

Assessment of Changes in Coagulogram Parameters in Brain Vessels**Usmanova Durдона Jurabaevna**

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Abstract: The article discusses the assessment of changes in the parameters of the coagulogram of the cerebral vessels.

Keywords: brain, blood vessels, parameter, coagulogram, change, assessment.

Risk factors leading to poor circulation in the brain

Acute cerebrovascular accident is damage to the brain caused by vascular changes and is characterized by focal signs, general cerebral symptoms, meningeal symptoms, or a combination of these symptoms. Depending on how long the patient's neurological defects persist, a distinction is made between transient cerebrovascular accident and stroke. The most likely patients with this disease are patients with frequent emotional stress, inactivity, smoking, large body weight, diabetes mellitus, arterial hypertension, dyslipoproteinemia, hereditary predisposition to diseases of the cardiovascular system.

Acute ischemic cerebrovascular accident is caused by the brain's need for oxygen and energy substrates, the inability to supply the brain with blood, and a sudden deterioration in blood flow to the brain. The hemorrhagic type of acute cerebrovascular accident is characterized by hemorrhage into the brain tissue, ventricles and under the meninges as a result of a violation of the integrity of the vascular wall of the brain.

The study of the causes of cerebrovascular diseases has revealed a number of risk factors: the age of patients plays an important role in the development of the disease, and the risk of developing the disease increases with age. Although the disease mainly poses a risk for the elderly and the elderly, but with age, the risk of developing cerebrovascular diseases doubles every 10 years, for example, in the age group -44 it is 1: 5000, at the age of 65-74 years. in the group - 1: 100, in the age group 75-84 - 1:50, in the age group 84 and older - 1:30. It should be noted that disorders of cerebral circulation and lipid metabolism in the elderly and the elderly are interrelated with the origin of the pathology of atherosclerosis, and the development of atherosclerosis, in turn, leads to hypertension.

There are three main types of blood vessels (the first two are the most common):

- Ischemic. Or, as it happens, they call it "cerebral infarction." The most common type of stroke occurs in 80% of these cases. This stroke is a sudden disturbance of blood circulation in the brain (grossly - with tissue damage), as a result of which the normal functioning of the brain is disrupted due to the lack of blood supply in a certain area, and the so-called affected areas of

the brain are softened. According to statistics, this stroke causes 10-15% of deaths. Recurrent ischemic stroke is fatal in 60% of cases. Risk group: people over 60 years old, smokers, people with diabetes mellitus, and those who abuse fatty foods.

- Hemorrhagic. More "young" type of stroke: risk group - 45-60 years old. This type of stroke is bleeding into the brain tissue due to rupture due to pathological changes in the walls of blood vessels. That is, the walls of the vessels become very fragile and thin, after which they are destroyed under the influence of certain factors. This stroke occurs in 10% of cases, and death - in 40-80%. Development usually occurs suddenly and during daylight hours.
- Subarachnoid hemorrhage. This type of bleeding occurs in the space between the pia mater and the arachnoid membrane. Stroke accounts for 5 percent of all cases and the risk of death is very high. It will also be possible with the patient's disability, timely accepted and qualified medical measures.

It slows down blood circulation in the arteries, which leads to a permanent O₂ deficiency in the brain cells. This leads to memory loss. Alcohol causes early onset of sclerotic changes in the arteries and increases the risk of bleeding.

Hemodynamic factors. Decrease in blood pressure after myocardial infarction, arrhythmias, bleeding, orthostatic hypotension, iatrogenic effects, etc. The presence of several of the above factors in one patient can lead to the development of cerebrovascular diseases.

Diseases leading to impaired cerebral circulation:

- atherosclerosis;
- choking;
- concomitant atherosclerosis and coronary heart disease;
- High blood pressure in other diseases - symptomatic hypertension;
- arterial hypotension and symptomatic hypotension;
- heart defects - myocardial infarction and arrhythmias, congenital heart defects;
- vasculitis, endoarthritis (syphilitic rheumatic, allergic, toxic);
- aneurysms;
- blood diseases (aplastic anemia, erythremia, leukemia, thrombocytopenic purpura, etc.);
- Crushing of arteries and veins (for diseases and tumors of the spine);
- endocrine diseases;
- oncological diseases;
- syndrome of vegetative dystonia;
- intoxication (exo- and endogenous).

Everyone should prevent the development of cerebrovascular diseases as a result of the above factors.

Many women are tested for a body fluid called a coagulogram. This will help the doctor determine the state of hemostasis, determine the presence of a hyperstimulant or hypocoagulation. In addition,

it will be easier for patients to understand the various symptoms if they themselves know what a coagulogram is, what it is intended for and how to interpret it correctly.

What is included in the analysis of a coagulogram?

Hemostasis is a system that responds to the normal retention of blood as well as its ability to coagulate. Any disorders or varicose veins characteristic of cardiovascular pathologies, autoimmune diseases and hepatological diseases, or causing a decrease in the density of the biological fluid (hemophilia, frequent bleeding due to vascular lesions).

Thus, the coagulogram in terms of indicators differs from the general and biochemical blood test. The basic version includes:

1. PTI (prothrombin index), PTV (prothrombin time) or INR (international normalized ratio). The final test is the most informative and versatile. These indicators allow you to calculate the time when blood clots formed in the wound.
2. Fibrinogen is a protein that is responsible for the formation of blood clots and is converted into fibrin at the final stage of the coagulation of biological fluid.
3. Thrombin time. Shaw, in what period is fibrin produced from fibrinogen?
4. APTTV (active partial thromboplastin time). The indicator allows you to record the time of blood clots.

Additional information about the coagulogram is obtained by analyzing blood according to the following parameters:

- plasma tolerance to heparin;
- protein C;
- D-dimer;
- Plasma conversion time (CTP), activated parameter (AVRP) are also taken into account;
- antithrombin;
- RFMC (soluble monomeric fibrin complexes);
- Esophageal anticoagulant.

These additional indications are necessary for a more accurate diagnosis, especially if a specific disease is suspected during pregnancy.

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