An innovative method for the treatment of gallbladder polyps and liver cysts in the early stages of the disease

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Benign formations of the digestive tract - polyps of the gallbladder and liver cysts remain small for a long time, up to 1 cm in diameter, do not manifest clinically and are detected by chance during screening endoscopy or in sections [4].

Only 5-10% of patients with nonparasitic (biliary) liver cysts are subject to surgical treatment, the rest should be observed either by a gastroenterologist or by a surgeon in an outpatient department [3].

There are the following options for surgical treatment of liver cysts: 1) percutaneous puncture and drainage of cysts with the introduction of sclerosing substances; 2) laparoscopic removal of free cyst walls with exposure to the remaining epithelium; 3) removal of cysts from laparotomic access [7, 9]. The most optimal method is laparoscopic excision of cysts, which is due to low trauma, low recurrence rate (0–4%) and minimal hospitalization. About 20% of patients are subject to surgical treatment [8]. Liver cysts in the absence of treatment lead to a number of complications: 1) the development of jaundice due to compression of the ducts by large cysts; 2) bleeding into the cyst cavity; 3) suppuration of the cyst; 4) perforation or rupture of the cyst; 5) malignant transformation of nonparasitic liver cysts; 6) atrophy due to the pressure of the growing cyst on the surrounding parenchyma, which leads to compensatory hypertrophy with the development of hepatomegaly; 7) the development of thrombotic complications when the cyst is compressed by the inferior vena cava; 8) infection of cysts, in which morbidity and mortality are 3 and 5%, respectively [3].

Gallbladder polyps occur in 4–6% of the population, 80% of them occur in women over 30 years of age [1]. Allocate cholesterol polyp, inflammatory polyp, adenoma and papilloma of the gallbladder. The reason for their formation has not been finally clarified. Most scientists believe that the main cause is genetic rearrangements and mutations, and a viral cause of these formations is possible [2]. Gallbladder polyps require surgical treatment when clinical signs of the disease appear; in asymptomatic cases, it is necessary to observe a surgeon and a gastroenterologist.

The ability to influence the prevention of the formation and growth of gallbladder polyps and liver cysts attracted scientists, but only the approaches of traditional medicine to this issue were described in the literature. In this connection, the use of information drugs Heptral, Galavit, Valtrex, Ursosan, Noni, Guanabana, a complex for the treatment of the liver, Essentiale in the treatment of liver cysts and gallbladder polyps is an innovative tactic.

The work is based on the analysis of the results of examination and treatment of 56 female patients aged 22–52 years with diseases of the hepatobiliary zone. The patients were divided into two groups: group 1 - 34 patients (age 22–42 years) with gallbladder polyps, 6–8 mm in size; 2nd group - 22 patients (age

36–52 years) with liver cysts, 8–10 mm in size. In all categories, the identified disease duration is no more than 1 year. The observation period was 14 months. The frequency of observation is every 3–3.5 months. The dynamics of the pain syndrome, the frequency of occurrence of dyspeptic manifestations, the quality of life of the patients were assessed; according to the ultrasound data, the dynamics of the sizes of polyps, cysts was assessed, respectively, according to the biochemical blood test (AST, ALT, GGTP - patients were included in the groups, with an excess of these indicators no more than 2 times higher than the upper limit of the norm). Patients received only informational copies of drugs in alternation, or in combination according to the test results. Information transfer was carried out on the water using the equipment of the firm "IMEDIS". The dose and frequency of administration ranged from 1/2 to 1 tbsp. 1-3 times a day.

Against the background of the therapy, all categories noted an improvement in well-being, an improvement in the quality of life, and a decrease in dyspeptic manifestations.

ALT, AST, GGTP levels returned to normal in all groups by 1.5–3 months of drug intake.

In the 1st group on the 6th month of observation - a decrease in the size of polyps by at least 50% - in 16 patients (47%), without significant dynamics - in 18 patients (53%); by the 14th month of observation - a decrease in the size of polyps, not less than 50% - in 28 patients (82%), without pronounced dynamics in 6 patients (18%).

In the 2nd group: on the 6th month of observation - a decrease in the size of cysts, not less than 50% - in 12 patients (55%), without significant dynamics in 10 patients (45%); by the 14th month of observation - a decrease in the size of polyps, not less than 50% - in 18 patients (82%), (of which 5 (23%) - cysts are not detected), without pronounced dynamics in 4 patients (18 %).

Discussion

The use of such a spectrum of copies of drugs was dictated by the mechanism of drug action on the body: antioxidant, antiviral, immunomodulatory, antimicrobial, cholekinetic, hepatoprotective, antiproliferative.

Ursodeoxycholic acid has a proven spectrum of beneficial effects. By stabilizing the physicochemical properties of bile, preventing the deposition of crystals in the gallbladder, compensating for the loss of bile acids and a weak cholekinetic effect, the drug helps to restore the motor function of the biliary tract and reduces the risk of biliary sludge and calculi formation in the gallbladder. In addition, it significantly reduces cholestasis, has a hepatoprotective, moderate immunomodulatory effect, blocks the proliferative phase of fibrogenesis, and has antioxidant properties [5].

Noni and guanabana preparations have an antiproliferative effect, Valtrex - antiviral, Galavit - immunomodulatory, Essentiale - reduces lipid peroxidation, leads to the restoration of cell membranes of all cells of the body, normalization of the activity of enzymes associated with cell membranes. Essentiale forte N therapy also increases the solubility of cholesterol in bile by increasing secretion into bile

polyunsaturated PC [6]. Thus, the selection of drugs for creating information copies had a pathogenetic orientation, which was confirmed by the results of observations. An increase in the time of receiving the information copy led to an increase in efficiency and the percentage of reduction of gallbladder polyps increased from 47% to 82%, and a decrease in the size of liver cysts - from 55 to 82%, and in 23% of women there was a complete resorption of cysts.

The results of the conducted studies showed informational ceoliciscolicylrugs, the absence of side effects of treatment, which requires further study of this issue with the study of long-term results of therapy and the possibility of widespread introduction of these diseases into the therapy.

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