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MILITARY SURGEON AND anatomist PROFESSOR V.A. PAVLENKO (TO THE 90TH ANNIVERSARY OF THE DEPARTMENT OF MILITARY SURGERY)

Authors

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annotation

In connection with the anniversary date - the 90th anniversary of the creation of the world's first department of military field surgery of the Military Medical Academy - materials are presented about one of its creators, Professor V.A. Pavlenko. Student of Academician V.N. Shevkunenko, V.A. Pavlenko initially held the position of deputy head of the newly created department of military field surgery, then headed this department for five years and made a great contribution to its formation.

KEYWORDS: Military Medical Academy, Department of Military Field Surgery, V.A. Oppel, V.A. Pavlenko

HOW TO QUOTE: Samokhvalov I.M., Badalov V.I., Shlyapnikov S.A., Tynyankin N.A., Fomin N.F., Lyashedko P.P. Military surgeon and anatomist Professor V.A. Pavlenko (to the 90th anniversary of the Department of Military Surgery). Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022;1(6):5–11.

EIGHT YEARS OF EXPERIENCE IN THE USE OF MINIMALLY INVASIVE TRANSFORAMINAL SPONDILODESIS WITH UNILATERAL TRANSPEDICULAR FIXATION IN DEGENERATIVE DISEASES OF THE LUMBAR SPINE

Authors

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annotation

Goal of the work:to evaluate 8 years of experience in the use of minimally invasive transforaminal spinal fusion with unilateral transpedicular fixation for degenerative diseases of the lumbar spine in the neurosurgical department of the All-Russian Center for Reconstructive Medicine. A.M. Nikiforova.

Materials and methods: From 2014 to 2021 155 surgical interventions were performed using the MISTLIF method with unilateral fixation for degenerative pathology of the spine.

Result:after surgery there was a significant improvement in clinical results according to the Macnab, ODI, VAS scales.

Conclusion:in our study, surgical interventions with unilateral fixation showed good clinical and radiological results.

KEYWORDS:minimally invasive transforaminal spinal fusion, unilateral transpedicular fixation.

HOW TO QUOTE: Poyarkov K.A., Karabaev I.Sh., Khlebov V.V., Palikovsky A.A., Tilov A.Zh. 8 years of experience in the use of minimally invasive transforaminal spinal fusion with unilateral transpedicular fixation for degenerative diseases of the lumbar spine. Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022;1(6); 12–16.

INFLUENCE OF CHANGES IN CERVICAL SUBAXIAL LORDOSIS ON PAIN SYNDROME AFTER ONE-TWO-LEVEL ACDF IN DEGENERATIVE-DYSTROPHIC DISEASES OF THE SPINE

Authors

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annotation

Goal of the work. To determine the relationship between sagittal parameters of the cervical spine and axial pain syndrome in the neck in patients after one- or two-level ACDF.

Materials and methods: The work is based on data from the medical records of 83 patients operated on between 2020 and 2022. in the neurosurgical department of the Federal State Budgetary Institution “All-Russian Center for Emergency and Radiation Medicine named after A.M. Nikiforova" EMERCOM of Russia

Result: Our results show a statistically significant increase in subaxial cervical lordosis, from 6.74 (preoperative) to 10.13 (postoperative) ($p < 0.05$).

Conclusion: An increase in cervical lordosis during ACDF is accompanied by a decrease in axial pain in the cervical region.

KEYWORDS:sagittal balance of the cervical spine, anterior cervical decompression and fusion, subaxial cervical lordosis

HOW TO QUOTE: Tilov A.Zh., Karabaev I.Sh., Poyarkov K.A., Khlebov V.V., Palikovsky A.A. The influence of changes in cervical subaxial lordosis on pain after one- or two-level acdf in degenerative diseases of the spine. Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022; 1 (6): 17–21.

PREDICTORS OF THE DEVELOPMENT OF ADVERSE OUTCOMES OF SURGICAL TREATMENT OF DEGENERATIVE-DYSTROPHIC DISEASE OF THE LUMBAR SPINE

Authors

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SUMMARYDecompression and stabilization surgery on the lumbar spine is one of the most common interventions for degenerative pathologies, where the formation of spinal fusion plays a key role.

Result: Excellent and good outcome was present in 168 (71.2%) and 29 (12.3%) patients, respectively, satisfactory - in 9 (3.8%), unsatisfactory - in 30 (12.7%).

KEYWORDS:degenerative-dystrophic disease of the spine, interbody fusion, risk factors.

HOW TO QUOTE: Khlebov V.V., Karabaev I.Sh., Volkov I.V., Poyarkov K.A., Tilov A.Zh., Palikovsky A.A., Solntsev V.N. Predictors of the development of unfavorable outcomes of surgical treatment of degenerative-dystrophic diseases of the lumbar spine. Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022;1 (6):22–28

TREATMENT OF DEEP PERI-IMPLANT ABSCESS OF THE UPPER CERVICAL SPINE USING NEGATIVE WOUND PRESSURE (NPWT) SYSTEM (CLINICAL OBSERVATIONS)

Authors

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Annotation:

Summary: The issue of treatment of peri-implant infections.

Target: To present successful experience using negative pressure therapy (NPWT) to preserve spinal stabilizing systems in patients with deep peri-implant infection.

Material and methods: Two clinical cases of the use of wound treatment with negative pressure systems in patients with deep peri-implantation infection are described.

Results: In the shortest possible time from the start of NPWT therapy, it was possible to stabilize the infectious process in the wound, close the previously installed structure with soft tissue, and obtain a healthy skin scar. The absence of relapses was confirmed by follow-up.

Conclusion:NPWT can be used as the treatment of choice in patients with deep peri-implant infection in clinical situations where removal or subsequent reimplantation is not possible.

KEYWORDS:spine, discitis, spondylitis, paravertebral abscess, vacuum bandage, NPWT, cervical spinal fusion.

HOW TO QUOTE: Manukovsky V.A., Tamaev T.I., Batyrshin I.M., Tyulikov K.V., Serikov V.V., Afanasyeva I.S., Birko Yu.V., Mustafa M.Sh., Sidor M. .I., Dukhnov S.V. Treatment of deep peri-implant abscess of the upper cervical spine using a negative wound pressure (NPWT) system (clinical observations). Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022;1(6):29–37

ROLE OF REAL-TIME PCR IN EARLY DETECTION OF CARBAPENEMASES PRODUCTION BY ENTEROBACTERIA IN ICU

Authors:

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annotation

Abstract: Treatment of infections caused by antibiotic-resistant pathogens is a problem for modern medicine. The results of treatment of patients with severe sepsis directly depend on timely and adequate antimicrobial therapy. The increasing number of infections caused by carbapenem-resistant Enterobacteriaceae, including Kl.pneumoniae, complicates the choice of an adequate empiric antibiotic therapy regimen. Early detection of the ability of Kl.pneumoniae to produce carbapenemases is a real possibility of timely administration of an antimicrobial therapy regimen close to the etiotropic one. Assessment of risk factors for the presence of carbapenem-resistant strains of Enterobacteriaceae allows us to identify a group of patients at risk of carrying such strains of Enterobacteriaceae. Performing real-time PCR in this category of patients can ensure early detection of carbapenem resistance genes and the use of appropriate antibiotics effective against a specific carbapenemase as initial empirical therapy.

KEYWORDS:severe sepsis, antibacterial therapy, antibiotic-resistant pathogens, carbapenem resistance Kl.pneumoniae, early diagnosis of carbapenemase gene production, real-time PCR

HOW TO QUOTE. Nasser N.R., Popenko L.N., Shlyapnikov S.A. The role of real-time PCR in the early detection of carbapenemase production by enterobacteria in the ICU. Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2021;4(5):38–42.

CURRENT PROBLEMS OF CONSERVATIVE TREATMENT OF ADULT PATIENTS WITH SHORT BOWL SYNDROME AND CHRONIC INTESTINAL FAILURE (SBS-CI)

Authors

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annotation

SUMMARYThe article discusses the clinical manifestations and problematic issues of treatment and rehabilitation of patients with short bowel syndrome. A functional classification of intestinal failure present in this condition is provided. The pathogenesis of the development of possible immediate and long-term postoperative complications is outlined, as well as the features of pharmacotherapy for this category of patients, aimed at correcting impaired digestion, taking into account the changing pharmacokinetics of drugs taken per os. The issues of diet therapy, indications and features of infusion therapy, as well as various options for nutritional support, including supportive parenteral nutrition for these patients in outpatient settings are considered. We present our own experience in organizing parenteral nutrition for such patients at home.

KEYWORDS: short bowel syndrome, chronic intestinal failure, nutritional support.

HOW TO QUOTE. Luft V.M., Demko A.E., Lapitsky A.V., Batyrshin I.M., Sergeeva A.M. Current problems and prospects for treating patients with short bowel syndrome. Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022; 1(6):43–52

COMBINED TRAUMA IN A LARGE CITY IN PEACETIME. EPIDEMIOLOGICAL ASPECTS

Authors

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annotation

Introduction. Combined injuries are injuries resulting from exposure to various traumatic factors. They are characterized by the particular severity of clinical manifestations, the difficulty of diagnosis, the complexity of treatment, high mortality and disability of victims

Purpose of the study. To determine the frequency, prevalence, structure, severity of combined injuries, mortality characteristics and duration of hospital treatment in Barnaul (a large city).

Materials and methods. An analysis of the treatment of 134 victims over 15 years was carried out. All victims were divided into 3 groups: the 1st group included patients whose main component of the combined injury, in addition to mechanical injuries, was chemical burns, the 2nd group included cold trauma, and the 3rd group included thermal burns. The 3rd group was divided into 2 subgroups: the 1st group included victims with burns of a location other than the fracture, the 2nd group included victims with burns of a location identical to the fracture.

Results and discussion. The greatest severity of CombT was observed in patients of the 1st group with chemical burns and in the 3rd group with thermal exposure (in its 2nd subgroup), the least - with cold injury.

Conclusion. In a large city, combined injuries are a rare pathology in peacetime.

KEYWORDS:combined injury, thermomechanical injury, thermal burns.

HOW TO QUOTE. Zavsegolov N.I., Bondarenko A.V., Lukyanov V.V., Gerasimova O.A. Combined trauma in a large city in peacetime. Epidemiological aspects. Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022; 1(6):53–59.

COMBINED TRAUMA IN A LARGE CITY IN PEACETIME. EPIDEMIOLOGICAL ASPECTS

Authors

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HOW TO QUOTE. Zavsegolov N.I., Bondarenko A.V., Lukyanov V.V., Gerasimova O.A. Combined trauma in a large city in peacetime. Epidemiological aspects. Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022; 1(6):53–59.

THEORETICAL BASES OF TECHNOLOGY FOR PERFUSION PRESERVATION OF DONOR ORGANS

Authors

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annotation

SUMMARYThe article analyzes the reasons for the shortage of donor organs and determines the prospects for expanding the donor pool through modification of donor organs (at the tissue, cellular and molecular level) using perfusion technologies. The adopted strategies for reducing the consequences of ischemia-reperfusion injury of donor organs, current trends in addressing issues of preservation and modification of donor organs are described, and literature data on the role of perfusion methods in modern organ transplantation is provided.

KEYWORDS: organ donation, ischemia-reperfusion, machine perfusion of donor organs, organ transplantation.

HOW TO QUOTE. Reznik O.N., Manukovsky V.A., Daineko V.S. Theoretical foundations of the technology of perfusion preservation of donor organs. Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022; 1(6); 60–64.

SUCCESSFUL MULTISTAGE TREATMENT OF POST-RADIATION COMPLICATIONS OF CERVICAL CANCER. CLINICAL OBSERVATION

Authors

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annotation

SUMMARYA clinical case of successful treatment of a patient with multiple complications after a course of radiation therapy for cervical cancer is presented.

KEYWORDS:cervical cancer, intestinal-vesical fistula, post-radiation complications.

HOW TO QUOTE. Demko A.E., Shlyapnikov S.A., Ostroumova Yu.S., Nasser N.R., Sklizkov D.S., Platonov S.A. Successful multi-stage treatment of post-radiation complications of cervical cancer. Clinical observation. Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022; 1(6); 65–69.

PROSPECTS FOR THE USE OF STEM CELLS IN THE TREATMENT OF BURNED PATIENTS (LITERATURE REVIEW)

Authors

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annotation

SUMMARYThe article provides a review of modern literature on the problem of using cellular technologies in the treatment of burn victims. An analysis of the proposed carriers for transplantation of stem cells onto the wound surface was carried out.

KEYWORDS:burn wound, fibroblasts, keratinocytes, mesenchymal stem cells, allo- and autodermoplasty.

HOW TO QUOTE. Fayazov A.D., Charyshnikova O.S., Urazmetova M.D., Kamilov U.R., Tsiferova N.A., Stopnitsky A.A. Prospects for the use of stem cells in the treatment of burn patients (literature review). Journal "Emergency Surgery named after. I.I. Dzhanelidze". 2022; 1(6); 70–78.