

American Journal of Bioscience and Clinical Integrity

https://biojournals.us/index.php/AJBCI

ISSN: 2997-7347

Ultrasonic Detection Liver Fibrosis

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Received: 2024 20, April Accepted: 2024 19, May Published: 2024 15, June

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Annotation: large amount of information accumulated as a result of purely laboratory studies of liver fibrosis (AF) over the past 20 years now allows practical hepatologists to develop therapeutic measures for the profiling and treatment of this pathology. This information reflects not only understanding molecular basis for the development of AF, but also makes it possible to improve methods for diagnosing liver diseases. The progress made has led to the clear understanding that cirrhosis of the liver is reversible, and to realistic expectations that effective antifibrotic therapy will significantly change the management of patients with liver disease and provide favorable prognosis even with developed liver cirrhosis.

As a result, clinicians can view AF in a new light—as a clinical problem amenable to specific diagnostic tests and treatments that are independent. from etiology. This review is an attempt to highlight the most recent advances in the study of the molecular and biological basis of the development of AF and its prognosis in various liver diseases with already known development mechanisms.

Liver cirrhosis (LC) can be defined as the last stage of AF, as a result of which in the liver parenchyma nodular structures are formed and

thus the function is disrupted liver. This definition implies that CPU is an irreversible phenomenon, but At present, there is sufficient evidence of the reversibility of this process.

Fibrosis and cirrhosis of the liver are a consequence of the constant effect on the liver parenchyma of various types of damaging agents (viral, autoimmune, medicinal, cholestatic) and one of the outcomes of metabolic disorders in the liver itself. hepatocytes.

Keywords: Liver fibrosis, sirrosis, ultrasonic

Target. To study the frequency of detection of diffuse liver pathology in adults using ultrasound diagnostics.

INTRODUCTION

The study was carried out in an ultrasound room using an expert-class device LOGIC7. A retrospective analysis of liver ultrasound findings from January was carried out 202 3 to March 202 4 A total of 277 ultrasounds were analyzed study of abdominal organs with metabolic syndrome. Age from 25 to 65 years, of which men - 51.1%, women - 48.9%.

Results. According to the study, the presence of diffuse changes in the liver was identified in patients with obesity, type 2 diabetes mellitus (DM2) and signs metabolic syndrome. Analysis of data from an ultrasound examination of the abdominal cavity showed that 71% of those examined were found to have fibrous changes. Of them: 66.7% had hepatomegaly, 54.1% had diffuse changes in the liver according to the type of steatohepatosis, in 8.4% - cholelithiasis (GSD) with liver hepatosis, in 4.1% - hepatosplenomegaly, in 13.8% - diffuse changes in the liver like hepatitis, 4.9% - gall bladder polyp, 2.3% have liver hemangioma. The presence of fibro-hepatotic changes in the liver in comparison in men and women was the same numbers, but such signs as hepatomegaly, cholelithiasis, gallbladder polyp were found in the majority of males. By age category: diffuse fibrotic changes in the liver were recorded in persons

over 30±3 years in men, over 38±2 years in women. So Thus, diffuse changes in the liver, hepatosis of various etiologies, which is a precursor to cirrhosis of the liver, occurs in 2/3 of those examined, more often in males and can serve as a background process not only for stone formation and polyps, but also severe protracted forms of diseases.

Conclusion. Ultrasound examination is an accessible, low-cost, non-invasive method for diagnosing diseases of the abdominal organs. Additional findings such as

polyps and gall bladder stones, Liver hemangioma was recorded against the background of a diffusely changed structure and compacted liver parenchyma. So Thus, the study showed that the detection rate fibrous changes in the liver occupy more than half examined, which confirms the prevalence of the pathological process in both men and women. Was a feature of identifying fibrous changes was discovered in men at a younger age than in women.

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