

**RESULTS OF COMPRESSIVE DISTRICT OSTEOSYNTHESIS (KDOS) IN
CLOSED METHOD BY ILIZAROV IN DIAPHYSARAL FRACTURES OF THE
HUMERUS**

¹Xairullaev Islam Lutfullaevich, ²Yusupov Xurshid Kodirjonovich
Samarkand State Medical Institute

ABSTRACT

Diaphyseal fractures of the humerus account for 15.4% of tubular fractures and up to 72% of total fractures of the humerus.

In the Samarkand branch of our Republican Specialized Scientific-Practical Center of Traumatology and Orthopedics from 2016 to 2020, 213 patients with diaphyseal fractures of the shoulder. Of the applicants, 106 had open fractures (49.7%) and were recommended for treatment in the Ilizarov apparatus.

Ilizarov's KDOS treatment has been shown to achieve positive results in the hospital, allowing the fracture to be stable, movement in the shoulder and elbow joints to be maintained during the treatment stages, compression or distraction to the fracture springs if necessary, and bone reparative regeneration.

Of the observed open fracture patients, 49 (46.2%) were women and 57 patients (53.7%) were men.

MATERIALS AND INSPECTION METHODS

The majority of patients treated at the clinic were 58 (54.7%) of the working age group aged 25-45 years, 24.5% or 26 patients aged 15-20 years, and 22 patients (20.7%) aged 45 to 60 years. . It is obvious that the majority of the injured are able-bodied people. Of these patients, 22 (20.7%) had fractures of the upper third of the shoulder, 63 (59.4%) had fractures of the middle third of the shoulder, and the remaining 21 patients (19.8%) had fractures of the lower third of the shoulder.

TREATMENT RESULTS

In the treatment of open fractures of the shoulder blade using the Ilizarov apparatus, the apparatus is installed, taking into account the state of moderate ration. The middle third of the shoulder is KDOS in diaphyseal fractures using 2 full and 2 half rings, the upper and lower parts of the shoulder are KDOS in diaphyseal fractures using 2 full and 1 half rings. The patient is placed on the operating table and the operation is performed under general anesthesia. The shoulder is given a vertical position, a body drawer is installed from the elbow, and the shoulder is given a medium-ration position. In this case, the wrist should face the opposite ear. This condition is called moderate physiological ration condition of the shoulder. The operation takes into account the different and topographical anatomical location of the shoulder in diaphyseal fractures. Clinical and radiological data are used.

X-ray image takes into account the duration of the formation of the primary pack of the fractured area and the strength of the wound. A good result was observed in 82 patients, 77.3% satisfactory result in 18 patients, 16.9% unsatisfactory (associated with slow completion) in 6 (5.6%) patients.

Conclusion: This method, which is used in diaphyseal fractures of the humerus, reduces the number of days patients stay in the hospital and the number of bed days. Increases the cost-effectiveness of treatment and reduces costs. As a result, it reduces disability (duration of incapacity for work) by accelerating the return of patients to work.

LITERATURE

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