COMBINATIVE TREATING METHODS FOR PAPILLOMAVIRUS INFECTION

Ruziyev KT
Samarkand regional branch of the Republican Specialized Dermatovenerological and Cosmetology Scientific and Practical Medical Center

Klebleyeva GD
Assistant professor at the Department of Skin and Venereal Diseases,
Samarkand State Medical University

Axmedova MM
Department of Family and Preventive Medicine,
Faculty of Postgraduate Education (FPPE)

Abdullaev XD
Department of Skin and Venereal Diseases,
Samarkand State Medical University

Annotation: *This article attempts to reveal the main reasons for the creation of a comprehensive system of measures for the treatment of human papillomavirus infection (PVI) and a significant reduction in the recurrence of the disease. To carry out scientific work, the author found that HPV type 16 among patients with cervical cancer is detected in 68.3% of cases, HPV type 18 - in 11.7% of cases. A comparative evaluation of the effectiveness of monotherapy and combined treatment of PVI was carried out in 98 patients (age 25–37 years) with localization of tumor elements in the external genital area. Group I (52 people) consisted of patients who were treated only with the method of laser therapy (copper vapor laser 578 nm "Yakhroma-Med",*

which selectively affects the pathological tissue). Group II (46 people) consisted of patients who received combined treatment: laser destruction, epithelialization occurred within 5–7 days, after which Keravort cream (5% imiquimod) was administered externally, which was applied to the entire surface of the skin where condylomas were localized, capturing visibly healthy skin 1 cm in diameter at night 3 times a week for 4-8 weeks. The problem in question is still little studied, therefore, requires more thorough research.

Key words: *Human papillomaviruses, treatment, disease recurrence*

Introduction: Human papillomaviruses (HPV), or human papillomaviruses (HPV, English human papillomavirus, HPV) are a group of viruses from the papillomavirus family, including 27 species from 5 genera (Alphapapillomavirus, Betapapillomavirus, Gammapapillomavirus, Mupapillomavirus and Nupapillomavirus) and more than 170 types (strains).

About 80% of the sexually active population becomes infected with HPV during their lifetime. 660 million people in the world are already infected with HPV (12% of the world's population). 750 thousand cases of HPV-associated cancers and 32 million cases of anogenital warts are registered annually in the world. Every year, more than 300 thousand people die from cancer caused by HPV[7][8][9]. HPV is the most common sexually transmitted disease in the United States, Russia and many other countries.

In itself, HPV infection does not mean evidence of sexual contact, since the standard life cycle of the virus is designed for infection through microcracks in the skin. Infection through the mucous membranes is only more effective and therefore more common. Infection with the virus is possible through shared objects or even a handshake[11][12]. Infection through objects and the skin of other people contributes to the extreme resistance of HPV to antiseptics.

HPV refers to non-enveloped viruses, that is, with a simple, but highly resistant to antiseptics, icosahedral capsid. Inside the capsid, the virus contains double-

stranded DNA in the form of a closed ring. The DNA of the virus duplicates its proteins many times, since the life cycle of the virus requires the breaking off of parts of the DNA[24]

Purpose: To create a comprehensive system of measures for the treatment of human papillomavirus infection (PVI) and a significant reduction in the recurrence of the disease.

Materials and methods: It was found that HPV type 16 among patients with cervical cancer is detected in 68.3% of cases, HPV type 18 - in 11.7% of cases. A comparative evaluation of the effectiveness of monotherapy and combined treatment of PVI was carried out in 98 patients (age 25–37 years) with localization of tumor elements in the external genital area. Group I (52 people) consisted of patients who were treated only with the method of laser therapy (copper vapor laser 578 nm "Yakhroma-Med", which selectively affects the pathological tissue). Group II (46 people) consisted of patients who received combined treatment: laser destruction, epithelialization occurred within 5–7 days, after which Keravort cream (5% imiquimod) was administered externally, which was applied to the entire surface of the skin where condylomas were localized, capturing visibly healthy skin 1 cm in diameter at night 3 times a week for 4-8 weeks. To assess the effectiveness of therapy, the following approaches were used: comparing the results of an HPV examination before the start of treatment and 4 months after the end of the course of treatment by PCR; assessment of the timing of resolution of clinical manifestations of PVI in patients receiving different treatment regimens; analysis of the frequency of relapses after treatment.

Results: The results of comparing the effectiveness of various PVI therapy options according to the criterion "relapse rate after treatment" turned out to be the most significant. In the first group, the recurrence rate was 18%, in the second group of patients, no relapses were noted.

Conclusions: Thus, the optimal tactic for the treatment of PVI is combined therapy, which includes the elimination of papillomatous foci by laser therapy using the

Yakhroma-Med apparatus and local immunocorrection. At the same time, it should be noted that the drug "Keravort" is a means of etiotropic therapy for diseases associated with the human papillomavirus.

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