

FACTORS AFFECTING BACTERIOLOGICAL DAMAGE MUSCLE LICE

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Abstract

The article theoretically analyzes the main internal (endogenous) and external (exogenous) factors that affect the process of muscle tissue regeneration against the background of bacterial infections. During the study, such mechanisms as the negative impact of pathogens Staphylococcus aureus, Clostridium perfringens on myofibrillary structure, such mechanisms as necrosis, inflammation, violation of angiogenesis and fibrosis formation are elaborately illuminated. The role of factors such as the state of the immune system, age, hormones, nutrition and oxygen supply in the recovery of muscle tissue is assessed. It also analyzes antibiotic therapy, biostimulants and modern methods of rehabilitation, and proposes conceptual directions for further scientific and experimental research. This theoretical study substantiates the need for a better understanding of the processes of muscle regeneration, improvement of clinical rehabilitation approaches as well as an in-depth study of this problem in the conditions of Uzbekistan.

Keywords: Bacterial infection, muscle tissue, regeneration, myofibrils, necrosis, angiogenesis, immune system, antibiotic therapy, fibrosis, rehabilitation, biostimulants, Uzbekistan healthcare.

Introduction

In recent years, in the field of traumatology, surgery and rehabilitation, the regeneration of muscular tissue against the background of bacterial infections is recognized as one of the urgent problems. World Health Organization (WHO) According to the Ministry of Internal Affairs of the Kyrgyz Republic, Every year, more than 300 million people worldwide undergoes soft tissue injuries of varying degrees, including their bacterial infections in 20–25 percent develops as a complication (WHO, 2022). This significantly slows down the muscle's natural recovery process

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and increases the risk of long-term disability. Bacteriological lesions, especially Staphylococcus aureus, Clostridium perfringens, Pseudomonas aeruginosa As a result of the activity of such pathogenic microorganisms, it occurs with necrosis of muscle tissue, violation of cell regeneration, excessive production of inflammatory mediators and a slowdown in the process of angiogenesis. It is as a result of such complex physiological mechanisms that the process of muscle tissue biting is compared to normal slows down 1.5–2 times (Kumar et al., 2021). The urgency of this problem is directly related not only to the quality of life of the patient, but also to the economic burdens on the health system. For example, The annual cost of treating soft tissue infections in the US is \$ 6 billion, which further increases the need for improved disease prevention and rehabilitation techniques (CDC, 2023). Viewed in this context, in-depth study of physiological, biochemical and immunological factors that influence the licking process of bacteriologically damaged muscle tissue is one of the priority areas of research today. Especially, activity of macrophages, cytokine balance, the process of renewal of capillaries, oxygen and nutrient supply Factors such as these are highlighted as key components of transaction mechanisms.

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In the framework of this article, the physiological basis of muscle regeneration under conditions of bacterial lesion, internal and external factors affecting it, as well as modern therapeutic approaches are scientifically analyzed.

Bacterial infections and damage to muscle tissue

Structure and physiology of muscle tissue: Skeletal muscles are one of the basic tissues that perform voluntary movements in the human body and their main structural unit are muscle fibers (myosinfibrils and actinfibrils), which have myofibrils. Each muscle fiber produces energy through the nucleus and mitochondria, which are surrounded by a sarcolemma and located inside the sarcoplasm.

When muscle tissue is injured, its regeneration occurs in the following three stages:

- 1. Inflammatory stage phagocytic cells (macrophages, neutrophils) are activated in the affected area.
- 2. New muscle cell differentiation satellite cells (myooblasts) are activated and turn into new muscle fibers.
- 3. Remodeling new fibers form a functional structure and are supplied to the blood through angiogenesis.

The role of myofibrils is precisely related to the production of contractile proteins required for movement, their regeneration of which is important for the restoration of muscle function.

Bacterial pathogens and their effects on muscle tissue

Bacterial infections complicate muscle regeneration, especially in open wounds or often caused by pathogens that are rarely found at the site of surgery.

The most common pathogens are:

- 1. Staphylococcus aureus produces enterotoxins, alpha-tissue toxins.
- 2. Clostridium perfringens is the main cause of gas gangrene, which produces α -toxin.
- 3. Pseudomonas aeruginosa increases inflammation in severe immunosuppressive cases.







Cellular and tissue mechanisms of lesion:

Effects of toxins– Exotoxins excreted by pathogenic bacteria (e.g. α -toxin of S. aureus) disrupt the sarcolemm, which disrupts ion balance, increases calcium flux, and leads to cell necrosis.

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- Excessive excretion of inflammatory mediators— Mediators produced by neutrophils and macrophages, such as interleukin-6 (IL-6), tumor necrosis factor- α (TNF- α), accelerate apoptosis of muscle cells.
- **Impairment of fibrosis and angiogenesis** Against the background of infection, fibroblasts become overactive and fibrosis is formed as a result of excessive production of collagen tissue. This disrupts the elasticity and function of the muscles. At the same time, angiogenesis (the formation of new capillary vessels) is also slowed down, which prevents regeneration.
- **Destructive Activity of Immune Cells** During infection, active CD8+ T-lymphocytes and neutrophils not only destroy bacteria but also damage regenerating muscle cells. This will lead to a slowdown of the recovery process.
- Metabolic Stress under Anaerobic Conditions— For instance, Clostridium perfringens multiplies in oxygen-poor environments and leads to the accumulation of harmful substances such as H2S in the tissues. And this causes myositis, necrosis, ishanemic conditions.

Factors that affect muscle tissue biting: a theoretical analysis

The regenerative potential of the musculoskeletal system depends on complex physiological, biochemical, and immunological factors. In particular, against the background of a bacterial infection, these factors are more acute and adversely affect the rate of recovery of muscle tissues. Below these factors are theoretically analyzed.

Internal (endogenous) factors

During our study, internal (endogenous) factors that directly affect the process of muscle tissue regeneration after bacterial infections were systematically analyzed. A key role among them is the functional state of the immune system, age- and sex-specific physiological changes, genetic predisposition, and hormonal dysregulation. In particular, the balance of macrophages between M1/M2 phenotypes at different stages of the immune response, as well as cytokine activity are closely related to the rate and quality of muscle cell regeneration after necrosis. The table below clearly shows the biological mechanisms of these factors and their effects on muscle regeneration.





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Table 1: Internal (endogenous) factors influencing muscle regeneration

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Factor type	Biologics tavsifi	Effects on muscle regeneration	Note
Immune	With the participation of	When activity is in balance: Activates	Chronic inflammation,
system status	macrophages (M1 / M2),	recovery	immunodeficiency slows
	T-lymphocytes,	If Discharge: delays	down regeneration
	cytokines, the healing		
	process is controlled		
Age	The activity of satellite	Rapid recovery in a young organism	In old age, angiogenesis
	cells decreases with age	slows down with old age	and collagen synthesis
			decrease
Gender	Estrogen (women) and	When hormonal balance: recovery	Estrogen stimulates cell
	testosterone (men)	accelerates	defense, while
	regulate muscle	Hormone breakdown: slow	testosterone stimulates
	metabolism		growth
Genetic	IGF-1, TGF-β genes	IGF-1: Activates recoveryTGF-β:	Genetic factors determine
predisposition	determine muscle	excess fibrosis	the quality of
	growth and fibrosis		regeneration
Hormones	Cortisol, insulin,	Insulin and somatotropin – accelerates	Increased cortisol under
	somatotropin regulate	regeneration	stress has catabolic
	metabolic processes in	Cortisol – slows down	effects
	the muscle		

3 External (exogenous) factors

- **Infectious load and bacterial segregation:** The type and amount of bacteria present in muscle tissues determine the strength of the tissue reaction. For example, Clostridium perfringens multiplies very quickly, producing gas and necrosis in the tissues, which leads to myositis and gangrene (Bryant et al., 2021).
- **Quality of treatment: Antibiotics and antiseptics:** The proper choice of antibiotic therapy plays an important role in tissue recovery. Empirical antibiotics are used temporarily until the type of infection is determined, but when the dose and duration are insufficient, the infection becomes chronic and impairs regeneration.
- **Nutrition, diet, oxygen deficiency:**Protein, amino acids (in particular, leucine and glutamine) are necessary for muscle recovery. Micronutrients such as iron, zinc, vitamin C are essential for angiogenesis and collagen synthesis. In the case of hypoalbuminemia, fluid is retained in the tissues, which adversely affects regeneration. And lack of oxygen (e.g., in diabetic angiopathy) slows down the healing due to ischanemia and hypoxia.
- **Quality of surgical intervention:** Improper stitches, insufficient disinfection of the wound site, insufficient removal of necrotic tissue interfere with the healing process. Where complete debridement is not performed, bacteria can colonize, causing constant inflammation.





Angiogenesis and alteration of fibroblast activity against the background of bacterial infection

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The role of angiogenesis in recovery processes

Angiogenesis is the formation of new blood vessels in the affected area, creating the basis for the survival of muscle cells through the delivery of oxygen and nutrients. Against the background of bacterial infection, angiogenesis can be blocked due to overproduction of cytokines such as IL- 1β and TNF- α (Ramasastry, 2022).

Infection disrupts angiogenesis in two ways:

- Effect of toxins on endothelial cells
- Ejaculation of new capillary vessels by lysingen enzymes \rightarrow

Collagen production and fibrosis: Fibroblasts produce collagen during muscle recovery, but fibrosis is formed when this process continues beyond normal. As a result of fibrosis, the muscle loses its elasticity, movement is limited, and pain syndrome occurs. Also, because fibrosis tissue is not adequately supplied with blood, there is constant hypoxia — which increases the risk of chronic inflammation and new injuries.

Possible treatment lines and research opportunities: An integrated approach in modern medicine is required to accelerate the regeneration of bacteriologically damaged muscle tissue and reduce complications. The treatment is predominantly based on suppressing infection, restoring immunological equilibrium and restoring the physiological functions of tissues.

Antibiotic therapy and effects on regeneration: Antibiotics are the main means in controlling bacterial infection, reducing the infectious load on muscle tissues and reducing the production of inflammatory mediators. But improperly selected antibiotics or their overuse:

- Suppresses the immune response
- Interference with healthy cell proliferation \rightarrow
- May cause mitochondrial dysfunction (Nguyen et al., 2022) \rightarrow



Figure 1. Algorithm for muscle tissue regeneration under the action of bacterial infection.





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In the modern approach, dose selection is not only based on pathogen sensitivity, but also taking into account the patient's immune status, metabolic activity and stage of finish. Especially in the presence of a bacterial biofilm, simple antibiotic therapy is not sufficient, so combined or combined treatment with topical antibiotics is recommended (Koo et al., 2017).

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Biostimulants and methods of rehabilitation Biostimulants

Drugs that activate tissue regeneration – epidermal growth factor (EGF), basic fibroblast growth factor (bFGF), platelet-rich plasma (PRP) – is used to accelerate the recovery phase after bacterial lesions.

– Platelet-separated growth factors present in PRP regulate angiogenesis, fibroblast activity, and reduce inflammation. – Cytokines such as interleukin-10 (IL-10) or IL-4 promote regeneration by directing macrophages to the M2 phenotype.

Methods of rehabilitation

Physiotherapy, electrostimulation, oxygen therapy (HBO – hyperbaric oxygen) and nutrition play a special role in rehabilitation. For example:

- → Hyperbaric oxygen therapy reduces hypoxia in muscles and activates angiogenesis.
- → Physiotherapy stimulates the activation of muscle fibers and serves as a prevention of contractures.

Proposal of scientific and experimental directions for further research

Fundamental and practical research should be carried out within the framework of this topic. The following areas are relevant:

Creating a model on animals

– It is proposed to create an experimental model of muscle infection (for example, in mice, rabbits or pigs) to study the regeneration process step by step – It is possible to assess the dynamics of microbiological load, immune response and histological changes.

Control of cytokine levels

– Monitoring the expression of inflammatory cytokines such as IL-1 β , TNF- α , IL-6, studying their changes in blood and muscle biopsy will allow you to determine the signaling pathways affecting regeneration.— These indicators will be evaluated using molecular technologies such as ELISA, PCR and Western blot.

The need to analyze the situation in Uzbekistan

- Clinical and epidemiological analyses of the effect of bacterial infections on muscle wasting in local conditions (against the background of surgery, sports injuries, diabetic injuries) are insufficient.



CONCLUSION





The process of recovery of muscle tissue under conditions of bacterial damage is one of the most complex and interrelated biological-molecular systems in the body. On the basis of this theoretical analysis, it is established that against the background of bacterial infection, muscle regeneration is disrupted under the influence of various factors, and this condition sharply changes the physiological dynamics of the healing process. First of all, bacterial pathogens, in particular Staphylococcus aureus, Clostridium perfringens va Pseudomonas aeruginosa Toxins excreted by microorganisms such as "Intoxication" damage the membranes of muscle cells, disrupt ion equilibrium and provoke cell necrosis. This infectious load significantly damages the normal mechanisms of muscle recovery, especially by slowing angiogenesis, excessive production of inflammatory mediators, destructive activity of immune cells, and the development of fibrosis. Internal (immune status, age, sex, genetic predisposition, hormones) and external (infectious load, quality of antibiotic therapy, nutrition, oxygen supply and surgical interventions) factors that influence the rate of regeneration form a complex system. In particular, the activity of growth factors, cytokine balance, and activation of fibroblasts are the main determinants of finish quality. Theoretical analyses show that the integration of modern treatment approaches - combination of antibiotic therapy, PRP and growth factor-based biostimulants, hyperbaric oxygen therapy and physiotherapeutic measures significantly improves the quality of regeneration. At the same time, the available scientific analyses support the need for in-depth clinical and experimental studies of this problem in Uzbekistan. In particular, the creation of a model of bacterial infection in animals, the study of the relationship between inflammatory cytokines and tissue regeneration, and the establishment of clinical statistical monitoring in local conditions allow expanding the fundamental scientific foundations in this area.

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References

- 1. Tidball, J.G. (2017). Regulation of muscle growth and regeneration by the immune system. Nature Reviews Immunology, 17(3), 165–178.
- 2. Charge, S.B.P., & Rudnicki, M.A. (2004). Cellular and molecular regulation of muscle regeneration. Physiological Reviews, 84(1), 209–238.
- 3. Nguyen, T., Lin, C.C., & Bui, L.T. (2022). Antibiotic effects on muscle healing: A review of preclinical and clinical studies. Journal of Orthopaedic Research, 40(1), 10–22.
- 4. Koo, H., Allan, R.N., Howlin, R.P., Stoodley, P., & Hall-Stoodley, L. (2017). Targeting microbial biofilms: current and prospective therapeutic strategies. Nature Reviews Microbiology, 15(12), 740–755.
- 5. Bryant, A.E., & Stevens, D.L. (2021). Clostridial myonecrosis: Mechanisms of tissue injury, diagnosis, and treatment. Infectious Disease Clinics of North America, 35(2), 367–384.
- 6. Ramasastry, S.S. (2022). Angiogenesis and wound healing: A review. Plastic and Reconstructive Surgery, 149(3), 567–576.
- 7. WHO. (2022). Global burden of soft tissue injuries. World Health Organization. Retrieved from https://www.who.int
- 8. CDC. (2023). Healthcare-Associated Infections: National Action Plan. Centers for Disease Control and Prevention. https://www.cdc.gov





9. Kraglund, M., & Bruun, N.E. (2019). Infection and inflammation in cardiovascular and muscular complications. Scandinavian Journal of Clinical and Laboratory Investigation, 79(5), 336-342.

ISSN (E): 2938-3765

- 10. Bharadwaj, S., Ginoya, S., Tandon, P., et al. (2016). Malnutrition: laboratory markers vs. nutritional assessment. Gastroenterology Report, 4(4), 272–280.
- 11. Yablonskiy, P.K., & Petrova, E.V. (2020). Fibroblast activity and extracellular matrix remodeling in chronic inflammation. Journal of Inflammation Research, 13, 797–806.
- 12. Muro, A.F., Chauhan, A.K., Gajovic, S., et al. (2021). Fibrosis and muscle regeneration: Molecular signals in balance. *International Journal of Molecular Sciences*, 22(9), 4375.
- 13. Yaqoob, P. (2018). Nutrition and immunity: An overview. British Journal of Nutrition, 120(S1), S1-S7.
- 14. Kim, J.H., & Kim, D.Y. (2020). Hyperbaric oxygen therapy for muscle regeneration: Clinical implications. Medical Gas Research, 10(4), 134-140.
- 15. Petrov, R.V., & Khaitov, R.M. (2019). Immunologiya: uchebnik dlya meditsinskikh vuzov. Moskva: GEOTAR-Media.
- 16. Хамидов, Х.Ж., ва Турсунов, Б.Т. (2021). Янги авлод антибиотиклари ва уларнинг клиник ахамияти. Тошкент: Илм ва Тараққиёт нашриёти.
- 17. Akhmedova, Z.R. (2020). Purulent infections and mechanisms of regeneration in open muscular injuries. *Innovations in Medicine*, 2(1), 45–49.
- 18. Abdullaev, M.K., & Nurmatov, S.T. (2022). PRP therapy and tissue regeneration: clinical practice in Uzbekistan. Medical Biological Sciences, 4(3), 63–70.
- 19. MICROBIOTIA AND BONE PHYSIOLOGY: THE EFFECT OF INTESTINAL MICROPHORA ON OSTEOGENESIS. (2025). Western European Journal of Modern **Experiments** and Scientific *Methods*, 3(03), 14-21. https://westerneuropeanstudies.com/index.php/1/article/view/2306
- 20. Berdiev O. V., Quysinboyeva M., Sattorova A. Managing thyroid gland diseases through telemedicine // Open Academia: Journal of scholarly research. – 2024. – T. 2. – No. 6. – C. 69-74.
- 21. Ogley H. H. D. et al. IMPORTANCE OF TELEMEDICINE IN PREVENTIVE TREATMENT //Eurasian Journal of Academic Research. – 2024. – T. 4. – No. 4-2. – C. 66-70.
- 22. Normurotovich Q. M., Daughter G. M. K. Hypothyroidism and heart failure // Eurasian Journal of Academic Research. – 2024. – T. 4. – No. 5-3. – C. 14-19.
- 23. Khalilov H. D. et al. HYPERTHYROIDISM AND HEART FAILURE //Research and Publications. – 2024. – T. 1. – No. 1. – C. 60-63.
- 24. Karabayev S. et al. OPPORTUNITIES, FEATURES AND BARRIERS OF TELEMEDICINE IN HEALTH //Еврасьский dergi medistel'ni i nauk. – 2023. – Т. 3. – No. 2 Part 2. – С. 41-46.
- 25. Shadmanova N. K., Khalilov KH. D. NAUCHNO-PRAKTICHESKII INTERES' **IZUCHENIYA** VEGETATIVNOY REGULATSII DYSADAPTIVNYKH **REAKTSII** CARDIOVASTISKOY SISTEMY [SCIENTIFIC AND PRACTICAL INTEREST STUDYING THE VEGETATIVE REGULATION OF DYSADAPTIVE REACTIONS OF THE CARDIOVASCULAR SYSTEM]. – 2023. – T. 3. – №. 8. – P. 126-134.
- 26. MICROFLORA D. K. H. S. O. F. I. CHANGE EFFECT ON THE GLANDS //American Journal of Pediatric Medicine and Health Sciences (2993-2149). – 2023. – T. 1. – C. 81-83.





27. Dilshodovich, Khalilov Hikmatulla, Kayimov Mirzohid Normurotovich, and Esanov Alisher Akromovich. "RELATIONSHIP BETWEEN THYROID DISEASE AND TYPE 2 DIABETES." (2023).

ISSN (E): 2938-3765

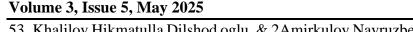
- 28. Normurotovich Q. M. Dilshod ogli XH RHODOPSIN G PROTEINS PHYLOGENETIC ANALYSIS //Journal of New Century Innovations. 2023. T. 43. No. 2. C. 178-183.
- 29. Normurotovich Q. M. Uktam oglu TF, Kurbanovna SN Telemedicine in Health in the Era of Covid-19 // Journal of Science in Medicine and Life. 2024. T. 2. No. 3. C. 114-118.
- 30. Khalilov Hikmatulla Dilshod oʻgʻli, Islambayeva Aziza Aybek qizi, Kadirova Madina Zafar qizi, and Ismatullayeva Hamida Oybek qizi. "Laboratory Diagnosis of Respiratory Tract Infections in Children". *American Journal of Pediatric Medicine and Health Sciences* (2993-2149), vol. 3, no. 1, Jan. 2025, pp. 231-5,
- 31. Normurotovich Q. M. Sodiq oglu BS CAUSES OF COMPLICATIONS OF THE CARDIOVASCULAR SYSTEM IN PATIENTS WITH COVID-19 //Research. UZ. 2024. T. 34. No. 3. C. 62-66.
- 32. Dilshod oglu, Khalilov Hikmatulla, Shatursunova Madina Abdujamilovna, and Parkhadova Mukhlisa Azizjanovna. "CHANGES IN RESPIRATORY RATE UNDER HYPOXIA." *AMERICAN JOURNAL OF SOCIAL SCIENCE* 3.2 (2025): 86-91.
- 33. Dilshad oglu, Khalilov Hikmatulla. "THE PLACE AND PROSPECTS OF ARTIFICIAL INTELLIGENCE IN MEDICINE: A MODERN APPROACH AND PRACTICAL IMPLICATIONS." *AMERICAN JOURNAL OF SOCIAL SCIENCE* 3.2 (2025): 92-99.
- 34. Dilshod oglu, Khalilov Hikmatulla, and Gulamnazarov Murodilla Ravshanovich. "THE RELATIONSHIP BETWEEN THYROID DISEASE AND TYPE 2 DIABETES." *AMERICAN JOURNAL OF APPLIED MEDICAL SCIENCE* 3.2 (2025): 198-203.
- 35. Dilshod oglu, Khalilov Hikmatulla, Amirkulov Navruzbek Turayevich, and Shukurov Umidjon Majid oglu. "EXPERIMENTAL MODELING OF HYPOTHYROIDISM." *AMERICAN JOURNAL OF APPLIED MEDICAL SCIENCE* 3.2 (2025): 207-209.
- 36. Normurotovich, Qayimov Mirzohid, and Khalilov Hikmatulla Dilshod oglu. "THE EFFECT OF THE GENERAL ENVIRONMENT ON THE DEVELOPMENT OF ALCOHOLISM." *AMERICAN JOURNAL OF APPLIED MEDICAL SCIENCE* 3.2 (2025): 210-217.
- 37. Dilshod oglu, Khalilov Hikmatulla, and Azizov Dilmurod Homidzoda. "EFFECTS OF ACUTE VIRAL RESPIRATORY DISEASES ON THE HEART." *AMERICAN JOURNAL OF APPLIED MEDICAL SCIENCE* 3.2 (2025): 1-10.
- 38. Dilshod oglu, Khalilov Hikmatulla, and Jumaev Navruz Shukhrat oglu. "LABORATORY DIAGNOSIS OF AIRWAY DISEASES IN CHILDREN UNDER FIVE YEARS OF AGE." *AMERICAN JOURNAL OF APPLIED MEDICAL SCIENCE* 3.1 (2025): 338-345.
- 39. Dilshod oʻgʻli, Khalilov Hikmatulla. "Laboratory Diagnosis of Respiratory Tract Infections in Children."
- 40. Tulyaganovna, Y. M. (2025). THE PHYSIOLOGY OF SKELETAL MUSCLES AND THEIR MECHANISM OF ACTION: ACTINS AND MYOSIN AND ENERGY FUNDAMENTALS. *AMERICAN JOURNAL OF SOCIAL SCIENCE*, *3*(4), 54-60.
- 41. Tolaganovna, Y. M., & Shavkatjon son, A. A. (2025). CARDIOVASCULAR CALCIFICATIONS IN THE HUMAN BODY, CAUSES OF MYOCARDIAL INFARCTION



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- **ISSN** (E): 2938-3765
- AND MEASURES TO GET THEM. AMERICAN JOURNAL OF APPLIED MEDICAL *SCIENCE*, *3*(4), 136-144.
- 42. Jórábék, K. (2025). BUYRƏK KASALLIKLARGA OLIB KELAGAN PATALOGIK HOLATLAR VA ULARNI OLDINI OLDINI OLISH. AMERICAN JOURNAL OF APPLIED MEDICAL SCIENCE, 3(4), 129-135.
- 43. Dilshod ogly, K. H., Abdujamilovna, S. M., & Majid ogly, S. U. (2025). THE IMPORTANCE OF ARTIFICIAL INTELLIGENCE IN THE DETECTION OF KIDNEY DISEASES MODERN APPROACHES AND PROSPECTS. Western European Journal of Modern Experiments and Scientific Methods, 3(03), 9-13.
- 44. Tilyabov, I., & Khalilov, K. (2025). MORPHOLOGICAL CHANGES IN THE NEPHRON SYSTEM AND RENAL CORTEX OF OFFSPRING OBTAINED WITH STREPTOZOTOCIN DIABETES MELLITUS (90TH DAY). In INTERNATIONAL BULLETIN OF ENGINEERING **AND TECHNOLOGY** (Vol. Number 4, pp. 55–61). Zenodo. https://doi.org/10.5281/zenodo.15200978
- 45. Khalilov Hikmatulla Dilshod o'g'li, Islambayeva Aziza Aybek qizi, Kadirova Madina Zafar qizi, & Ismatullayeva Hamida Oybek qizi. (2025). Laboratory Diagnosis of Respiratory Tract Infections in Children. Zenodo. https://doi.org/10.5281/zenodo.14779710
- 46. Khalilov, H., Namiddinov, A., Sayfullayeva, D., & Hikmatova, G. (2024). THE IMPORTANCE OF TELEMEDICINE IN PREVENTIVE TREATMENT. In EURASIAN JOURNAL OF ACADEMIC RESEARCH (Vol. 4, Number 4, pp. 66-70). Zenodo. https://doi.org/10.5281/zenodo.11082509
- 47. H.D.Khalilov, A.A.Namiddinov, O.V.Berdiev, & O.S.Ortiqov. (2024).HYPERTHYROIDISM AND HEART FAILURE. https://doi.org/10.5281/zenodo.11408144
- 48. Karabayev Sanjar Abdusamatovich, Khalilov Hikmatulla Dilshod oglu, Norberdiyev Sardorjon Shokir oglu, Shadmanova Nargis Kurbanovna. (2023). OPPORTUNITIES, FEATURES, AND BARRIERS TO TELEMEDICINE IN HEALTHCARE. EURASIAN **JOURNAL AND NATURAL** SCIENCES, 3(2), OF MEDICAL 41–46. https://doi.org/10.5281/zenodo.7673621
- 49. Shadmanova N.K., H. H. D. (2023). SCIENTIFIC AND PRACTICAL INTEREST IN THE STUDY OF AUTONOMIC REGULATION OF DYSADAPTIVE REACTIONS OF THE CARDIOVASCULAR SYSTEM. EURASIAN JOURNAL OF ACADEMIC RESEARCH, 3(8), 126–134. https://doi.org/10.5281/zenodo.8273002
- 50. 1Khalilov Hikmatulla Dilshod oglu 2Shatursunova Madina Abdujamilovna 3Parkhadova Mukhlisa Azizjanovna. (2025). CHANGES IN BREATHING RATE UNDER HYPOXIA [Data set]. Zenodo. https://doi.org/10.5281/zenodo.14948242
- 51. 1Khalilov Hikmatulla Dilshod son 2Safarmatova Zarnigor Shukhrat ovna 2Ne'matova Gulsora Mirzajon kyzy. (2025). THE ROLE AND PROSPECTS OF ARTIFICIAL INTELLIGENCE IN MEDICINE: A MODERN APPROACH AND PRACTICAL IMPLICATIONS [Data set]. Zenodo. https://doi.org/10.5281/zenodo.14948248
- 52. Khalilov Hikmatulla Dilshod oglu Gulamnazarov Murodilla Ravshanovich. (2025). RELATIONSHIPS BETWEEN THYROID DISEASE AND TYPE 2 DIABETES [Data set]. Zenodo. https://doi.org/10.5281/zenodo.14948282





53. Khalilov Hikmatulla Dilshod oglu, & 2Amirkulov Navruzbek Turayevich 3Shukurov Umidjon Majid oglu. (2025). EXPERIMENTAL MODELING OF HYPOTHYROIDISM [Data set]. Zenodo. https://doi.org/10.5281/zenodo.14948286

ISSN (E): 2938-3765

- 54. Qayimov Mirzohid Normurotovich Khalilov Khikmatulla Dilshod oglu. (2025). THE INFLUENCE OF THE GENERAL ENVIRONMENT ON THE DEVELOPMENT OF ALCOHOLISM [Data set]. Zenodo. https://doi.org/10.5281/zenodo.14948293
- 55. Khalilov Hikmatulla Dilshod oglu Azizov Dilmurod Homidzoda. (2025). EFFECTS OF ACUTE VIRAL RESPIRATORY DISEASES ON THE HEART [Data set]. Zenodo. https://doi.org/10.5281/zenodo.14826286
- 56. Khalilov Hikmatulla Dilshod oglu 1 Jumaev Navruz Shukhrat oglu 2. (2025). LABORATORY DIAGNOSIS OF AIRWAY DISEASE IN CHILDREN UNDER FIVE YEARS OF AGE [Data set]. Zenodo. https://doi.org/10.5281/zenodo.14751932
- 57. Yusupova Moxira Tulyaganovna Khalilov Hikmatulla Dilshod ugly Bakhriddinova Sevinch Anvarovna Orifjonova Gulasal Mahammadjonovna (2025). PHYSIOLOGY OF SKELETAL MUSCLES AND THEIR MECHANISM OF FUNCTIONING: ACTIN AND MYOSIN AND ENERGY BASES [Data set]. Zenodo. https://doi.org/10.5281/zenodo.15202948
- 58. Yusupova Moxira Tulyaganovna Khalilov, Hikmatulla Dilshod ugli Akbaraliyev Azizbek Shavkatjon ug's Orifjonova Gulasal Mahammadjon kyzy Ulug'berdieva Laylo Abdunazar kyzy. (2025). CARDIOVASCULAR CALCULATIONS IN THE HUMAN BODY, CAUSES OF MYOCARDIAL INFARCTION AND MEASURES TO PREVENT THEM. [Data set]. Zenodo. https://doi.org/10.5281/zenodo.15204030
- 59. 1Khalilov Hikmatulla Dilshod oglu 2 Kattayev Ĵrabek 3 Munavvarxojayev Azamkhon. (2025). ORDER KASALLIKLARGA OLIB KELADIGAN PATALOGIK HOLATLAR VA ULARNI OLDINI OLISH [Data set]. Zenodo. https://doi.org/10.5281/zenodo.15204022
- 60. Khalilov Hikmatulla Dilshod oglu Qayimov Mirzohid Normurotovich Tursunov Boburjon Faziljon oglu Mansurova Rukhshona Jasurovna. (2024). PHYSIOLOGY OF CEREBRAL HEMISPHERES [Data set]. Zenodo. https://doi.org/10.5281/zenodo.14252343
- 61. Khalilov Hikmatulla Dilshod oglu, Kurbonova Farangiz Sadriddin kyzy, Shodiyona Abdijabborova Sanjar kyzy, &Kholmuminov Javohir Salhiddin oglu. (2024). NEPHRONS AFFECTING THE **GLUCOSE** THRESHOLD. Zenodo. https://doi.org/10.5281/zenodo.13374327
- 62. Azimova, S. B., and H. D. Khalikov. "Modern pathogenetic aspects of urolithiasis development." The American Journal of Medical Sciences and Pharmaceutical Research 7.04 (2025): 21-24.

