

### RESULTS OF EFFECTIVENESS OF FUNCTIONAL TREATMENT OF CHRONIC GLOMERULONEPHRITIS

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**Relevance of the problem.** To date, more than twenty kidney diseases are known, the endpoint of clinical manifestations of which is chronic renal failure (CHF). Research in recent years has shown that arterial hypertension, smoking, age, sex, dyslipidemia, diabetes mellitus, some autoimmune diseases, impaired calcium and phosphorus metabolism, the use of neurotoxic drugs, the influence of psychoemotional and oxidative stress, the renin-angiotensin-aldosterone system, nutritional disorders, and others play a key role in the genesis and development of CKD.

In the conditions of the new Uzbekistan, the development of effective methods for the prevention, diagnosis, and treatment of chronic kidney disease is one of the urgent problems facing specialists in this field today.

**Materials and methods of research.** The results of the study were taken from 261 patients aged 18 to 60 years in the Department of Nephrology and Hemodialysis of the Andijan Regional Multidisciplinary Medical Center, of which 129 were men and 132 were women, the control group consisted of 25 men and 30 women with chronic kidney disease.

The results of assessing the effectiveness of dietary therapy in chronic glomerulonephritis were analyzed.

After consuming 200 ml of Ali tea infusion and 200 grams of bread made from second-grade Uzbek flour daily, the general condition of patients and biochemical indicators of blood and urine were assessed.

Ali tea contains 5 grams of lavender, rosemary, papaya, guava, olive, rose, chakkanda leaves, narrow-leaved cassava (senna) leaves and seeds, birch leaves and buds, thousand-leaved leaves and stems, willow bark, and is brewed in 100 ml of boiled water. Patients were prescribed 100 ml during the day in the winter and autumn seasons, 200 ml in the summer-spring seasons. At the same time, the daily diet of patients in hospital and home conditions included Obi-non, made from Uzbek flour of the second grade.



The materials of the study were recorded 4 times a year (in the winter, spring, summer, and autumn seasons) in the average daily indicators for 7 days in the accounting sheet of the specific products consumed by patients under expedition conditions and were compared with the requirements of SanPiN 0007-2020 "Mean Daily Rational Nutrition Standards for Ensuring Healthy Nutrition of the Population of the Republic of Uzbekistan by Age, Sex, and Professional Activity Groups." In the daily ration, the main nutrients and energy value were calculated according to the "Chemical Composition of Food Products".

Statistical processing of the research results was carried out using the "Statistica for Windows 7.0" personal computer application software package.

**Discussion of the analysis of the obtained results.** We monitored the general condition of patients by recommending 100-200 g of Obi bread to patients in the hospital and at home, as can be seen from this, the amount of bread in their daily diet was reduced to 65-311 g by seasons and sexes, and as a result, the energy value was also reduced to 266.5-1275.1 kcal.

It is noted that Ali-chay contains medicinal herbs aimed at the circulatory system, liver, digestive system, respiratory system, and prevention of insomnia.

Obi-non, made from Uzbekistan's second-grade flour, differs in its lower protein, fat, and carbohydrate content compared to bread made from high-grade flour, its higher nutritional fiber content by 1.7-1.9 times, and its sufficient content of B vitamins and iron.

In chronic glomerulonephritis, an increase in arterial pressure was noted in 81.5% upon admission to the hospital, and after 3 months of treatment with medications, after consuming Ali tea and Obi-non made from Uzbekistan flour of the second grade, vomiting occurred in 16.9%, in the control group 58.2%-38.2%, the difference between the main and control groups was 22.6%, oligouria decreased by 11.1%, vomiting symptoms decreased by 9.1%, fatigue symptoms decreased by 7.9%, and significant changes in their general condition were noted.

It should be noted that the inclusion of Ali tea (100-200 ml) instead of water and tea in the daily diet of patients with chronic glomerulonephritis and



## E- Global Congress

Hosted online from Dubai, U. A. E., E - Conference.

Date: 30<sup>th</sup> July 2025

**Website:** <https://eglobalcongress.com/index.php/egc>

ISSN (E): 2836-3612

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Obinon, made from second-grade Uzbek flour, 100-200 g instead of bread, and ensuring its supervision by a family doctor, along with improving the general condition of patients, prevented kidney damage and complications, prevented patients from receiving prophylactic treatment twice a year, and reduced their stay in the hospital by 3-4 days.