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STATISTICAL ANALYSIS OF CLINICAL ANAMNESIS, LABORATORY PARAMETERS, AND AUTOPSY PROTOCOLS OF PATIENTS WHO DIED WITH A DIAGNOSIS OF ACUTE CHOLEDOCHOLITHIASIS.

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Relevance of the topic. Acute choledocholithiasis is one of the diseases that can lead to severe complications such as impaired bile flow, mechanical jaundice, cholangitis, acute pancreatitis, and liver dysfunction as a result of the presence of gallstones in the bile ducts. In some cases, the disease progresses rapidly and ends in sepsis, multiple organ failure, and death. Therefore, the comparative study of clinical anamnesis, laboratory tests, and autopsy results of deceased patients is of great scientific and practical importance. Such an analysis allows for the identification of factors influencing the severity of the disease, the frequency of complications, and the primary causes of death.

Purpose of the research. To determine the clinical and pathological characteristics of the disease, complications, and causes of death by statistical analysis of clinical and anamnestic data, laboratory parameters, and autopsy protocols of patients who died with a diagnosis of acute choledocholithiasis.

Materials and methods. The material for the study was the medical histories, outpatient data, laboratory test results, and autopsy protocols of patients who died with a diagnosis of acute choledocholithiasis. Patients' age, gender, disease duration, clinical signs, comorbidities, total bilirubin, ALT, AST, alkaline phosphatase, GGT, leukocytes, C-reactive protein, and other laboratory parameters are analyzed. Autopsy materials examine pathological changes in the liver, gallbladder, common bile duct, pancreas, and other internal organs. The results obtained are evaluated using methods of variational statistics, percentage indicators, average values, and correlation analysis.

Expected results. As a result of the study, a correlation was established between the age and sex distribution of the disease in patients who died from acute choledocholithiasis, changes in laboratory parameters, primary complications, and morphological changes identified during autopsy. It also assesses the degree of compatibility between the clinical diagnosis and the pathological diagnosis, as well as the main pathological processes leading to death.

Conclusion. A comprehensive statistical analysis of the clinical, laboratory, and pathological-anatomical data of deceased patients diagnosed with acute choledocholithiasis allows for a deeper study of the severity of the disease, complications, and causes of death. The results of the study can serve as early diagnosis of the disease, identification of risk groups and improvement of treatment tactics.

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