

IMPROVING ANESTHESIOLOGICAL PROTECTION IN SURGICAL AND GYNECOLOGICAL PATIENTS DURING SIMULTANEOUS OPERATIONS

Kurbonov Navruzbek Zayniddin o'g'li

*Samarkand State Medical University, Department of Anesthesiology,
Resuscitation and Emergency Medicine. Samarkand, Uzbekistan*

Abstract

This paper discusses reliable methods of anesthesia in simultaneous operations in surgical and gynecological patients. It evaluates the severity of surgical stress, the use of anesthesia techniques, the sedation component, artificial lung ventilation, anesthesia in surgery, and the impact of anesthetics and opioids on cognitive and psychomotor functions. The positive effects of combining epidural anesthesia with general anesthesia are also assessed.

Keywords: Surgery, complications, sedation component, anesthetics, anesthesia, epidural analgesia, spinal anesthesia, intravenous general anesthesia.

Relevance of the Study

Recent studies have allowed us to discover new patterns in the combination of diseases affecting various organs and systems that are pathogenetically related and coincidental. In 2021, the World Health Organization released statistics indicating that 25-30% of patients requiring surgical treatment have one or more comorbidities. Despite real opportunities to provide necessary medical care and achieve maximum medical, social, and economic benefits for this category of patients, only 1.5-6% of these patients have undergone simultaneous surgical interventions. The low number of simultaneous surgeries can be attributed to several factors, including inadequate preoperative patient examination, intraoperative examination of abdominal and pelvic organs, confirmation of the operational risk when using simultaneous surgeries, and the psychological readiness of surgeons and anesthesiologists to expand the scope of surgical intervention.

Objective of the Study

To assess the effectiveness of anesthesiological approaches in various simultaneous surgical and gynecological operations.

Materials and Methods

The study involved 80 surgical patients who underwent simultaneous operations in the abdominal cavity. Their ages ranged from 35 to 72 years (average 54.6 ± 6.6): 35 men (43.75%) and 45 women (56.25%). Patients were distributed according to the type of simultaneous surgery as follows: hernia and cholecystectomy – 29 patients, liver echinococcectomy and cholecystectomy – 16 patients, hemilaparotomy and

cholecystectomy – 18 patients, and hemilaparotomy and hysterectomy – 17 patients. In the main group (46 patients), the operations were conducted under combined general and epidural anesthesia. Epidural puncture and catheterization were performed 30-40 minutes after standard premedication. The puncture site was selected based on the affected organs. The local isobaric anesthetic longocaine (Ukraine) was administered at a dosage of 0.5%-1.5 mg/kg. In the control group (34 patients), total intravenous anesthesia was performed. General anesthetics included ketamine (5-6 mg/kg/hour), sodium thiopental (3-5 mg/kg/hour), NLA drugs, and the muscle relaxant arduan (0.04-0.06 mg/kg/hour).

Conclusion

The use of combined anesthesia (general + epidural) in traumatic simultaneous surgeries of the abdominal and pelvic organs ensured smooth intraoperative management, significantly reduced the consumption of narcotic analgesics and general anesthetics, and facilitated earlier awakening of patients. Postoperative epidural analgesia allowed for early activation of the patient, improved respiratory and intestinal function, reduced the duration of stay in the intensive care unit, and demonstrated economic efficiency.

Literature list

1. Курбонов, Н. З., Пардаев, Ш. К., & Матлубов, М. М. (2022). ОПТИМИЗАЦИЯ АНЕСТЕЗИОЛОГИЧЕСКОГО ПОСОБИЯ ПРИ СИМУЛЬТАННЫХ ОПЕРАЦИЯХ НА ОРГАНАХ БРЮШНОЙ ПОЛОСТИ. *Uzbek Scholar Journal*, 10, 52-56.
2. Zayniddinovich, Q. N., & Qo'yliyevich, P. S. (2022). QORIN BO'SHLIG'I SIMULTAN OPERATSIYALARDA ANESTEZOLOGIK YONDOSHUV SAMARADORLIGINI TAKOMILLASHTIRISH. *Journal of Integrated Education and Research*, 1(5), 116-121.
3. Kh, G. N., Kurbonov, N., Kh, K. E., & Matlubov, M. M. (2022). Optimization of Anesthesiological Approach for Recurrent Ventral Hernia in Obesity Patients. *Texas Journal of Medical Science*, 8, 10-14.
4. Kurbonov, N. Z., Raxmatov, F. I., & Giyosov, N. (2021). Optimization Of Anesthesia During Simultaneous Operations. *Texas Journal of Medical Science*, 3, 52-54.
5. Zayniddinovich, K. N., Qo'yliyevich, P. S., & Muratovich, M. M. (2022). OPTIMIZATION OF ANESTHESIOLOGICAL APPROACH IN RECURRENT ABDOMINAL HERNIA SURGERY IN PATIENTS WITH THIRD-DEGREE OBESITY. *Journal of new century innovations*, 18(1), 188-194.
6. Курбонов, Н. З. (2022). ОПТИМИЗАЦИЯ АНЕСТЕЗИОЛОГИЧЕСКОГО ДОСТУПА ПРИ ХИРУРГИИ РЕЦИДИВА ВЕНТРАЛЬНОЙ ГРЫЖИ У ПАЦИЕНТОВ С ОЖИРЕНИЕМ И АРТЕРИАЛЬНОЙ ГИПЕРТЕНЗИЕЙ. *ПОДКОР О'QITUVCHI*, 2(24), 431-439.
7. Zayniddinovich, K. N., & Kuilievich, P. S. (2023). STABILIZATION OF ANESTHETIC SUPPORT DURING SIMULTANEOUS ABDOMINAL AND PELVIC

- OPERATIONS. IJTIMOYIY FANLARDA INNOVASIYA ONLAYN ILMIY JURNALI, 3(6), 122-124.
8. Zayniddinovich, K. N., & Kuilievich, P. S. (2023). Improving the efficiency of anesthetic access during simultaneous abdominal and pelvic surgeries in patients with concomitant arterial hypertension. *IQRO*, 3(1), 12-15.
 9. Zayniddinovich, K. N., & Kuilievich, P. S. (2023). OPTIMIZATION OF ANESTHETIC SUPPORT DURING SIMULTANEOUS OPERATIONS ON THE ABDOMINAL AND PELVIC ORGANS. *BARQARORLIK VA YETAKCHI TADQIQOTLAR ONLAYN ILMIY JURNALI*, 3(1), 331-334.
 10. Sharipov, I. L., Xolbekov, B. K., & Kurbonov, N. Z. (2023). BOLALAR OFTALMOLOJARROHLIGIDA ANESTEZIYANI TAKOMILLASHTIRISH. *World scientific research journal*, 20(1), 107-112.
 11. Kurbanov, N. Z., & Sharipov, I. L. (2023). IMPROVEMENT OF ANESTHETIC PROTECTION IN SIMULTANEOUS OPERATIONS ON ABDOMINAL AND PELVIC ORGANS. *World scientific research journal*, 20(1), 113-116.
 12. Zayniddinovich, K. N., & Latibovich, S. I. (2024). IMPROVING ANESTHETIC PROTECTION AND BLOOD PRESSURE CONTROL IN SIMULTANEOUS ABDOMINAL AND PELVIC OPERATIONS IN OBESE PATIENTS. *JOURNAL OF APPLIED MEDICAL SCIENCES*, 7(1), 97-101.
 13. Sharipov, I. L., Qurbanov, N. Z., & Rakhmonov, S. (2023). IMPROVING AIRWAY PATENCY DURING OPERATIONS IN THE MAXILLOFACIAL REGION IN CHILDREN. *Academia Repository*, 4(12), 140-145.
 14. Zayniddinovich, K. N., Qo'zilyevich, P. S., & Latibovich, S. I. (2023). INCREASING ANESTHESIOLOGICAL PROTECTION DURING SIMULTANEOUS OPERATIONS ON THE ABDOMINAL AND PELVIC REGION IN PATIENTS WITH OBESITY. *Academia Repository*, 4(11), 321-325.
 15. Zayniddin o'g'li, Q. N. (2024). HAMROH SEMIZLIGI BOR BEMORLAR QORIN BO'SHLIG'I A'ZOLARI SIMULTAN OPERATSIYALARDA ANESTEZIYOLOGIK HIMOYANI TAKOMILLASHTIRISH USULLARI. *Лучшие интеллектуальные исследования*, 20(5), 3-6.
 16. Zayniddinovich, Q. N. (2024). COMBINED ANESTHESIA IN SIMULTANEOUS OPERATIONS OF GALLBLADDER AND SMALL INTESTINE. *ОБРАЗОВАНИЕ НАУКА И ИННОВАЦИОННЫЕ ИДЕИ В МИРЕ*, 46(2), 26-29.
 17. Komil o'g'li, D. M., & Zayniddinovich, Q. N. (2024). PECULIARITIES ANESTHESIA IN OPERATIONAL GYNECOLOGY U PATIENT WITH EXTRAGENITAL PATHOLOGY. *Journal of new century innovations*, 54(1), 7-15.
 18. Zayniddinovich, K. N., & Latibovich, S. I. (2024). ANESTHESIA OPTIMIZATION IN PEDIATRIC OPHTHALMIC SURGERY. *IMRAS*, 7(2), 44-48.