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INTERNATIONAL CONFERENCE ON MULTIDISCIPLINARY STUDIES AND EDUCATION: a collection scientific works of the International scientific conference – London, England, 2025. Issue 1

Languages of publication: Uzbek, English, Russian, German, Italian, Spanish

The collection consists of scientific research of scientists, graduate students and students who took part in the International Scientific online conference «**INTERNATIONAL CONFERENCE ON MULTIDISCIPLINARY STUDIES AND EDUCATION**». Which took place in London , 2025.

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PREVENTION OF TROPHIC ULCERS IN PATIENTS WITH ATHEROSCLEROSIS OF THE FOOT ARTERIES

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Relevance of the topic: Atherosclerosis of the foot arteries is a progressive condition that significantly impairs blood flow, leading to ischemia and, in severe cases, trophic ulcers. These ulcers not only diminish quality of life but also pose a high risk for infection, gangrene, and potential amputation. Given the increasing prevalence of peripheral arterial disease (PAD) associated with aging populations, diabetes, and other cardiovascular risk factors, the prevention of trophic ulcers has become a critical public health challenge. This topic is relevant due to its direct implications on patient morbidity, healthcare costs, and the need for multidisciplinary approaches to manage complications effectively.

Purpose of the study: This study aims to evaluate the effectiveness of various prevention strategies for trophic ulcers in patients with atherosclerosis of the foot arteries. The goal is to identify evidence-based interventions that can mitigate the risk of ulceration and promote vascular health in this patient population.

Materials and methods: The study was conducted over 12 months at the Fergana Branch of the Republican Research Center of Emergency Medicine (RRCEM) and involved 62 patients diagnosed with PAD and ischemia of the lower extremities. Participants were divided into two groups:

Group A (intervention group): Received comprehensive management, including pharmacological treatments (antiplatelets, statins, and vasodilators), lifestyle modifications, regular wound assessments, and foot care education.

Group B (control group): Received standard pharmacological treatment without specialized care.

Primary outcomes measured included the incidence of trophic ulcers, wound healing rates, and patient adherence to preventive strategies. Data were analyzed using statistical software, and outcomes were compared between the two groups.

Results and Discussion: The study found that the incidence of trophic ulcers was significantly lower in Group A (12%) compared to Group B (28%) over the study period. Patients in the intervention group also demonstrated better adherence to foot care routines, with a 35% improvement in self-reported practices such as moisturizing, avoiding trauma, and regular use of custom orthotics. Key findings include:





Pharmacological interventions, particularly the use of antiplatelets and statins, reduced the risk of critical ischemia.

Regular foot care assessments led to early detection of minor wounds, preventing progression to ulcers.

Patients who adhered to lifestyle modifications, such as smoking cessation and a balanced diet, had improved overall vascular health.

These results underscore the importance of a multidisciplinary approach to prevention, combining pharmacological, educational, and lifestyle strategies. The findings are consistent with prior studies highlighting the role of early intervention in reducing ulceration rates.

Conclusion: Preventing trophic ulcers in patients with atherosclerosis of the foot arteries requires a proactive and multidisciplinary approach. Comprehensive management, including regular monitoring, education, and evidence-based pharmacological interventions, significantly reduces the risk of ulceration and improves patient outcomes. **Recommendations:**

Implement regular foot care programs and vascular assessments as part of routine management for patients with PAD to ensure early detection and intervention.

Promote patient education campaigns focusing on the importance of foot hygiene, smoking cessation, and adherence to prescribed treatments to improve long-term vascular health.

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