

Etiopathogenetic Treatment Of Avenueview Viral Origin

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Annotation. *The features of the clinic, diagnosis and treatment of retrobulbar neuritis of viral origin were studied in 38 patients (70 eyes) who were hospitalized in the eye Department of the 1st clinic of the Samarkand State medical Institute from 2019-2020. Of these, there were 14 patients with retrobulbar neuritis and 24 with uveoneuritis. In the outcome of vision from 38 patients in 30 and 56 eyes, visual acuity increased to 0.6-0.7, in 8 patients in 14 eyes-from 0.08 to 0.1. Complex local and General drug therapy in combination with a hormonal drug had a positive effect on the course of a very complex inflammatory process of the choroid and optic nerve and on the outcome of the disease of post-influenza retrobulbar neuritis of the optic nerves.*

Key words: *uveoneuritis, retrobulbar neuritis, post-influenza neuritis, drug treatment*

1. INTRODUCTION

In the General structure of ophthalmopathology, the specific weight of uveitis is from 5 to 30 % of cases [2,3,5].

Uveoneuritis develops in people of any age, but most often occurs in young and able-bodied people, which determines the social and economic significance of this pathology. The chronic recurrent nature of the inflammatory process causes the appearance of serious complications – fibrosis of the vitreous body, macular edema, atrophy of the optic nerve, which can lead to the development of blindness and disability [1,4].

According to the who, the number of viral eye diseases has been increasing in recent years due to the widespread use of hormonal drugs. As we know, the favorite site of herpes virus infection is the nerve tissue, in this case, the optic nerve, which is complicated by retrobulbar neuritis. The herpes simplex virus of 1-2 serotypes belongs to the ophthalmotropic viruses of the herpes group.

In the literature, the clinical course and treatment of retrobulbar neuritis of viral origin is still insufficiently studied and deserves the attention of therapeutic ophthalmologists.

2. PURPOSE OF RESEARCH

The aim of our study is to study the features of the clinic, diagnosis and treatment of retrobulbar neuritis of viral origin.

3. MATERIALS AND METHODS OF RESEARCH

Under our supervision were 38 patients who were on inpatient treatment in the eye Department of the 1st clinic of the Samarkand State medical Institute from 2019-2020. There were 18 men and 20 women. The age ranged from 12 to 60 years. There were 14 patients with retrobulbar neuritis and 24 with uveoneuritis. All patients were hospitalized for 2-3 days of eye disease or 1-2 weeks after the onset of a cold.

All patients were consulted by a therapist, pediatrician, otolaryngologist-doctor and dentist. Radiographic studies included radiography of the paranasal sinuses, as well as the lungs.

A generally accepted ophthalmological examination was performed in dynamics, which, depending on the features of the pathological process, included: determination of Central visual acuity according to the Golovin-Sivtsev table, determination of light perception with mandatory color perception check according to The E. B. Rabkin table, refraction of the eye by skiascopy after mydriasis and on the autorefractometer "Supora" (China), biomicroscopy using the Carl Zeiss slit lamp, palpatory determination of the level of ciliary soreness, direct and reverse ophthalmoscopy with a wide pupil, examination of ophthalmotonus by palpation and by Maklakov ophthalmotonometry (10 g load), perimetry on a spheroperimeter, blind spot examination on a campimeter, optical coherence tomography of the retina (OTR) and ultrasound examination of the eye on the "Strong" device (China).

38-x patients (70 eyes), 24 (45 eyes), the process proceeded according to the type of winefride. Biomicroscopy of the anterior parts of these eyes showed light pericorneal injection, relief and pattern of the iris without features. The fundus was ophthalmoscopically through a light fog due to opacities of the vitreous body. The discs of the optic nerves were hyperemic, their borders were blurred, the veins were somewhat dilated, and the arteries were relatively narrowed. In 8 eyes, small-point hemorrhages were observed in the area of the optic disc. Ultrasound examination of the eyes showed slight floating opacities in the vitreous body, as well as edema of the optic nerve disk and retinal tissue, and increased echostructure of the orbits in the retrobulbar space. X-ray of the orbits revealed an inflammatory process of the paranasal sinuses in 15 patients. When studying the picture of retinal OTR, retinal edema was noted in the area of the optic disc, which spread to the uveal tract, as well as to the macular area. Reduced visual acuity, as an isolated symptom, was manifested in 58% of cases. Visual acuity was reduced to 0.2 in 14 patients (24 eyes), to 0.08 – in 5 patients (11 eyes), in 5 patients (5 eyes) was 0.06. The boundaries of peripheral vision for all colors were narrowed by 15-25°. When studying the campimetry pattern, all patients showed an increase in the blind spot both horizontally and vertically. Color perception was disturbed by the acquired type, the contrast to red and blue colors was sharply reduced, the patients distinguished only black and white.

In 14 patients with 25 eyes, the disease occurred in the form of retrobulbar neuritis. Patients of this group complained of a gradual decrease in vision, sometimes dull pain in the orbit when moving the eyeballs. Objectively, in the first days, with the exception of a slight opacity of the vitreous body and blurred hyperemia of the optic nerve, no special changes

were observed. However, in the study of visual acuity in 7 patients (13 eyes) it was reduced to 0.1-0.2, in 3 patients (5 eyes) - from 0.03-0.09. In 4 patients (7 eyes), in addition to a decrease in vision to 0.02 and below, a Central scotoma was simultaneously noted. The boundaries of peripheral vision for all colors were narrowed by 15-25⁰. Ultrasound examination of the eyes and retrobulbar space showed an increase in the retrobulbar part of the optic nerve, as well as infiltration of the fatty tissue of the orbits.

Treatment began with urgent hospitalization. The therapy was aimed at fighting infection and dehydration, desensitization, as well as improving the metabolism of CNS tissues, immunocorrection, and preserving the visual function of the affected eye.

All patients underwent complex local and General therapy. Locally administered instillations of solutions of hormonal drugs, Mydriatics, under the conjunctiva of the eyeball and parabolbarno injected solutions of gentamicin and cycloferon in combination with hormonal drugs (a solution of 0.4% dexamethasone solution) of 0.4-0.6 ml from 10 to 15 injections per course of treatment, and cycloferon was administered intramuscularly No. 20 of 2.0 ml. Massive doses of a broad-spectrum antibiotic (Ceftriaxone 500 thousand units each) were also injected intramuscularly. 2 times a day) for 5-6 days, intravenous infusion of 10% sodium chloride in 10.0 ml and 40% glucose solution in 10.0 ml No. 10.

Intramuscular injections of vitamin b complex (2.0 ml No. 20) and Aloe extract (2.0 ml No. 20) were also performed. Inside: diacarb 1 tab. 3 times for 3 days, calcium gluconate, ascorutin, aspirin tablets. On day 8-10 of treatment, subconjunctival injections of 4% taufon solution of 0.3 ml No. 8-10 were recommended, parabolbar injections of emoxipin 1% - 0.5 ml No. 10.

During the treatment period, the main functions of the eye were studied: visual acuity, peripheral vision and color vision in dynamics.

4. RESULTS AND DISCUSSION

Starting from 7-10 days of treatment, patients noted an improvement in General well-being, noticeable progressive shifts in visual function. In the outcome of vision from 38 patients in 30 and 56 eyes, visual acuity increased to 0.4-0.7, in 8 patients in 14 eyes-from 0.08 to 0.1.

On ultrasound examination, complete resorption of floating opacities in the vitreous body was noted, the boundaries of the optic nerve disk gradually crossed the boundaries of the age norm. The pain of the eyes when moving the eyeball and ciliary pain disappeared. The picture of the fundus gradually acquired a normal picture, except for 8 patients (14 eyes), who had partial atrophy of the optic nerve. When studying the picture of eye OTR in dynamics after the completion of the course of treatment, retinal edema disappeared, the thickness in the Central and peripheral parts acquired a normal picture, the size of the optic nerve disk decreased to the limits of normal.

The boundaries of peripheral vision were restored to normal in 30 (56 eyes), narrowed peripheral vision - by 21% in 8 (14 eyes), Central scotomas disappeared.

Color perception was restored in almost all patients.

5. CONCLUSIONS

Clinical observations allow us to note that complex local and General drug therapy in combination with a hormonal drug had a positive effect on the course of a very complex inflammatory process of the choroid and optic nerve and on the outcome of the disease of post-influenza retrobulbar neuritis of the optic nerves, and also reduced the number of complications of this pathology.

6. RECOMMENDATIONS

the Proposed method of treatment can be carried out in a day hospital, which reduces the amount of consumables for the treatment of these patients. The combined use of antiviral antibiotics and hormonal drugs accelerates the recovery process and reduces the number of complications of this pathology.

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