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TENOXICAMINE IN THE TREATMENT OF RHEUMATOID ARTHRITIS **EFFECTIVENESS STUDY**

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Materials and methods: To achieve this goal, an examination was carried out in the hematology department of the regional hospital. All patients were diagnosed with PA with varying degrees of activity. The age of the patients varied from 28 to 60 years, the average age of the patients was 28+20 years. The duration of the disease varied from 4 to 15 years, with an average duration of 6.4+/-2.8 years. A complete clinical and laboratory instrumental study was carried out, which corresponded to the criteria for admitting patients with RA. Monitoring was carried out to assess the level of PA activity using the CRP index in the blood of patients DAS28 is carried out in accordance with the index. Immunoenzymatic analysis of IL-6 in serum is a graphical representation of a cystic joint. The indicators obtained as a result of the staff processing were recorded in Microsoft Excel 2010 on a computer.

Results: The results of the indicators during the study showed that in the first group (I group) the level of disease activity was: retarded development was observed in 59.3%, fast - in 35.8% of patients. The following table shows the results of the study. An x-ray performed on patients revealed stages 1-2 in 59% of patients and 41% in 3-4 patients. Serological studies - in 72.5% of patients with RF (+) seropositive variants and 27.5% of patients with RF (-) seronegative variants, endoscopy was performed in all patients. Of all patients with PA, 39% experienced pain in the upper abdomen, and 26% had dyspeptic syndrome. Erosive lesions of the gastric mucosa were also found in 1 of the patients of group 50 and 2 of the patients of group 42, esophagitis - in 1 of the patients of group 42 and 2 of the patients of group 2.

Dynamics of endoscopic visualization: Of the 4% of patients with duodenal ulcer included in the study with residual ulcer, healing was observed in 3%. In one case, 3% of patients with duodenal ulcer had a history of acute ulceration of the duodenal bulb and grade III erosive esophagitis during follow-up. In the first case, erosive bulbitis and erosive gastritis were present. Attention is drawn to the fact that the occurrence of erosive esophagitis was manifested by the appearance of heartburn and was observed in patients aged 70 years. Patients with a stomach ulcer had a history of healing of a residual ulcerative defect (one patient) and erosive gastritis (one patient). In the group of patients with erosive vestibular gastritis in history,

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erosive healing was observed in 8% of patients, one of whom developed erosive esophagitis against the background of erosive healing. The other two patients had no deterioration in the condition of the gastric mucosa. None of the seven patients with erosive vestibular gastritis who had localized vestibular gastritis at the time of inclusion in the study had mucosal deterioration.

Conclusion: Thus, negative endoscopic dynamics when using combined therapy was observed in three patients (10%) in the form of erosive esophagitis of I-III degree and in one case of the duodenal sphere at the same time, all these patients noted the appearance of heartburn. The effectiveness of combined therapy was highly appreciated: 73.3% of patients in group 1 noted an improvement, and 39.7% - a significant improvement. Tolerability was described as good in 86.6% of patients and satisfactory in 13.3% of cases. Satisfactory assessments of treatment were given to three patients in connection with the appearance of reflux esophagitis, who noted the appearance of heartburn and nausea, while dryness and nausea were observed in one patient. It should be noted that the observed side effects were mild, occurred on the 2nd-4th day of treatment and did not lead to the abolition of drugs of the 1st group. Arthralgia was observed in 2% of patients of group 2.