

**GENERAL CHARACTERISTICS OF CLINICAL OBSERVATIONS****Masharipov Polvonnazar****Doctor of Medical science, docent of the Department Nephrology, Hemodialysis  
Traumatology and Orthopedics of the Urgench branch of Tashkent Medical Academy,  
Uzbekistan**

**Annotation.** A total of 1750 patients with malignant tumors of soft tissues of the extremities and trunk were treated at the Institute of Oncology and Radiology of the Academy of Sciences of the Republic of Uzbekistan and the Tashkent Regional Oncology Dispensary from 1970 to 1995. Of the 1750 patients, 202 patients with recurrent tumors of the trunk were analyzed in our work. We did not consider patients with primary and disseminated forms of sarcomas of soft tissues of the extremities and trunk. During statistical processing of clinical material on a computer, patients from two oncological institutions were combined and considered together. In all observations, the diagnosis was verified by morphological examination (cytologically, histologically). In our observations, out of 202 patients, there were 106 men (52.5+3.5%) and 96 women (47.5+3.5%). The age of the patients ranged from 17 to 80 years and averaged 42.2 years. 81 patients (40%) were under 40 years of age. Distribution of patients depending on the tumor location showed that in most cases - 113 patients (55.9+3.5%) had the tumor localized in the lower extremities, 54 (26.7+3.1%) - in the upper extremities and 35 (17.8+2.7%) - in the soft tissues of the trunk. In 31.3% of cases. Duration of the anamnesis - the occurrence of a tumor relapse after removal of the primary tumor or another tumor relapse lasted from 3.5 months. up to 10 years and averaged 7.6 months

**Key words:** Oncology, Radiologydiseases, fibrosis, nodular, etiological

**Introduction.** Distribution of patients depending on the histological structure of the tumor showed that in most cases the tumor was fibrosarcoma - 94 (46.5+3.5%), rhabdomyosarcoma - 27 (13.4+2.4%), synovial sarcoma - 24 (11.9+2.4%), unclassifiable sarcoma - 25 (12.4+2.4%), angiogenic sarcoma - 17 (8.4+1.9%), liposarcoma - 10 (4.9+1.5%), less often - neurogenic sarcoma - 2 (1.0+0.7%), malignant fibrous histiocytoma - 2 (1.0+0.7%) and malignant mesenchymoma - 1 (0.5+0.5%) (Table No. 4). In all cases, the diagnosis was established based on the clinical characteristics of the tumor, as well as on the data of radiographic, echographic and morphological examination methods. In this case, the diagnosis was established in 136 patients (67.3+41.6%) based on clinical, echographic, radiographic and morphological examination

methods, and in the remaining 66 patients (32.7+4.2%) based on clinical and morphological examination methods. Statistical analysis of the clinical manifestation of the disease was assessed separately in each group of patients depending on the number of relapses. In the total group of 202 patients, only in 6 cases (3+1.2%) did the tumor have clear boundaries, and in the remaining cases 196 (97+1.2%) had unclear boundaries. In most cases, the tumor was of dense consistency 96 (47.5+3.5%), less often dense-elastic - 55 (27.2+3.1%) and soft-elastic - 50 (24.7+3%) and only in one case the tumor was of soft-elastic consistency.

In 127 observations (85.7+2.5%) the tumor was slightly mobile, in 27 (13.4+24%) - immobile and only in 3 (1.5+0.8%) - mobile.

On palpation, in 141 cases (69.8+3.2%) the tumor was presented as a tuberous surface and in 61 (30.2+3.2%) - a smooth surface.

**Methodology.** In our observations, a codifier consisting of 207 features and 700 gradations was compiled for processing the clinical material. The data on patients were coded using a pre-compiled program and loaded into a personal computer.

The clinical material on the computer was processed in the following areas:

1. Study of the frequency of relapses depending on clinical symptoms, morphological structure, echographic and radiographic manifestations, as well as treatment methods after each tumor relapse.

2. Study of patient survival after each tumor relapse depending on prognostic factors and treatment methods.

3. Multifactorial analysis of the prognosis of relapse, metastasis and life expectancy.

When studying the survival of patients, the "Cutler and Ederer" method (1958) was used with the construction of life tables, currently known as the expert "Life-table" method, recommended for use by the International Union Against Cancer (IUCC).

The reliability of the differences identified was assessed using the Student-Fisher method. Differences with a probability of at least 95% ( $P < 0.05$ ) were considered reliable. Multivariate analysis was performed with the determination of numerical values (Bayes coefficients) of each gradation of the prognostic feature and year-by-year survival. Prognostically favorable and unfavorable features were identified in each gradation.

**Conclusions** During cytological examination of the puncture from the recurrent tumor, only in two observations ( $1 \pm 0.7\%$ ) was the histogenesis of the tumor established; in the remaining cases, it was not possible to determine the histogenetic affiliation of the tumor.

At the same time, atypical cells with pronounced polymorphism were detected in 11 patients (5.4 + 1.6%), in 109 (54 + 3.5%) a picture of sarcoma was detected without determining histogenesis, in 53 (26.2 + 3.1%) - malignant cells, in 3 (1.5 + 0.9%) pronounced proliferation, in 21 (10.4 + 2.1%) elements of peripheral blood and in 3 (1.5 + 0.9%) - elements of inflammation. Distant metastases developed in 81 patients (40.0%) during the observation period from 6 months to 7 years, on average 28 months. Most often, distant metastases were detected in the lungs - in 64 patients (79.0%), in the bones of the skeleton - in 2 (2.4%), in the liver - in 10 (12.3%), in the brain - in 3 (3.7%).

In 2 patients, tumor recurrence and distant metastases in several organs were noted simultaneously.

In the total group of 202 patients, 42 (20.7%) had metastases in the regional lymph nodes.

In the total group of 202 patients, 34 (16.8%) underwent purely surgical treatment, 99 (49.0%) - combined treatment, and 69 (34.2%) - complex treatment. In our observations, patients were followed from 1 year to 10 years; during these observation periods, 89 patients (44.0+2.4%) died, 28 (13.8+2.4%) disappeared from observation; in periods from 1 year to 9 years, 85 patients (42.0+3.5%) are under observation.

Summarizing the methods and results of differential diagnosis in the jaw bones, it follows:

1) such general signs as prolonged course, asymptomaticity,

late diagnosis is characteristic of most of the above-described neoplasms and, as a result, late diagnosis and lost time for optimal treatment;

2) for the purpose of early diagnosis of neoplasms in the jaw bones and with

Taking into account the exclusive role of teeth in the pathological processes of the maxillofacial area, we strongly recommend that, as part of the ongoing medical examination of schoolchildren, a mandatory orthopantomographic examination of high school students is carried out to obtain comprehensive information about the state of the adolescent's dental-facial system.

#### **LIST OF REFERENCES**

1. Atanazar, Niyazmetov. "APPLICATION OF THE METHOD OF CREATING A VISUAL SERIAL TO PROVIDE STUDENTS INTERESTED IN LEARNING SURGERY." PEDAGOGS jurnali 11.4 (2022): 155-158.
2. Atanazar, Niyazmetov. "Surgical Treatment of Picevodogasteric Bleeding in Patients with Liver Cirrhosis." European Journal of Medical Genetics and Clinical Biology 1.1 (2023): 78-81.

3. Rakhimov, Bakhtiyar; Rakhimova, Feroza; Sobirova, Sabokhat; Allaberganov, Odilbek; ,Mathematical Bases Of Parallel Algorithms For The Creation Of Medical Databases,InterConf,,2021,
4. Rakhimov, Bakhtiyar Saidovich; Rakhimova, Feroza Bakhtiyarovna; Sobirova, Sabokhat Kabulovna; Kuryazov, Furkat Odilbekovich; Abdirimova, Dilnoza Boltabaevna; ,Review And Analysis Of Computer Vision Algorithms,The American Journal of Applied sciences,3,5,245-250,2021,
5. Saidovich, Rakhimov Bakhtiyar; Bakhtiyarovich, Saidov Atabek; Farkhodovich, Babajanov Boburbek; Ugli, Karimov Doston Alisher; Qizi, Musaeva Mukhtasar Zayirjon; ,Analysis And Using of the Features Graphics Processors for Medical Problems,Texas Journal of Medical Science,7,,105-110,2022,
6. Rakhimov, Bakhtiyar Saidovich; Saidov, Atabek Bakhtiyarovich; Allayarova, Asal Akbarovna; ,Using the Model in Cuda and Opencl for Medical Signals,International Journal on Orange Technologies,4,10,84-86,2022,Research Parks Publishing
7. SAIDOVICH, RAKHIMOV BAKHTIYAR; AKBAROVNA, ALLAYAROVA ASAL; ALIMOVNA, JUMANIYAZOVA TUPAJON; QIZI, SAIDOVA ZARINA BAKHTIYAR; ,MODELING NEW GRAPHICS PROCESSORS PROCESSING FUNCTIONAL PROBLEMS,"International journal of advanced research in education, technology and management",2,5,,2023,
8. Zayniddinov, Khakimjon; Rakhimov, Bakhtiyar; Khalikova, Gulnora; Saidov, Atabek; ,Review and analysis of computer vision algorithms,AIP Conference Proceedings,2789,1,,2023,AIP Publishing
9. Rakhimov, BS; Allabeganov, OR; Saidov, AB; ,Processor means for the spectral analysis of medical signals on the of polynomial walsh bases epra,International Journal of Research and Development (IJRD),5,7,10-11,2020,
10. Saidovich, Rakhimov Bakhtiyar; Gafurovich, Bekchanov Bakhtiyar; Alimovna, Jumaniyazova Tupajon; Bakhtiyarovich, Saidov Atabek; ,Processor Architectures in Data Base Problems,Procedia of Engineering and Medical Sciences,,43-47,2022,