



THE EFFECT OF ULTRAVIOLET RAYS ON THE RESISTANCE OF MICROFLORA IN THE TREATMENT OF PURULENT-SURGICAL DISEASES OF SOFT TISSUES

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Article history:	Abstract:
Received: October 10 th 2022 Accepted: November 10 th 2022 Published: December 20 th 2022	Wound infection, including postoperative infection, continues to be one of the most pressing problems in surgery. Solving the problems associated with microflora resistance undoubtedly improves the results of treatment for this category of patients. In the literature, there are significantly few studies devoted to the suppression of the existing microflora resistance. The purpose of the study: study of the influence of ultraviolet rays on the resistance of the microflora of purulent wounds. In 22 patients with purulent diseases of soft tissues, resistance to 15 antibiotics was studied on the day of admission and in the dynamics of local treatment using ultraviolet irradiation (UFO) of the wound in two biodoses. The results of the study showed: the treatment of purulent wounds with the use of ultraviolet irradiation of the wound in two biodoses, in addition to the bactericidal one, has an overwhelming effect on the resistance of microflora.
Keywords: purulent wound, resistance, ultraviolet irradiation.	

RELEVANCE

Purulent diseases of various localization, including soft tissues, as well as purulent complications of postoperative and accidental wounds have always been one of the important problems of surgery.

Purulent surgical diseases today account for up to 25-30% of the total number of surgical diseases, it is not uncommon for an unfavorable outcome of treatment, the completion of lethality or disability of patients. One of the main factors that plays a role in the outcome of treatment for this pathology is the resistance of microflora.

MATERIAL AND METHODS

The data of examination and treatment of 22 patients with purulent soft tissue wounds of various etiologies who were treated in the purulent surgical department of the clinical base of the Bukhara State Medical Institute in 2018-2020 were analyzed.

In the examined patients, on the day of admission, an emergency operation was performed to open a purulent focus and sanitize the purulent cavity with an antiseptic 3% solution of hydrogen peroxide, after drying, sanitization was performed with a chemical solution of 25% dimethyl sulfoxide, followed by the application of levomekol ointment and aseptic gauze bandages with a 25% solution of dimethyl sulfoxide.

From the first day, qualitative and quantitative studies of microflora were carried out from the isolation of wounds and the daily dynamics of antibiotic resistance was determined. In the course of treatment,

a step-by-step selection of antibiotics for local and general use was carried out.

RESULT AND DISCUSSIONS

In most cases, pathogenic staphylococcus is sown in 22 patients, of which 14 (19.4%) in the form of monoculture and 17 (23.6%) in associations. In 28 observations, E. coli was sown, which in 10 (13.9%) cases was present as a monoculture and in 18 (25.0%) as part of microbial associations. The next most frequently detected was proteus - 16 observations, seeded in 7 (9.7%) cases as a monoculture and in 9 (12.5%) as part of microbial associations.

This was followed by enterococci found in 14 observations, 7 (9.7%) in the form of monoculture and association, respectively, streptococci in 6 observations, 4 (5.5%) - monocultures and 2 (2.8%) in association. Pseudomonas Aeruginosa was sown in 2 (2.8%) patients as a monoculture and in 1 (1.4%) as part of microbial associations.

Dynamic control of the level of microbial contamination of purulent wounds in patients of this subgroup revealed the following: at the time of admission, microbial contamination, on average, was 108 mt/g, on the next day after surgical treatment of the wound with the application of an ointment dressing, its values were 105 mt/g. By 6-7 days of complex treatment in these patients, the degree of microbial contamination was lower critical level and amounted to 102mt/g of tissue.

The study of the dynamics of the sensitivity of microflora from the isolation of purulent wounds



revealed the following features, namely: in the treatment of purulent wounds with the use of UV wounds in two bioses per day, there was an increase in sensitivity to antibiotics in dynamics, i.e. the number of antibiotics to which the microflora is sensitive increases. In the course of treatment, the sensitivity of microflora to new antibiotics appears, when there was no sensitivity to these antibiotics on the day of admission.

The maximum peak of the expected results was achieved starting from the 8-9 day of treatment. At the same time, during the treatment on 8-9 days, they were accompanied by a maximum increase in the sensitivity of pathogenic microbes. As can be seen from Table No. 2, the microflora from the isolated purulent wounds of the III A subgroup of 15 antibiotics was only 26.7% sensitive to the third day of treatment, sensitivity to antibiotics increased to 46.7%, by 4, 5, 6, 7, 8 and 9 days there was a further increase in the amount of sensitivity of microflora to antibiotics, so 60%, 73,3%, 73,3%, 80%, 86,7% accordingly.

Thus, our studies revealed the following main features: the percentage of sensitivity to 15 antibiotics was only 26.7% by the third day of treatment, 33.3% of antibiotics were sensitive, and the further dynamics of these indicators had an increase in the number of sensitivity of microflora, and by the 7th day these indicators amounted to 66.7%. By 8-9 days these figures reached the maximum is up to 73.3%.

All this shows that when applying physical methods of influencing the microflora using UFO wounds in the course of treatment, the number of sensitivity of microflora to antibiotics increases.

CONCLUSIONS:

1. Local exposure to ultraviolet rays in two bioses (according to Dalfeldo-Gorbachev) has both bactericidal and suppressive properties on the resistance of microflora.

2. When using UFO wounds in two bioses during treatment on the third day, the microflora begins to lose resistance to antibiotics of purulent wounds.

3. Local exposure to UV wounds contributes to the expansion of the choice of antibiotics in the treatment of purulent wounds.

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