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ILM-FAN



TEKNOLOGIYALAR

ZAMONAVIY ILM-FAN VA INNOVATSIYALAR NAZARIYASI

ILMIY-AMALIY KONFERENSIYA

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**« ZAMONAVIY ILM-FAN VA INNOVATSIYALAR NAZARIYASI » NOMLI
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O'ZBEKISTON RESPUBLIKASI PREZIDENTINING 2020 YIL 2-MART KUNGI «ILM, MA'RIFAT VA RAQAMLI IQTISODIYOTNI RIVOJLANTIRISH YILI»DA AMALGA OSHIRISHGA OID DAVLAT DASTURI TO'G'RISIDA»GI FARMONIDA KO'ZDA TUTILGAN VAZIFALARNI IJROSINI TA'MINLASH MAQSADIDA «INNOVATIVE WORLD» MCHJ TOMONIDAN TA'SIS ETILGAN «ORIENTAL JOURNAL ACADEMIC AND MULTIDISCIPLINARY JOURNAL (OJAMR)» ILMIY-USLUBIY JURNALINING (O'ZBEKISTON RESPUBLIKASI PREZIDENTI ADMINISTRATSIYASI HUZURIDAGI AXBOROT VA OMMAVIY KOMMUNIKASIYALARNI RIVOJLANTIRISH AGENTLIGINING 138572-SONLI GUVOHNOMA HAMDA ISSN 3030-3079) "ZAMONAVIY ILM-FAN VA INNOVATSIYALAR NAZARIYASI" NOMLI ILMIY, MASOFAVIY RESPUBLIKA ILMIY-AMALIY ONLINE KONFERENSIYASINI E'LON QILADI.

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4. PEDAGOGIKA FANLARI
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6. TIBBIYOT FANLARI
7. IQTISOD FANLARI
8. QISHLOQ XO'JALIGI FANLARI

ESLATMA! KONFERENSIYA MATERIALLARI TO'PLAMIGA KIRITILGAN MAQOLALARDAGI RAQAMLAR, MA'LUMOTLAR HAQQONIYLIGIGA VA KELITIRILGAN IQTIBOSLAR TO'G'RILIGIGA MUALLIFLAR SHAXSAN JAVOBGARDIRLAR.

NEW TREATMENT APPROACHES FOR PEDIATRIC UPPER GASTROINTESTINAL OBSTRUCTION IN FERGANA VALLEY

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Relevance: Upper gastrointestinal (GI) obstruction in children is a critical condition requiring prompt diagnosis and effective treatment to prevent severe complications, including malnutrition, aspiration, and perforation. Traditional surgical and conservative management strategies may not always yield optimal outcomes, necessitating the exploration of innovative treatment approaches. This study evaluates the efficacy of new therapeutic methods compared to standard management in pediatric patients with upper GI obstruction.

Aim: This study aims to compare the effectiveness of a novel treatment approach against conventional methods in managing upper GI obstruction in children, focusing on clinical outcomes, complication rates, and recovery time.

Materials and Methods: A prospective study was conducted at the Fergana Regional Children's Multidisciplinary Medical Center, including 38 pediatric patients diagnosed with upper GI obstruction. Patients were randomly assigned to two groups: Main group (n = 19): Treated with a new therapeutic approach combining minimally invasive endoscopic techniques and targeted pharmacological therapy. Control group (n = 19): Received standard treatment involving conventional surgical intervention and supportive care. Primary outcomes included resolution of obstruction, length of hospital stay, postoperative complications, and recurrence rates. Data analysis was performed using SPSS 26.0, with statistical significance set at $p < 0.05$.

Results and Discussion: The new treatment approach demonstrated significant clinical benefits over standard management. Complete resolution of obstruction was achieved in 94.7% (18/19) of the main group compared to 78.9% (15/19) in the control group ($p = 0.048$). The mean hospital stay was 4.2 ± 1.3 days in the main group, significantly shorter than 6.8 ± 2.1 days in the control group ($p = 0.031$), indicating faster recovery with the novel approach.

Postoperative complications, such as aspiration pneumonia and wound infections, were observed in 10.5% of the main group versus 26.3% of the control group ($p = 0.042$). Recurrence of obstruction within three months was lower in the main group (5.3% vs. 21.1%, $p = 0.038$), suggesting improved long-term efficacy.

These findings highlight the potential of minimally invasive techniques combined with pharmacological therapy in reducing recovery time, minimizing complications, and improving treatment outcomes. The significant reduction in hospital stay and recurrence rates supports the integration of this approach into clinical practice.

Conclusion: This study demonstrates that a novel treatment approach for upper GI obstruction in children is superior to conventional management, offering higher efficacy, faster recovery, and fewer complications. The findings advocate for the broader adoption of minimally invasive techniques in pediatric surgical practice. Further large-scale studies are needed to confirm these results and refine treatment protocols.

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