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"MORPHOLOGICAL CHANGES IN THE PANCREAS IN PEOPLE WITH AND WITHOUT DIABETES MELLITUS AND THEIR COMPARATIVE ANALYSIS."

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Abstract: Today, diabetes mellitus, which has become a problem among the population, especially among people aged 35-50, and despite the implementation of treatment measures, is becoming increasingly common.
Diabetes mellitus is also known as "sugar" disease among the people.

Diabetus is administered to the maintenance of the metabolic diseases and can be hereditary and acquired. Diabetes are based on the disorders of carbohydrate and water metabolism in the body.Indan is a violation of the explanatory function due to the disruption of this exchange.

The vokine hormone in the Langergans Langergans is developed by cells, which is involved in the processing of glucose and normalizes the water and carbohydrate norm. It is calculated due to the violation of insulin production on the pancraft, ie that the candidate in which is not increased, ie, and as a result that the candidate is not considered to be shown orphans.

Key words: diabetes mellitus, insulin, pancreas, atrophy, islets of Langerhans, fibrosis.

Калит сузлар: кандли диабет, инсулин, ошкозон ости бези , атрофия, Лангерганс оролчалари, фиброз.

Ключевые слова: сахарный диабет, инсулин, поджелудочный желез, атрофия, островки Лангерганса, фиброз.

The glucose is mainly necessary as an energy substrate. The tissue does not mean the introduction of glucose to the mine to ensure that glucogen is due to a glycogen as a depo in the liver. In parallel, watering increases. As a result, the state of storage in the tissues decreases. As a result, the skin causes purulent diseases, teeth in the skin, the development of air oxal and nervous system, the development of atherosclerosis, stenocarium, hypertension, and intensification of diseases.

Two types of diabetes are different;

1 - Type of association with the formulin.asisan after 40 years of people get sick.

The main and primary cause The body manufactures anthrows, which will suffer from the pancreas to pancreas. The body is permanently entered the Sunahs, and the pathological changes of the body will not intensify.

2- non-linked type to insulin. Old is sick of people who are more than people. In this case, the main reason is to be the effect of impact on insulin due to the need. Dietic foods are treated as a treatment instead of insulin.

Patheorphological changes in the pancreas in diabetes, as important in the remaining members, is shrinking in cases, with a disease with a fat tissue and fibrill tissue sharing. The Aralches are often accessed and some islands, and some islands are hypertrophied in the calculation mechanism. Sometimes the degree of B-cells is observed.

The liver will become several times older, not identified in glycogen. The magnification of hepatocytes is observed. Diabhetic macrangiopathy and micronting are observed.

Objective: Study of morphological changes of the trafer diabetes and the dying people and their speculation.

Research tasks:

- Analysis of morphological changes of the stomzen gland in people in diabetes and died.
- Morphological changes of the panchetrician gland in people who are diabetes and the died are their specific analysis.
- Comparison and analysis of age on the morphological changes of the underground gland in diabetes and occupied.

Materials and methods.

As material, studied morphological changes of the material glands of the explanation diabetes diabetes, obtained in killed people and their specific analysis was studied. To do this, the breadgrounds of the total number of 25-50 years of age and the number of materials obtained from the 18-female sex were studied. The analysis was made based on the materials obtained from the Tashkent city Store SCI.

Acute complications are conditions that develop over a period of days or even hours in the presence of diabetes mellitus.:

Diabetic ketoacidosis is a serious condition that develops due to the accumulation of intermediate fat metabolism products (ketone bodies) in the blood. It occurs with concomitant diseases, primarily infections, injuries, operations, and malnutrition. It can lead to loss of consciousness and disruption of vital body functions. It is a vital indication for urgent hospitalization.

Hypoglycemia is a decrease in blood glucose levels below the normal value (usually below 3.3 mmol / l), occurs due to an overdose of sugar-lowering drugs, concomitant diseases, unusual physical activity or malnutrition, and the intake of strong alcohol.

First aid consists in giving the patient a sugar solution or any sweet drink inside, eating a meal rich in carbohydrates (sugar or honey can be held under the tongue for faster absorption), if possible, introducing glucagon preparations into the muscle, injecting a 40% glucose solution into a vein (before injecting a 40% glucose solution, vitamin B1 must be injected subcutaneously — prevention of local muscle spasm).

Hyperosmolar coma. It occurs mainly in elderly patients with or without a history of type 2 diabetes and is always associated with severe dehydration. Polyuria and polydipsia are often observed lasting from days to weeks before the syndrome develops. Elderly people are predisposed to hyperosmolar coma, as they are more likely to experience impaired perception of thirst. Another difficult problem is a change in kidney function (usually found in the elderly), which prevents the clearance of excess glucose in the urine.

Both factors contribute to dehydration and marked hyperglycemia. The absence of metabolic acidosis is due to the presence of circulating insulin in the blood and/or lower levels of counterinsulin hormones. These two factors interfere with lipolysis and ketone production. Already initiated hyperglycemia leads to glucosuria, osmotic diuresis, hyperosmolarity, hypovolemia, shock, and, in the absence of treatment, death. It is a vital indication for urgent hospitalization. At the prehospital stage, an intravenous hypotonic (0.45%) solution of sodium chloride is administered to normalize osmotic pressure, and with a sharp decrease in blood pressure, mesaton or dopamine is administered. It is also advisable (as with other comas) to conduct oxygen therapy.

Lactic acid coma in patients with diabetes mellitus is caused by the accumulation of lactic acid in the blood and occurs more often in patients over 50 years of age against the background of cardiovascular, hepatic and renal insufficiency, decreased oxygen supply to tissues and, as a result, accumulation of lactic acid in tissues. The main reason for the development of lactic acid coma is a sharp shift in the acid-base balance to the acidic side; dehydration, as a rule, is not observed in this type of coma. Acidosis causes a violation of microcirculation, the development of vascular collapse. Clinically, there is confusion (from drowsiness to complete loss of consciousness), respiratory disorders and the appearance of Kussmaul respiration, decreased blood pressure, a very small amount of urine (oliguria) or its complete absence (anuria). The smell of acetone from the mouth in patients with lactic acidosis usually does not occur, acetone is not detected in the urine. The concentration of glucose in the blood is normal or slightly elevated. It should be remembered that.

The late ones.

The picture of the fundus in retinopathy

They represent a group of complications that take months, and in most cases years, to develop.

Diabetic retinopathy is a lesion of the retina of the eye in the form of microaneurysms, spotty and spotted hemorrhages, solid exudates, edema, and the formation of new blood vessels. It ends with hemorrhages on the fundus, which can lead to retinal detachment. The initial stages of retinopathy are determined in 25% of patients with newly diagnosed type 2 diabetes mellitus. The incidence of retinopathy increases by 8% per year, so that after 8 years from the onset of the disease, retinopathy is detected in 50% of all patients, and after 20 years in approximately 100% of patients. It is more common in type 2, the degree of its severity correlates with the severity of nephropathy. The main cause of blindness in middle-aged and elderly people.

Diabetic micro- and macroangiopathy is a violation of vascular permeability, increased fragility, and a tendency to thrombosis.

Diabetic foot is a lesion of the feet of a diabetic patient in the form of purulent-necrotic processes, ulcers and osteoarticular lesions that occur against the background of changes in peripheral nerves, blood vessels, skin and soft tissues, bones and joints. It is the main cause of amputations in patients with diabetes mellitus.

Diabetes has an increased risk of developing psychiatric disorders such as depression, anxiety disorders, and eating disorders.

Conclusion: In short, the autopsy, which was held and diagnosed with the morphological changes of the steadfastule in people diabetes and died. At the end of the diagnosis, the total number of material from 26, 18 male and 8 female sexes was studied instead of the results of the diagnosis. An analysis was conducted at the hemotilinine-eazin-based name. The analysis was made based on the materials obtained from the Tashkent city Store SCI. According to the examination, it shows that the disease is intensifying the disease due to the distribution of liphergans and fibromatosis of the liperganes and as a result of the disease and the rapid development of the disease.

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