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Experience in the Treatment of Patients With Papillomas of the Nose and Paranasal Sinuses

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ANNOTATION

The effectiveness of complex treatment of 66 patients with papillomas of the nose and paranasal sinuses was analyzed. In the main group of patients, traditional therapy was supplemented by oral administration of tilorone (Lavomax) according to the scheme. Immunological studies, as well as subjective assessment data, revealed high results in patients of the main group. The conclusion was made about the possibility of using the drug tilorone as an immunomodulatory drug in the complex treatment of papillomas of the nose and paranasal sinuses.

KEYWORDS: papilloma of the nose and paranasal sinuses, treatment, tilorone (Lavomax).

Introduction. Diagnosis and timely treatment of patients with tumor processes in the nasal cavity and paranasal sinuses is of significant clinical interest for otorhinolaryngologists. Papilloma is one of the most common benign tumors of the ENT organs. Nasal papilloma, resembling cauliflower in appearance, can grow on the mucous membrane of the nasal septum, inferior conchas, and on the lower wall of the nasal vestibule.

Most often, the appearance of papillomas is caused by the human papillomavirus (HPV), which is a DNA-containing virus.

The human papillomavirus infects proliferating epithelial cells in the basal layer of the epithelium. Currently, the effectiveness of various HPV treatments is 60-80% [1,3].

The recurrence process is difficult to control with drugs and therefore surgical methods continue to be the only way to maintain airway patency. Multiple endoscopic operations lead to the development of cicatricial changes, and as a result, to cicatricial stenosis of the upper respiratory tract.

The reason for relapses is that in the case of surgical treatment, only the visible pathological focus is excised, and not the etiological factor. Remaining in the tissues of HPV again leads to the development of the tumor process. Most often, with papillomas of the nose and paranasal sinuses, HPV types 6 and 11 of the virus are detected, but the detection of viruses of types 8,16,18,30 and 31 is also described. There is no consensus among researchers regarding differences in the clinical course of the disease depending on the type of virus.

Although the presence of a specific virus is considered the main cause of the development of nasal papilloma and paranasal sinuses, the presence of the virus alone is not enough for the development of the disease. Theoretically, the virus can exist latently, without causing the growth of papillomas for a long time. The biological defense system of the body, consisting of the immune and endocrine systems, controls the expression of the virus. At the same time, a failure in their activity can lead to the activation of the viral process [2,5].

The purpose of the study was to study the effectiveness of tilorone (Lavomax) in the treatment of patients with papillomas of the nose and paranasal sinuses.

Currently, a promising drug for the correction of immune disorders is Lavomax, an oral



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immunostimulant with a pronounced interferon activity and an antiviral effect.

Lavomax - coated tablets, from yellow to orange, round shape. Available in blister packs of 6 or 10 pieces. 1 tablet - 0.125 g.

Lavomax stimulates the formation of α -, β -, γ -interferons in the body. The drug has an immunomodulatory effect: stimulates bone marrow stem cells, increases antibody production depending on the dose, reduces the degree of immunosuppression, restores the ratio of T-helpers / T-suppressors. Lavomax has a pronounced antiviral effect, which is associated with inhibition of the translation of virus-specific proteins in infected cells, as a result of which the reproduction of viruses is suppressed. Thus, Lavomax acts on all harmful processes for the body caused by HPV.

The main producers of interferon in response to the administration of Lavomax are intestinal epithelial cells, hepatocytes, T-lymphocytes and neutrophils [4].

These features of Lavomax determined the expediency of its effective use in the complex therapy of patients with HPV.

Material and research methods: 66 patients with papillomas of the nose and paranasal sinuses were examined. The age of the patients ranged from 24 to 52 years, the disease is equally common among males 36 (54.5%) and females 30 (45.5%). All patients underwent a comprehensive examination, including a carefully collected history, examination of ENT organs: anterior and posterior rhinoscopy, endoscopy, X-ray examination methods, immunological examination, and histological examination.

The duration of the disease varied from 8 months to 5 years. Patients were repeatedly treated for papillomas of the nose and paranasal sinuses: 58 once (87.8%), 6 twice (9.1%), 2 three times (3.0%). In history, 38 patients (57.6%) had indications of chronic diseases of the nose and paranasal sinuses.

The localization of the process is reflected in Table 1.

<u>Septum of the</u> <u>nose</u>		<u>Inferior</u> turbinate		<u>Floor of the</u> nasal cavity		<u>Maxillary</u> <u>sinus</u>		<u>Nasal cavity and</u> <u>maxillary sinus</u>		<u>Total</u>
abs.	%	abs.	%	abs.	%	abs.	%	abs.	%	abs.
28	42,4	12	18,2	16	24,2	6	9,1	4	6,0	66

Table 1. Process localization

According to the results of histological examination, squamous cell papilloma was detected in 36 (54.5%) patients, and transitional cell papilloma in 30 (45.4%) patients.

Results and its discussion. At the time of filing complaints of difficulty breathing 58 (87.8%), nasal congestion 52 (78.8%), nasal discharge 43 (65.1%), decreased sense of smell 26 (39.4%) and 5 (7, 5%) of patients experienced recurrent nosebleeds.

All patients were divided into two groups: main (34 patients) and control (32 patients). Patients of the main group received complex therapy. After surgical treatment, Lavomax was switched on according to the scheme: 0.125 g (1 tablet) per day for 2 days, then 0.125 g after 48 hours, for a course of treatment of 1.25 g (10 tablets).

Against the background of treatment with Lavomax, an earlier (already by the end of the second week of treatment, on average on the 12-14th day), compared with standard therapy (on the average on the 17-18th day of treatment) improvement in the well-being of patients was recorded.

Symptoms	Main g	group	Control group		
	before treatment	after treatment	before treatment	after treatment	
Difficulty breathing	30 (88,2%)	9 (26,5%)	28 (87,5%)	13 (37,5%)	
Nasal congestion	28 (82,3%)	8 (23,5%)	24 (75%)	11 (34,3%)	
Nasal discharge	24 (70,5%)	10 (29,4%)	19 (59,4%)	12 (37,5%)	
Olfactory disturbance	14 (41,2%)	7 (20,6%)	12 (37,5)	8 (25%)	
Nosebleeds	3 (8,8%)	-	2 (6,2%)	-	

Table 2. Dynamics of subjective symptoms

A positive clinical picture was accompanied by an improvement in immunological parameters. After 3 weeks of treatment in patients of the main group, there was an increase in T-lymphocytes from 50.6 ± 2.1 to $53.4\pm2.1\%$, with complete normalization in 28 patients (82.3%), while in the control group, this indicator returned to normal only in 20 patients (62.5%). Lavomax increased the functional activity of T-helpers from 24.4 ± 2.1 to 40.2 ± 2.5 in the main group and from 26.4 ± 2.0 to 36.7 ± 2.3 in the control group. Lavomax had a positive effect on humoral immunity, increasing the level of IgA from 1.23 ± 0.10 g/l to 1.42 ± 0.11 g/l; this indicator did not change significantly in the control group.

The use of the drug Lavomax allowed to reduce the number of relapses in the main group to 4.5% (one patient), while in the control group the recurrence of the disease was observed in 15% (3 patients).

Conclusion. Thus, complex therapy with the use of tilorone (Lavomax) showed its high efficiency, due to which there was a rapid disappearance of clinical symptoms and normalization of the immunological parameters of patients with papilloma of the nose and paranasal sinuses was observed. The results obtained indicate the possibility of using tilorone (Lavomax) as an immunomodulatory drug in the complex treatment of papillomas of the nose and paranasal sinuses.

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