaline-acidic pH environment of the nasal mucosa is associated with the production of the mucociliary apparatus, and after surgical intervention with the separation of damaged tissue in this area. The alkaline-acidic environment in a healthy nasal cavity is on average 7.3-7.4 by pH-metry. The shift of the studied average pH indicators towards acidosis indicates ischemia and microcirculation disorders in the wound. To assess the effectiveness of treatment in groups of patients with nasal septum curvature against the background of premorbid diseases, the following were determined.

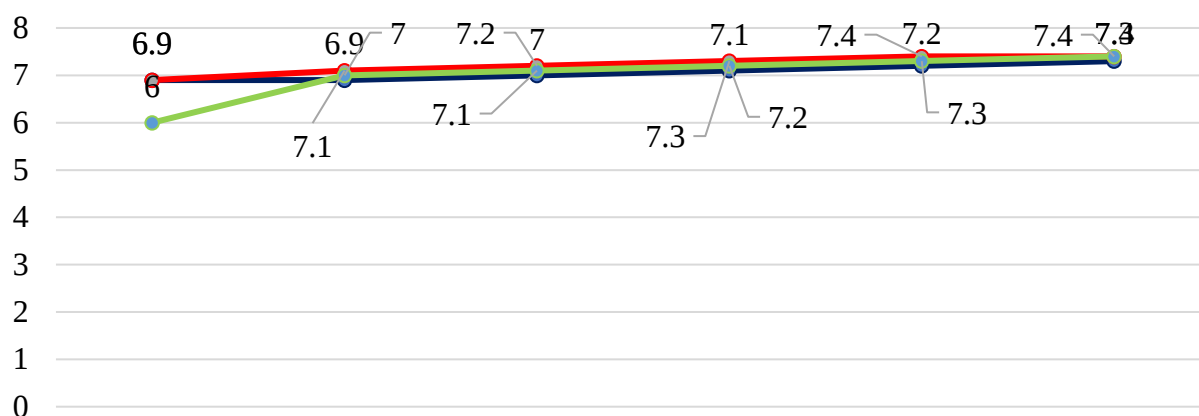


Figure 2. Dynamic indicators of rN in the field of curvature of the nasal septum in groups of patients against the background of premorbid disease

When children with premorbid nasal septum curvature were studied and analyzed before surgery, the pN in the nasal septum adventitia was 6.9 ± 0.03 in the traditional and basic groups, and 7.0 ± 0.04 in the control group. Before the operation, the average indicator of rN in all groups indicated the presence of weakly acidic - mild acidosis.

In order to evaluate the effectiveness of treatment in groups of patients with premorbid curvature of the nasal septum, the post-operative dynamics of rN-alkaline acid medium in the nasal septum adventitia of patient children was studied. The postoperative dynamics of rN environment in the nasopharyngeal adventitia of the traditional group of children was studied, on the 2nd day weak acidosis rN was 6.9 ± 0.03 on average, and on the 3rd day it was observed that relative neutrality rN was 7.0 ± 0.02 on average. In the following days of dynamic observation, a weak alkaline environment appeared in the wound area, and on the 6th day of observation, the average pH was equal to 7.3 ± 0.02 . When studying the postoperative dynamics of rN medium in the nasal septum adventitia of the main group of patients, it was found that on the 2nd day after the operation, the rN medium showed an average of 7.1 ± 0.04 , weak alkalization in the wound area on the 4th day after the operation, the rN averaged 7.3 ± 0.03 , which is equal to the rN of a healthy nose. On the 5-6th day after the operation, the pH of the patient's nasopharyngeal adventitia was 7.4 ± 0.02 .

When studying the postoperative dynamics of rN medium in the nasopharyngeal adventitia of the control group, it was found that on the 2nd day after the operation, the rN medium showed an average of 7.0 ± 0.04 , weak alkalization in the wound area, on the 4th day after the operation, the rN averaged 7.2 ± 0.03 . On the 5-6th day after the operation, the pH of the nasal septum of the patient was 7.4 ± 0.02 , which is equal to the pH of a healthy nose.

Based on the obtained data, it can be said that the post-operative dynamics of pN-alkaline acid medium in the nasal septum adventitia of sick children provides sufficient information about the regeneration taking place in the wound in order to evaluate the effectiveness of treatment in groups of patients suffering from premorbid disease of the nasal septum. The main group of children of patients in the post-operative dynamics of the RN environment in the nasal septum adventitia, from the 2nd day after the operation, the RN environment becomes neutral and shifts to the alkaline side, and from the 4th day, it becomes equal to the alkaline-acidic environment of the healthy nasal cavity adventitia. This indicates that this indicator occurs 2-3 days earlier than the indicators of the conventional and control groups.

Based on the data studied in the study, it can be said that in patients with a deviated nasal septum on the background of a premorbid disease, one of the main complaints is a decrease in the ability to

perceive smell - hyposmia. Olfactometry was performed to determine the specific features of the development of the ability to perceive smell in children with a deviated nasal septum, especially on a premorbid background. Olfactometry allows you to study the qualitative and quantitative disorders of the olfactory function. According to the sources studied, 4 degrees of decrease in the ability to perceive smell - hyposmia were distinguished. Level 1 - perceives a weak smell; Level 2 - perceives a moderately strong smell; Level 3 - perceives a strong smell and Level 4 - perceives a very strong smell (Table 1) .

Table 1. A comparative analysis of the degree of olfactory impairment in patients with nasal septal curvature

No.	groups	Level of olfactory impairment (n ,%)			
		Level 1	Level 2	Level 3	Total:
1	Control (n= 43)	4 (9.3%)	3 (7.0%)	-	7 (16.3%)
2	Main (n= 46)	5 (10.9%)	3 (6.5%)	-	8 (17.4%)
3	Traditional (n= 32)	3 (9.4%)	1 (3.1%)	-	4 (12.5%)
	Total: (n= 121)	12 (9.9%)	7 (8.4%)	-	19 (15.7%)

In order to evaluate the effectiveness of treatment in groups of patients suffering from premorbid disease of the nasal septum, the level of olfactory disorder was determined in groups before surgical procedure - septoplasty. When analyzing the degree of olfactory disorder before surgery, 4 (9.3%) olfactory disorders of the control group were found in 4 (9.3%) children, and 2 (7.0%) of olfactory disorders were found in 3 cases. In this control group, 3 - 4 degree of olfactory disorder was not observed, 1 - 2 degree of olfactory disorder was observed in 7 (16.3%) patients of this group.

The following results were observed when the level of olfactory disorders in patients with premorbid disease of the nasal septum was determined by groups in order to evaluate the effectiveness of treatment by groups (Table 4). In the control group patients with premorbid disease of the nasal septum, on the 3-4th day after septoplasty, 23 (53.5%) olfactory disturbances of the 1st degree, 2nd olfactory disturbances in 15 (34.9%) cases, and 2 (4.6%) olfactory disturbances of the 3rd degree were observed. In general, 40 (93.0%) cases of olfactory disorders were observed in control group patients 3-4 days after septoplasty. 24 (52.2%) of 24 (52.2%) children had olfactory disorders of the 1st degree, 17 (36.9%) of the 2nd degree of olfactory disorders, and 2 (4.3%) of 2 (4.3%) of the 3rd degree of olfactory disorders in the main group of patients with a premorbid disease of the nasal septum. In general, 43 (93.5%) of 43 (93.5%) olfactory disorders in the main group of patients 3-4 days after septoplasty was observed in a case.

19 (59.4%) 19 (59.4%) children of the traditional group of patients suffering from premorbid disease of the nasal septum had olfactory disorders 1st degree, 9 (28.1%) 9 (28.1%) 9 (28.1%) 9 (28.1%) 9 (28.1%) 9 (28.1%) 9 (28.1%) 9 (28.1%) 9 (28.1%) 28.1% of olfactory patients had 3rd degree olfactory disorders after septoplasty. In general, 3-4 days after septoplasty, olfactory disorders were observed in 29 (90.6%) cases in the traditional group of patients.

Table 2. After septoplasty in patients with premorbid background Comparative analysis of the level of olfactory disorders in 3-4 days

No.	groups	Level of olfactory impairment (n ,%)			
		Level 1	Level 2	Level 3	Total:
1	Control (n= 43)	23 (53.5%)	15 (34.9%)	2 (4.6%)	40 (93.0%)
2	Main (n= 46)	24 (52.2%)	17 (36.9%)	2 (4.3%)	43 (93.5%)
3	Traditional (n= 32)	19 (59.4%)	9 (28.1%)	9 (28.1%)	29 (90.6%)
	Total: n= 121	66 (54.5%)	41 (33.9%)	5 (4.1%)	112 (92.6%)

In general, on the 3-4th day after the septoplasty operation, olfactory disorders of varying degrees 1-3 and more than 112 (92.6%) patients in all groups are observed in children. In general, 66 (54.5%)

grade 1 olfaction disorders, 41 (33.9%) 41 (33.9%) 41 (33.9%) 41 (33.9%) 41 (33.9%) 4.1% olfactory disorders, and 5 (4.1%) 4.1% grade olfactory disorders experienced 3-4 days after septoplasty.

The following results were observed when the level of olfactory impairment of patients was determined by groups on the 6-7 days after the surgical procedure - septoplasty, in the comparative evaluation of clinical signs to evaluate the effectiveness of treatment by groups of patients suffering from premorbid disease of the nasal septum (Table 3).

Table 3. After septoplasty in patients with premorbid background Comparative analysis of the degree of olfactory disorders in 6-7 days

No.	groups	Level of olfactory impairment (n ,%)			
		Level 1	Level 2	Level 3	Total:
1	Control (n= 43)	18 (41.9%)	6 (13.9%)	-	24 (55.8%)
2	Main (n= 46)	12 (26.1%)	5 (10.9%)	-	17 (36.9%)
3	Traditional (n= 32)	2 (6.3%)*	1 (3.1%)*	-	3 (9.4%)*
Total: n= 121		32 (26.4%)	12 (9.9%)	-	44 (36.4%)

confidence level ($r < 0.01$)

6-7 days after septoplasty in control group patients with premorbid disease of nasal septum, 18 (41.9%) 18 (41.9%) children had olfactory disorder, 6 (13.9%) 6 (13.9%) 6 (13.9%) olfactory disorders, 3-4 levels of olfactory disorders were not observed in children of this group. Overall, control group patients had 24 (55.8%) olfactory disorders 6-7 days after septoplasty. was observed in ta case. 12 (26.1%) children of the 1st degree of olfactory impairment, 2nd degree of olfactory impairment in 5 (10.9%) cases, 3-4 degree of olfactory impairment were not observed in children of this group. In general, 6-7 days after septoplasty, olfactory disorders were observed in 17 (36.9%) cases in the traditional group of patients .

3-4 days after septoplasty in the traditional group of patients with a premorbid disease of the nasal septum, olfactory impairment of the 1st degree was observed in 2 (6.3%) children, olfactory impairment of the 2nd degree was observed in 1 (3.1%) case, olfactory impairment of the 3-4th degree was not observed in this group of children. In general, 6-7 days after septoplasty in patients of the traditional group, olfactory disorders were observed in 3 (9.4%) cases, the level of reliability is ($r < 0.01$).

In general, 6 - 7 days after septoplasty operation, only 1-2 degree of olfactory disturbance is observed in 44 (36.4%) children in all groups. In general, on the 6-7th day after septoplasty surgery, olfactory impairment of 1 degree was observed in 32 (26.4%) cases, and olfactory impairment of 2 degree was observed in 12 (9.9%) cases. This case shows that in patients without a traditional premorbid background, the olfactory disorder recovers earlier after septoplasty surgery for nasal septum curvature than in patients with a background of premorbid disease of the nasal septum. In the main and control groups, patients with septoplasty had a premorbid disease of the nasal septum.

In order to evaluate the effectiveness of treatment in groups of patients suffering from the premorbid disease of the nasal septum, the following clinical signs were obtained : smoother breathing through the nose, reduction of swelling in the nasal cavity, pain in the area of the injury (nose), cessation of discharge from the injury (nose), reduction of headache, primary healing of the injury, and days of hospitalization of the patients .

The smoothness of nasal breathing is important in the comparative evaluation of clinical signs in order to evaluate the effectiveness of treatment by groups of patients with premorbid disease of the nasal septum . This clinical sign - smoothness of nasal breathing in the control group was on average 7.1 ± 0.2 days, smoothness of nasal breathing was on average 5.9 ± 0.3 days in the main group, smoothness of nasal breathing was on average 6.4 ± 0.2 card days in the traditional group.

Reduction of swelling in the nasal cavity is one of the local signs that evaluate the course of inflammation in the comparative evaluation of clinical signs in patients with premorbid disease of the nasal septum to evaluate the effectiveness of treatment by group. The reduction of swelling in the nasal cavity was 10.2 ± 0.3 card days in the control group, the reduction of swelling in the nasal cavity was 5.4 ± 0.3 card days in the main group, and the reduction of swelling in the nasal cavity was 8.1 ± 0.2 card days in the conventional group.

patients suffering from premorbid disease of the nasal septum were analyzed in the comparative evaluation of clinical signs in order to evaluate the effectiveness of treatment by groups, the pain retention in the area of injury (nose) was analyzed on average in children in the control group of 8.3 ± 0.2 kart days, while pain retention in the area of injury (nose) was 4.7 ± 0.3 kart days in the main group, while the traditional in the group, the average duration of pain in the area of injury (nose) was 6.4 ± 0.3 card days. This indicator provided remission in the main group patients almost twice as fast as the average control group patients.

Table 4 Distribution of clinical signs of treatment effectiveness by groups against the background of premorbid disease of the nasal septum

Clinical signs	Groups (n , %)		
	Control n= 43 M± m	Main n= 46 M± m	Traditional n = 32 M± m
Streamlining of breathing through the nose	7.1 ± 0.2	5.9 ± 0.3	6.4 ± 0.2
Reduction of swelling in the nasal cavity	10.2 ± 0.3	$5.4 \pm 0.3^*$	8.1 ± 0.2
Pain in the area of the wound (nose).	8.3 ± 0.2	4.7 ± 0.3	6.4 ± 0.3
Stoppage of discharge from injury (nose).	6.2 ± 0.2	$3.7 \pm 0.2^*$	5.3 ± 0.2
Decreased headache	7.2 ± 0.2	4.8 ± 0.2	5.6 ± 0.2
Primary wound healing	8.1 ± 0.2	5.7 ± 0.3	7.1 ± 0.3
Days of the patient's stay in the hospital	8.7 ± 0.2	5.8 ± 0.3	7.3 ± 0.3

* confidence level ($r < 0.05$)

in the comparative assessment of clinical signs in order to assess the effectiveness of treatment in groups of patients with a premorbid disease of the nasal septum, the cessation of discharge from the wound (nose) in the control group of sick children was 6.2 ± 0.2 calendar days, while in the conventional group the cessation of discharge from the wound was an average of 5.3 ± 0.2 calendar days. In the main group, the cessation of discharge from the wound (nose) was an average of 3.7 ± 0.2 calendar days, which is almost twice as good as the control group ($p < 0.05$). The indicators of the main group in this indicator differ positively from the other studied groups.

In order to evaluate the effectiveness of treatment in patients with nasal septum premorbid disease, in the comparative evaluation of clinical symptoms, when analyzing the duration of headache complaints in children in the control group, the decrease in headache complaints in children in the control group was 7.2 ± 0.2 card days on average, in the main group, the decrease in headache complaints in children in the main group was 4.8 ± 0.2 card days in average. organizes. In the traditional group, the decrease in the complaints of headache in children was 5.6 ± 0.2 days on average. In terms of this clinical indicator, the indicators of the children of the main group of patients differ significantly from the indicators of the control and traditional groups.

In the comparative evaluation of clinical signs in order to assess the effectiveness of treatment by groups of patients with premorbid nasal septal curvature, when analyzing the primary healing of the patient injury, the primary healing of the patient injury in the control group was 8.1 ± 0.2 card days on

average, in the main group, the primary healing of the patient injury was 5.7 ± 0.3 card days on average. In the conventional group, the reduction of the primary wound healing in children patients was 7.1 ± 0.3 card days on average. In terms of this clinical indicator, the indicators of the children of the main group of patients differ significantly from the indicators of the control and traditional groups.

One of the main indicators determining the effectiveness of patient treatment is the number of days of hospitalization. When analyzing this clinical sign to assess the effectiveness of treatment by groups of patients with premorbid nasal septum curvature, the average number of days of hospitalization in the control group was 8.7 ± 0.2 days. The average number of days of hospitalization in the main group was 5.8 ± 0.3 days. In the traditional group, this indicator averaged 7.3 ± 0.3 days. This indicator - the average number of days of hospitalization of patients - was the best in the main group, while the indicators of the traditional and control groups were relatively higher.

Thus, the main results obtained are that the patients in the group receiving combined treatment had significantly better results in all clinical indicators than the groups with premorbid background and without nasal septum curvature. When nasal septum curvature is detected as a premorbid comorbid disease, treatment with splints and merocele as an etiopathogenetic and local treatment against the premorbid disease is highly effective against the background of traditional treatment.

Used literature

1. Pneumonia. Information bulletin WHO No. 331, November 2014.
<http://www.who.int/mediacentre/factsheets/fs331/ru/>.
2. Atadjanov , M., & Bobokhanov , M. (2021). Otsenka sostoyaniya stenok polosti nosa s iskrivleniyami peregorodki nosa u podrostkov. *Journal of biomedicine and practice* , 1 (3/1), 266-272.
3. Sh . Amonov, Kh . Karshiev , D. Enazarov , F. Normuminov . Therapeutic tactics of patients with post-covid pus-vospalitelny oslojneniya chelyustno-litsevoy oblasti // Dentistry . 2021/2/26 p. 92-95 .
4. Mahmudnazarov Mahmadamin Imamovich , & Tuydiev Sh.Sh. (2012). Sovremennye metody khirurgicheskogo lecheniya deformation nosovoy peregorodki. *Vestnik Avitsenny*, (4 (53)), 56-61.
5. Piskunov G.Z., Piskunov S.Z. Clinical rhinology. Publisher: Medical Information Agency (MIA). 2017. Str. -750.
6. S. A. Hasanov, S. N. Maksudov , G. K. Babakhanov . Endonasalnaya osteoplastika sredinnogo nebnogo shva u detey s iskrivleniem peregorodki nosa pri anomalyakh razvitiya verkhney chelyusti // Vestnik Kyrgyzskoy gosudarstvennoy meditsinskoy akademii imeni IK Akhunbaeva 2019 №2 p. 66-71.
7. Alimova , DD, & Sagidullaeva , DB (2025). THE CLINICAL CHARACTERISTICS OF PATIENTS AND TREATMENT OF CHRONIC POLYPOUS RHINOSINUSITIS. *Central Asian Journal of Medicine* , (2), 32-41.
8. Vogt K., Jalowayski AA, Althaus W., Cao C., Han D., Hasse W., Hoffrichter H. , Mosges R., Pallanch J. , ShahHosseini K., Peksis K., Wernecke KD, Zhang L., Zaporoshenko P. 4-Phase-Rhinomanometry (4PR) – basics and practice 2010. *Rhinol Suppl.* 2010 ;21:1–50 .
https://www.researchgate.net/publication/45280185_4-PhaseRhinomanometry_4PR--basics_and_practice_2010
9. Mamatova , S. (2024). ORBITAL COMPLICATIONS IN RHINOSINUSITIS IN YOUNG CHILDREN. *Science oath innovation* , 3 (D7), 78-82.
10. Rasulova , NA (2025). CLINICAL PRESENTATION AND TREATMENT OF PHARYNGEAL TONSIL HYPERTROPHY IN CHILDREN WITH TORCH INFECTION. *Central Asian Journal of Medicine* , (3), 284-291.

11. Shari D. Reitzen, Nasal Septal Deviation in the Pediatric and Adult Populations - First published online March 1, MD sreitzen@gmail.com, 2011.