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TO DEVELOP A DIAGNOSTIC ALGORITHM IN COMBINATION OF X-RAY ANATOMY, TYPE AND AGE

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Relevance of the study. Despite extensive studies of the age-related constitutional characteristics of men and women, various organs and systems, the stomach as a specific morphological constitution of the organ level has not been given sufficient attention. Many studies have been devoted to the X-ray anatomy of the stomach and the structure of its musculoskeletal tissue complex, but all of them were conducted at the local level and without taking into account the type and pathology [Pervushin V.V., Masalova. A.V., Derkach A.A. 2020]. The human constitution is relevant today, although it dates back to ancient times, this concept is characteristic of a person from birth and is reflected unchanged throughout his life [Kharitonov D.V., Sapozhnikov V.G., Kharitonova L.A., 2022]. The constitution can be defined as a set of physical, psychodynamic and other characteristics reflecting the state of reactivity [Shabalov N.P., Arsentiev V.G., Ivanova N.A. et al., 2016]. In medical morphology, the constitution is the main feature of the whole organism, fully embodying the idea of the qualitative unity of its biological organization [Yamaoka Yu. 2010]. A large number of works have been carried out showing the constitutional conditionality of the parameters of the human body's vital activity at various levels [Satorov S. 2015]. And one of the most important factors in the development of pathologies of the entire gastrointestinal tract is the genetic and constitutional factor [Zashikhin A.L., Timchenko S.A., Pakhtusova N.A., Ozornina O.S., 2000].

The aim of the study is to study the age-related features of the X-ray anatomy of the stomach and develop a differential diagnostic algorithm.

The study examined X-rays of 300 women and men from newborns to 70 years old who were treated in hospital for gastrointestinal pathologies. The persons of the studied category are divided into 3 groups: group 1 – the control group; group 2 – men with diseases of the gastrointestinal tract; group 3 - women with diseases of the gastrointestinal tract.

The subject of the study will be X-ray and MSCT images, as well as ultrasound and FGDS results. The research methods used are anthropometric, morphometric, X-ray, as well as statistical research methods. The most common diseases of the stomach and duodenum:

1) acute and chronic gastritis and duodenitis (more often superficial catarrhal, less often hyperplastic or atrophic, the acidity of gastric juice increases, is normal and even decreases);

2) duodenogastric reflux;

3) erosions of the stomach and duodenum (acute, chronic, scarring) and other pre-ulcerative conditions;

4) gastric ulcers and symptomatic ulcers of the stomach and duodenum (especially with increased production of glucocorticoids and decreased secretion of mineralocorticoids);

5) stomach polyps.

The X-ray examination of the gastrointestinal tract includes X-ray television transmission and radiography under the control of transmission. Television X-ray examination is used to study the motor function of the digestive organs, as well as to select the optimal projection, the moment of filling and mobility, and the degree of compression of target images. X-ray examination of the stomach, esophagus and small intestine is performed on an empty stomach, on the day of the study the patient is forbidden to drink and smoke. The gastrointestinal tract is a hollow tube without connection, its structure and functions. they depend on the department. And in this regard, different methods of examining the esophagus, stomach, small and large intestine are used. At the same time, there are general rules for X-ray examination of the gastrointestinal tract. There is a German classification of human body types, which consists of three components: - asthenic (hyposthenic), low diaphragm position, elongated teardrop-shaped small heart, elongated lungs, short intestine length with reduced absorption capacity, decreased blood pressure, low

cholesterol in the blood, increased metabolism. with dissimilation processes; - hypersthenic, high diaphragm location, large stomach and long intestine with high absorption capacity, large heart located horizontally, prone to high blood pressure, high levels of cholesterol and uric acid in the blood. , the number of red blood cells increases, assimilation processes accelerate, there is a tendency to obesity;

- normosthenic - moderately saturated, proportionally developed type According to the V.P. somatotyping scheme, 5 main somatotypes of Khtesov are distinguished in men: asthenic, thoracic, muscular, abdominal and eurysomal. In addition to these "pure" somatotypes, men also have an ambiguous somatotype. it occupies an intermediate position between the chest and the abdominal cavity . V.P. Chitetsov identifies 7 somatotypes in women: asthenic, stenoplastic, picnic, mesoplastic, euriplastic, subathletic, athletic. Depending on the peristalsis, there are deep, segmental, medium and superficial peristalsis or its complete absence. Evacuation of the formed barium suspension from the stomach is carried out in the first 30 minutes. Complete emptying of the stomach occurs within 1.5 hours. The results of gastric X-ray are analyzed by a gastroenterologist and a radiologist.

The constitutional factor is an important and integral part of the development of any disease, including chronic diseases of the gastrointestinal tract. The study of the dependence of the features of the course of pathology of the gastrointestinal tract in humans on the type of constitution seems promising for further study. This should be taken into account by clinicians as part of an individual approach to the patient. Polyps are exophytic formations protruding into the stomach cavity, usually rounded or spherical in shape, less often cauliflower in shape. The polyp may have a clear pedicle or be located on a wide base. There are single, multiple polyps and gastric polyposis. Polyposes are mentioned in cases where they are difficult to count. Polyps occur on the mucous membrane of the stomach. It is localized mainly in the antrum and the body of the stomach. Their sizes vary from several mm to 5 cm, the frequency of polyp malignancy according to different authors ranges from 0 to 60%, and multiple polyposis - up to 100%. The inconsistency of the data is due to the fact that polyps are a morphologically heterogeneous group. The following types of polyps are distinguished: neoplastic polyps (flat adenoma, adenomatous polyps) and non-tumor polyps (hyperplastic fundal gland polyps, inflammation, age-related, etc.). Hyperplastic or regenerative polyps make up the majority of polyps that rarely undergo malignant transformation. The tumor usually does not occur in the polyp itself, but in the surrounding mucous membrane, where metaplastic epithelial dysplasia may occur.

Adenomatous polyps have the greatest risk of degeneration into a malignant tumor. An adenoma is a real benign tumor of glandular tissue. According to the histological structure, the adenoma can be papillary, tubular or villous. The greater the number of polyps and their size, the higher the risk of malignancy. Single polyps larger than 2 cm undergo malignant degeneration in 40%, the same, but more - in 55%. With a polyp size of up to 1 cm, malignancy is detected in 5%, with a diameter of 3 cm or more - almost 50%.

Conclusion. Since they do not have pathognomonic signs, they are usually detected when examining patients for other stomach diseases — more often chronic gastritis. The main methods of diagnosis of gastric polyps are endoscopic and X-ray examination. Since the results of a polyp biopsy do not always reflect its true nature, a polypectomy with a detailed histological examination of the removed formation is necessary. Currently, the method of endoscopic polypectomy is used for this purpose.

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