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Studying the Dynamics of the Incidence of Connective and Soft Tissue Tumors in the Fergana Region

Sheralieva Sayyorakhan Janishboyevna
Republican Specialized Scientific and Practical Medical Center of Oncology and Radiology, Fergana branch

Polatova Jamila Shagayratovna
Republican Specialized Scientific and Practical Medical Center of Oncology and Radiology, Tashkent State Dental Institute

ANNOTATION: to assess the extent of disease in connective and soft tissue tumors (CSTT) in the Fergana region. Patients and methods: our scientific work was carried out over 112 patients registered in the branch of Fergana region of the Republican specialized oncology and radiology scientific - practical Medical Center for 2015-2019 years. The data were obtained in accordance with the accepted form of registration and reporting documents of the Ministry of health of the Republic of Uzbekistan – №7. When we analyzed these patients statistically, the rate of occurrence in women and men was the same ratio. Our scientific work was carried out in patients from 0 to 80 years of age. The average age of the patients was 52±0.2 years. Results and conclusion: The incidence of CSTT is growing year after year. And this can be attributed to the difficulties that arise in the diagnosis and treatment of this tumor disease due to heterogeneity. And in the distribution by age, it can be seen that it is widespread in an increasingly high-age population. The reason why most patients are identified at Stage II when the disease is studied on bskcs is that the diagnosis can be associated with some ease, since CSTT is found in the limbs in 45-50% of cases. While many patients in Stage IV have met, the disease is aggressive, that is, most of them have sarcoma, but the area of the abdominal cavity can be associated with a relatively increased incidence of soft tissue tumors and the complexity of its diagnosis.

KEY WORDS: soft tissue tumors, soft tissue sarcoma, incidence rate.

Background: Unfavorable environmental factors, unsatisfactory quality of nutrition, poor ecology lead to the fact that the incidence of soft tissue tumors increases year by year. These are formations of both benign and cancerous nature that affect muscles and connective, adipose tissue and all layers of the skin. According to statistics, this type of pathology accounts for up to 2% of all neoplasia detected in humans. All of soft tissue lesions of a tumor nature, malignant ones account for about 10% of all formations [1]. The incidence of connective tissue and soft tissue sarcomas (STS) in the world varies from very low rates in Asia (0.5-1.0) to high rates (3) in the USA and in some European countries [2].The dynamics of morbidity and mortality from STS is difficult to assess due to frequent changes in the classification based on both histogenesis and organ localization of the tumor [3]. The 5-year survival rate for fibrosarcoma and liposarcoma, according to the USA, is 70-75% [4].The risk

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of STS is increased in agricultural workers and foresters exposed to certain herbicides and insecticides, most notably phenoxy herbicides and chlorophenols [5].

From the above points of view, it can be seen that connective and soft tissue tumors are a disease that is poorly studied and requires a lot of scientific research, despite the fact that they are a pressing problem among all countries.

Objective of the study: to assess the extent of disease in connective and soft tissue tumors in the Fergana region.

Material and methods: our scientific work was carried out over 112 patients registered in the branch of Fergana region of the Republican specialized oncology and radiology scientific - practical Medical Center for 2015-2019 years. The data were obtained in accordance with the accepted form of registration and reporting documents of the Ministry of health of the Republic of Uzbekistan – №7. When we analyzed these patients statistically, the rate of occurrence in women and men was the same ratio. Our scientific work was carried out in patients from 0 to 80 years of age. The average age of the patients was 52±0.2 years.

Results and discussion: initially, patients were divided according to the indicators of morbidity (Table 1).

Table 1. ***Distribution of patients by incidence rate, n=112***

	2016 y	*2017 y*	*2018 y*	*2019 y*
Abs	20	32	30	30
%	0,1%	0,12%	0,13%	0,12%

Patients were analyzed by age. The distribution of patients by age was presented in Table 2.

Table 2. ***Distribution of patients by age, n=112***

Age and gender indicator		***Years***							
		2016y		***2017y***		***2018y***		***2019y***	
		abs	*%*	*Abs*	*%*	*Abs*	*%*	*abs*	*%*
0-14	***male***	*1*	*5%*	-	-	*1*	*3,2%*	*2*	*6,7%*
	female	-	-	*2*	*6,25%*	*1*	*3,2%*	-	-
15-17	***Male***	-	-	-	-	-	-	-	-
	female	-	-	*1*	*3,1%*	-	-	-	-
18-24	***male***	*2*	*10%*	*2*	*6,25%*	*1*	*3,2%*	*2*	*6,7%*
	female	-	-	*1*	*3,1%*	*2*	*6,8%*	-	-
25-34	***male***	*2*	*10%*	*2*	*6,25%*	*1*	*3,2%*	*3*	*10%*
	female	*2*	*10%*	*1*	*3,1%*	-	-	*1*	*3,2%*
35-44	***male***	*3*	*15%*	*3*	*9.4%*	-	-	-	-
	female	*7*	*35%*	*3*	*9.4%*	*2*	*6,8%*	*2*	*6,7%*
45-54	***male***	*1*	*5%*	*5*	*9.4%*	*4*	*13,4%*	*1*	*3,2%*
	female	*1*	*5%*	*3*	*9.4%*	*3*	*10%*	*2*	*6,7%*
55-64	***Male***	*1*	*5%*	*3*	*9.4%*	*2*	*6,8%*	*4*	*13,4%*
	Female	-	-	*2*	*6,25%*	*6*	*20%*	*6*	*20%*
65<	***Male***	-	-	*1*	*3,1%*	*4*	*13,4%*	*5*	*16,7%*
	Female	-	-	*3*	*9.4%*	*3*	*10%*	*2*	*6,7%*
Total	***Male***	*10*	*50%*	*16*	*50%*	*13*	*43,3%*	*17*	*56,7%*

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	Female	*10*	*50%*	*16*	*50%*	*17*	*56,7%*	*13*	*43,3%*
	Total	*20*	*100%*	*32*	*100%*	*30*	*100%*	*30*	*100%*

At the same time, patients were divided according to the stages of the disease (Table 3).

Table 3. ***Distribution of patients by disease stages, n=112***

Years	**Stages**							
	I stage		**II stage**		**III stage**		**IV stage**	
	Abs	%	abs	%	Abs	%	Abs	%
2016	2	10%	14	70%	3	15%	1	5%
2017	3	9,4%	22	68,8%	4	12,5%	3	9,4%
2018	2	6,7%	23	76,7%	2	6,7%	3	10%
2019	-	-	24	80%	3	10%	3	10%

We may see a relative increase in the incidence of CSTT. If we pay attention to the 1 table, we can see that it increased by 33,3% compared to the 2016 year. In 2016 and 2107 years, there was no difference in the distribution of patients by gender in the representatives of both genders. In 2018 year, the figure amounted to 56,7% in men, in 2019 year-to 43,3%. When distributed by age, in 2016 year mainly accounted for 35-44% of patients in the age group. In 2017, however, patients in the 45-54-year-old group were identified more (19%). By 2018, 55-64-year-old patients in the same age group (26,8%) were observed more than in the same age group (33,4%), and in the same age group in 2019. Patients were also studied at the same time, according to the stages of the disease. According to him, the majority of patients, namely 80% of patients identified in II-stage. And in Stage IV, it is possible to see that the detection has increased increasingly mukin. If in 2016 year patients in the IV stage accounted for 5%, by 2019 year this figure was 10%.

In conclusion, it should be said that, like most Tumor Diseases, the incidence of Thrush is growing year after year. And this can be attributed to the difficulties that arise in the diagnosis and treatment of this tumor disease due to heterogeneity. And in the distribution by age, it can be seen that it is widespread in an increasingly high-age population. The reason why most patients are identified at Stage II when the disease is studied on bskcs is that the diagnosis can be associated with some ease, since Byuto is found in the limbs in 45-50% of cases. While many patients in Stage IV have met, the disease is aggressive, that is, most of them have sarcoma, but the area of the abdominal cavity can be associated with a relatively increased incidence of soft tissue tumors and the complexity of its diagnosis.

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