

INCIDENT LEVEL AND HISTOLOGICAL ANALYSIS OF GLAND POLYPS IN THE PARASOL CAVITY

Rakhmonova Sh.Q

1TDSI, assistant of the "Physiology and Pathology" department

Allamurodova I.A

TDSI, student of the 3rd year, group 310, Faculty of Stomatology

Abstract: *Nasal polyps are a risk factor for rhinosinusitis (CRSwNP), a disease characterized by subjective and objective clinical manifestations of sinonasal inflammation. Nasal polyps are inflammatory lesions that descend into the nasal airway, arise bilaterally and from the ethmoid sinus. Men are more affected than women, but so far no specific genetic or environmental factors have been strongly linked to this appearance. CRSwNP is often associated with asthma and allergic rhinitis. Only ~25-30% of all cases of chronic rhinosinusitis (CRS) have CRSwNP.*

However, CRSwNP is associated with significant morbidity and reduced quality of life, making it of clinical importance for disease detection, evaluation, and treatment.

CRSwNP is a middle-aged disease with a median age of onset of 42 years and a typical age of diagnosis between 40 and 60 years. Most often, nasal polyps appear in the nasal passage under the middle turbinate as bilateral inflammatory lesions arising from the ethmoid sinuses.

The purpose of the study: to determine the incidence of polyps in the nasopharynx cavity and histological analysis.

Research materials and methods: work was carried out based on the study of analyzes received in the pathology department of the Tashkent city pathologoanatomical bureau:

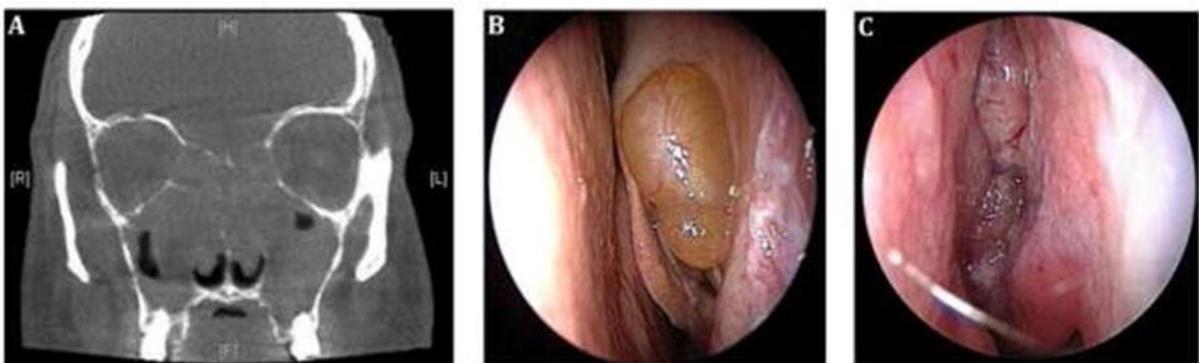


Photo 1. Description of nasal polyps. These polyps are usually bilateral in 60% of cases, and in the rest appear as a mass in one nostril. Patients developed symptoms of nasal congestion and a mass coming out of the nostrils. On examination, the mass was glistening like a grape, non-tender to probing, and non-bleeding to touch. Microscopically, polyps consist of loose mucous stroma and mucous glands, which are covered with respiratory epithelium. The stroma is infiltrated by lymphocytes, plasma cells, neutrophils and eosinophils.

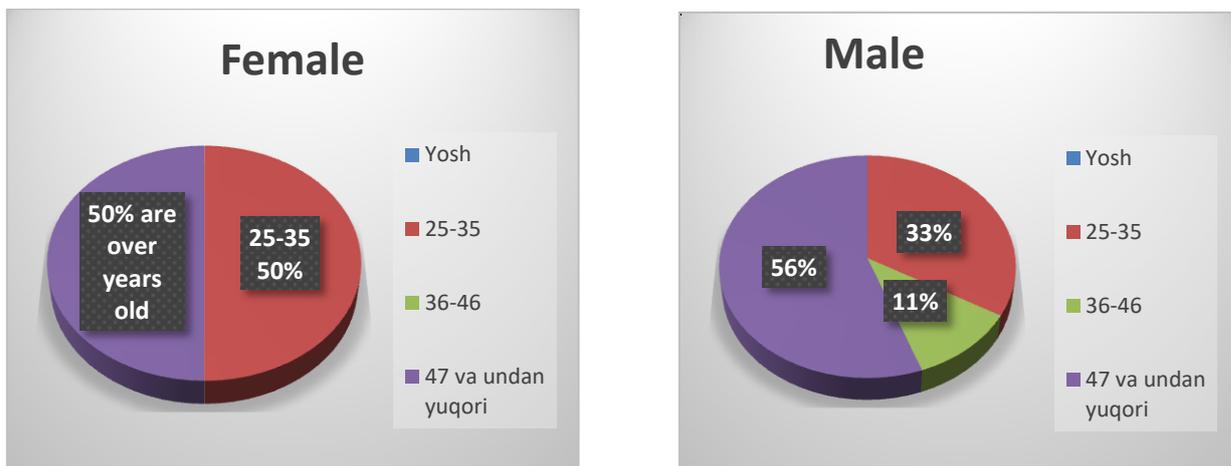


Sinus CT scan of a patient with CRSwNP (A). Benign (B) and malignant (C) nasal polyps are visualized directly in the nasal cavity by endoscopy.

Result: In 10 months of 2022, a total of 13 patients, 4 of them women and 9 men, were admitted to the Bureau of Pathology and Anatomy of the city of Tashkent.

According to the following analysis, 50% of women are 25-35 years old, and 50% are older than 47 years.

Among men: 56% are over 47 years old, 33% are 25-35 years old, 11% are 36-46 years old.

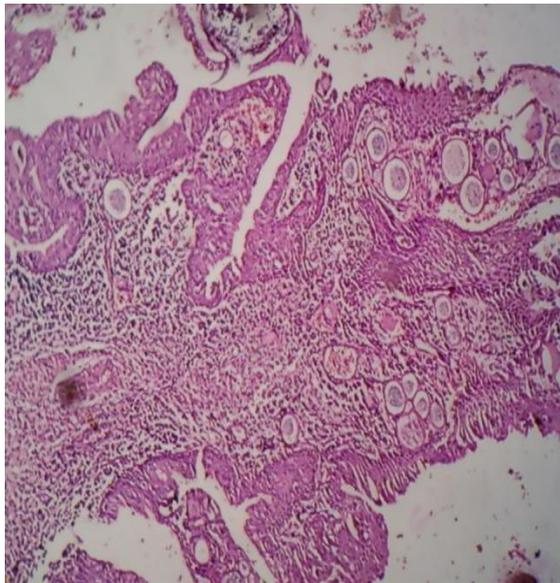


Glandular polyp growing from the nasal cavity in men and women.

In the histological examination of the samples brought to the pathology bureau:



Microphoto 1. Thickening and thinning of the surrounding tissue of the growing polyp is covered with fibrous tissue.



Microphoto 2. Vascular hyalinosis around the growing polyp tissue, covering epithelium

growth in different proportions, proliferation process in intermediate tissue was observed.

Conclusion

In conclusion, colonic polyps occur bilaterally in the nasal cavity and develop well in CRSwNP. Men are affected more often than women, but so far no specific genetic or environmental factors have been linked to the development of the disease. CRSwNP is often associated with asthma and allergic rhinitis. As a final conclusion, it can be said that polyps of the nasopharynx cavity are more common in men older than 47 years.

REFERENCES:

1. Fokkens WJ, Lund VJ, Mullal J, Bachert C, Alobid I, Baroody F, et al. European position on rhinosinusitis and nasal polyps 2012. *Rhinol Suppl.* 2012;3:1–pp.298
2. Grigoreas C, Vourdas D, Petalas K, Simeonidis G, Demeroutis I, Tsioulos T. Nasal polyps in patients with rhinitis and asthma. *Allergy Asthma Proc.* 2002;23:169–74
3. Mainz JG, Koitschev A. Pathogenesis and management of nasal polyposis in cystic fibrosis. *Curr Allergy Asthma Rep.* 2012;12:163–74.
4. Banerjee A, Piccirillo JF, Thawley SE, Levitt RG, Schechtman KB, Kramper MA, et al. Polyps or polypoid mucous membranes are more common in patients with chronic rhinosinusitis. *I am J Rinol.* 2007;21:19–26
5. Dietz de Loos DA, Hopkins C, Fokkens WJ. Symptoms of chronic rhinosinusitis with and without nasal polyps. *Laryngoscope.* 2013;123:57–63.
15. Thompson CF, Price CP, Huang JH, Min JY, Suh LA, Shintani-Smith S, et al. A pilot study of symptom profiles of polyp versus eosinophil-based classification of chronic rhinosinusitis. 2015

