WEB OF SCIENTIST: INTERNATIONAL SCIENTIFIC RESEARCH JOURNAL
ISSN: 2776-0979, Volume 3, Issue 6, June, 2022

EPITELIAL SAFE TUMORS OF BLADDER RATE, TYPES AND CAUSES

Shodiev O'lmas Mustafaevich,
Bukhara State Medical Institute

Khaidarova Nargiza Akhtamovna
Bukhara State Medical Institute

Summary

The discussion of these publications in the article examined the data on the incidence, types, and causes of benign tumors of the bladder epithelial tissue. The results showed that safe tumors of the bladder account for 4-6% of all cancers, are 4 times more common in men than in women, and manifest as polyps and papillomas. Risk factors for bladder tumors are hormonal imbalances, environmental pollutants, chronic diseases of the bladder, including cystitis, urethritis, leukoplakia, stone disease, prostatitis, ulcers, cases of blood and lymph stagnation in the bladder, parasite invasion. The polyp is single-nodular or numerous, the tissue is composed of fibromatosis, angiomatosis, myxamatosis, the surface of which has a structure covered with urothelium. Bladder papilloma is an exophytic-growing benign tumor, available in invasive and noninvasive types, with multilayered variable epithelium.

Keywords: bladder, tumor, benign, polyp, papilloma, causes, risk factors.

СИЙДИК ПУФАГИ ЭПИТЕЛИАЛ ХАВФСИЗ ЎСМАЛАРИ, УЧРАШ ДАРАЖАСИ, ТУРЛАРИ ВА САБАБЛАРИ

Шодиев Ўлмас Мустафаевич, Хайдарова Наргиза Ахтамовна
Бухоро давлат тиббиёт институти

Аннотация

Ушбу адабиётлар муҳокамаси мақолада сийдик пуфаги эпитей тўқима хавфсиз ўсмаларининг учраш даражаси, турлари ва сабаблари хақидаги маълумотлар ўрганилган. Натижалар шуни кўрсатдики, сийдик пуфаги хавфсиз ўсмалари барча ўсма касалликлари орасида 4-6% ташкил қилади, аёлларга нисбатан эркакларда 4 баробар кўп учрайди, полип ва папиллома кўринишида намоён бўлади. Сийдик пуфаги ўсмаларининг хавфли омиллари гормонлар дисбаланси, атроф муҳитнинг зарарли моддалари, сийдик пуфаги сурункали касалликлари, жумладан цистит, уретрит, лейкоплакия, тош касаллиги, простатит, яралар, сийдик пуфагидаги қон ва лимфа димланиши ҳолатлари,

паразитлар инвазияси ҳисобланади. Полип битта тугунли ёки кўп сонли бўлиб, тўқимаси фиброматоз, ангиоматоз, миксаматоз таркибли бўлиб, юзаси уротелий билан қопланган тузилишга эга. Сийдик пуфаги папилломаси экзофит ўсувчи хавфсиз ўсма бўлиб, инвазив ва ноинвазив тури мавжуд, кўп қаватли ўзгарувчан эпителий.

Калит сўзлар: сийдик пуфаги, ўсма, хавфсиз, полип, папиллома, сабаблари, хавфли омиллари

ДОБРОКАЧЕСТВЕННЫЕ ЭПИТЕЛИАЛЬНЫЕ ОПУХОЛИ МОЧЕВОГО ПУЗЫРЯ, ЧАСТОТА, ВИДЫ И ПРИЧИНЫ

Шодиев Улмас Мустафаевич, Хайдарова Наргиза Ахтамовна
Бухарский государственный медицинский институт

Резюме

При обсуждении этих публикаций в статье рассмотрены данные о частоте, видах и причинах возникновения доброкачественных опухолей эпителиальной ткани мочевого пузыря. Результаты показали, что сохранные опухоли мочевого пузыря составляют 4-6% всех онкологических заболеваний, встречаются у мужчин в 4 раза чаще, чем у женщин, проявляются в виде полипов и папиллом. Факторами риска развития опухолей мочевого пузыря являются гормональный дисбаланс, загрязнение окружающей среды, хронические заболевания мочевого пузыря, в том числе цистит, уретрит, лейкоплакия, мочекаменная болезнь, простатит, язва, случаи застоя крови и лимфы в мочевом пузыре, паразитарная инвазия. Полип бывает единично-узловым или многочисленным, ткань состоит из фиброматоза, ангиоматоза, миксоматоза, поверхность которого имеет структуру, покрытую уротелием. Папиллома мочевого пузыря – экзофитно-растущая доброкачественная опухоль, доступная в инвазивном и неинвазивном типах, с многослойным вариабельным эпителием.

Ключевые слова: мочевой пузырь, опухоль, доброкачественная, полип, папиллома, причины, факторы риска.

Introduction

Safe tumors of the bladder include epithelial tumors, polyps and papillomas, mesenchymal tumors include fibroids, leiomyomas, rhabdomyomas, hemangiomas, neurinomas, fibromyxomas. Bladder tumors account for 4-6% of all cancers. Bladder tumor processes are usually detected in people over 50 years of age, 4 times more common in men than in women (2, 6, 8). Among all types of bladder tumors, epithelial tumors make up the majority and account for 95%. Benign tumors that grow from the epithelium of the bladder are conditionally safe, which is why they are often malignant. Bladder polyps and papillomas can become malignant and cancerous, with a prevalence rate of 2.6% of all oncological diseases. In the last 10 years, the incidence rate of this malignant tumor has risen sharply, reaching 51.6 per 100,000 population by 2019. The mortality rate also increased slightly, from 22.4% in 2008 to 14.4% in 2019 (2, 3, 4, 9). According to other scientists, benign tumors of the bladder are the fourth most common cancer in men and the ninth most common in women. Among oncological diseases in the Russian state, bladder tumors rank 8th in men and 18th in women (4, 5, 10). This means that bladder tumors are 5-6 times more common in men, and this rate increases with age. The incidence of bladder tumors is not only age-related and gender-dependent, but also varies geographically and ethnically. It is 5-10 times more common in North America, Western Europe and Russia. It is relatively rare in Central and South America, Central Africa, and Central Asia. Bladder tumors are 2 and 8 times less common in black people and American Indians (4, 6, 9).

The mucous membrane of the bladder and its covering epithelium have specific features in terms of histotopographic and microscopic features. In fact, the mucous membrane is lined with a multilayered variable epithelium, in which the number of cells ranges from 3 to 6 rows. Cells located in the superficial layers are larger and their specificity is that they synthesize mucin like glandular epithelium, hence this epithelium is called variable or urotelium.

Polyp. Bladder polyps are a sucker-like structure with a fibromatous and angiomatous leg and its surface is lined with urothelium on the side facing the bladder cavity. Polyps often appear in the form of benign tumors, but can also occur as a result of inflammatory, hyperplasia, gamortoma, heterotopic processes (6, 9). The stroma of polyps can have a fibromatous, angiomatous, adenomatous, myxamatose, and sometimes lipomatous structure depending on the type of tissue. A polyp is actually a tumor-like process and in other cases a benign tumor that develops from a disruption of the interaction of mesenchymal and epithelial tissues (4, 8). Among the causes of polyp development, dysgormonal disorders have a special place, and against the background of a chronic infectious process, tissue dysregeneration begins and polyps

appear (6, 8). In the bladder, the most common of these histological types are fibromatosis, angiomatosis, and myxamatosis stromal types. The mechanism of polyp development consists of several stages. In the initial period, in the connective tissue of the mucous membrane of the area where the polyp appears, interstitial tissue tumors, mucopolysaccharides and disorganization of fibrous structures develop. In the next period, the connective tissue and blood vessels are rebuilt and remodeling begins. At the same time, the location of cells, fibrous structures and blood vessels in this tissue is disrupted, and histotopography is severely impaired. New fibrous structures, proliferated connective tissue cells, blood and lymph vessels appear, and connective tissue undergoes complete tissue atypicality.

Papilloma. Bladder papilloma is a mature, benign tumor that develops from an exophytic, multilayered variable type of epithelium (1, 3). Papillomas come in a variety of shapes and shades, sometimes with thick legs, sometimes thin. The papilloma is macroscopically sucking, the surface is velvety, soft-textured, and has a whitish-purple appearance. Sometimes multiple papillomas are found in the bladder, which means a large number of multicentric tumors. When a papilloma grows from a variable multicellular epithelium, a flat-cell, glandular metaplasia is observed in the overlying epithelium. Urotelial papilloma develops in young people and is considered a fast-growing tumor. Histologically, papilloma cells are characterized by minimal architectural disturbances, minimal atypia, and low-risk tumors. In the pathomorphological examination of papilloma, attention is paid to the degree of differentiation of cell and tissue structures in the tumor, the histotopographic structure, ie the G-system (2, 9). At present, cells are divided into two types according to their differentiation, i.e. low and high degree of differentiation. Although bladder papilloma is a benign tumor, its transformation into a malignant tumor can be of varying degrees, i.e., depending on the factors affecting it, the long-term effects of malignant factors, urodynamic disturbances, chronic inflammation, and so on.

There are two types of bladder papillomas in terms of structure: variable cell and flat cell. Urotelial cell papilloma is 4%, has a sucker-like structure, at the base of which grows thin and unformed connective tissue, and forms the stroma of suckers (1, 3, 4). There is a specific type of papilloma that grows when it sinks into the mucous membrane. This type of papilloma occurs in the elderly, ie in the age group of 65-70 years, grows slowly, usually it consists of a single nodule and is located in the neck of the bladder. Opinions on the clinical and morphological features of squamous epithelial papilloma are contradictory. Chin squamous epithelial papilloma occurs in 2-3% of cases and consists of thin suckers, hanging on the surface of the mucous

membrane. Its malignancy to malignant tumor is high, the epithelial layers on its surface are enlarged and thickened, and cell atypia occurs.

Bladder papilloma is divided into invasive and non-invasive types, there are several options in terms of clinical and morphological features: inventory papilloma is a benign tumor that arises from the superficial epithelium, then grows into the mucous membrane; the specificity of papilloma with low-grade malignancy is thickening of the urothelium covering the surface; the specificity of noninvasive urotelial papilloma is that its architectonics and histotopography are atypical, often located in the posterior and lateral walls. Papilloma of this type is often recurrent; papilloma with a high degree of noninvasive malignancy - consists of randomly located suckers, the architecture of which is clearly atypical and the development of a malignant tumor is high.

The detection of inactivation of the X chromosome in an inventory papilloma confirms that it is a clonal tumor growing from a single cell clone. Its heterozygous nature is not very high, 8-10%, but many have been confirmed to occur. Some studies have shown that FGFR3 or fibroblast growth factor receptor mutation is detected in 9.8–45% of inverted papillomas. In some cases, deletion was observed in 9r (3.9%), 9q (13.2%), and 17r (51%) (1, 3).

In modern medicine, among the causes of tumors of the human body, including benign and malignant tumors of the bladder, there are pre-tumor processes and pathohistological processes that directly lead to the tumor. Chronic and dysregenerative diseases of the organ are considered as pre-tumor diseases. Cell hyperplasia, metaplasia and dysplasia are pathohistological processes that lead directly to the tumor process. At present, the causes of any tumor go back to disorders at the molecular and genetic level. Of the genetic factors, mutations in the four genes present in each cell, namely apoptosis, proliferation, oncogenes, and prooncogens, are the true cause of tumors (1).

The following pathological conditions are considered as risk factors for bladder tumors: hormonal imbalance, environmental pollutants, chronic diseases of the bladder, including cystitis, urethritis, leukoplakia, stone disease, prostatitis, ulcers, cases of blood and lymph stagnation in the bladder, the presence of parasites and the age of the patient is taken into account. Among the precancerous diseases of the bladder in most cases, follicular cystitis, malacoplasia, amyloidosis, fibromatosis, endometriosis, gamartoma and cysts, which develop in the connective tissue of the submucosa, have a special place (2,4). In the pathogenesis of the development of bladder tumors is the stagnation of urine and the constant contact of the uroteal lining

with carcinogens. Modern medicine has found that urothelial proliferation is caused by mutations in the cell DNA of the r21-ras and r53 oncogens (1).

Conclusions

Safe tumors of the bladder account for 4-6% of all cancers, are 4 times more common in men than in women, and manifest as polyps and papillomas.

Risk factors for bladder tumors are hormonal imbalances, environmental pollutants, chronic diseases of the bladder, including cystitis, urethritis, leukoplakia, stone disease, prostatitis, ulcers, cases of blood and lymph stagnation in the bladder, parasite invasion.

The polyp is single-nodular or numerous, the tissue is composed of fibromatosis, angiomatosis, myxamatosis, the surface of which has a structure covered with urothelium.

Bladder papilloma is an exophytic-growing benign tumor, presenting both invasive and noninvasive types, with multilayered variable epithelium

Literature

1. Shodiev O'lmas Mustafaevich. Morphological Characteristics of Testicles under Radiation. International Journal of Innovative Analyses and Emerging Technology.// 2021. Volume: 1 Issue: 6
2. Andreeva Yu.Yu., Zavalishina L.E., Morozov A.A. and dr. Vyyavlenie DNA virus papillomы cheloveka v poverxnostnoy urotelialnoy kartsinome mochevogo puzыrya // Oncourologiya. - 2008. - T.1. - S. 34-5.
3. Andreeva, Yu.Yu. Opuxoli mochevogo bubble. Morphological diagnostics and genetics: Manual for doctors / Under ed. Yu.Yu.Andreevoy, G.A.Franka / Yu.Yu.Andreeva, N.V.Danilova, L.E.Zavalishina, T.V.Kekeeva, L.V.Moskvina, P.G.Malkov, G. A.Frank / RMAPO. - M., 2011. 50 p
4. Ibishev X.S., Kogan M.I. Papillomavirus infection u mujchin. Rostov n / D: GBOU VPO «RostGMU»; 2012: 52.
5. Clinical oncourology. Under the editorship of B.P. Matveeva // M.-2003.-717s
6. Lvov N.D., Panyukova E.M. New approaches to the diagnosis of papillomavirus infection. RMJ. Obstetrics and gynecology. 2016; (5): 325–327.
7. Neymark A.I., Bakarev M.A., Lushnikova E.L., Pichigina A.K., Yakovlev A.V. Clinical and morphological features of polyps of the urethra in women on the background of urogenital infections // Fundamental studies. - 2015. - № 1-6. - S. 1194-1198;

8. Yunusova E.I., Danilova O.V., Gizatullina R.D. Panavir in the treatment of patients with recurrent papillomavirus infection of the urogenital tract. Dnevnik Kazanskoy meditsinskoy shkoly. 2016; (2): 118–122.
9. Alazawi W., Pett M., Arch V., et al. Changes in cervical keratinocyte gene expression associated with integration of human papillomavirus 16 // Cancer Res. -2002. - V. 62. - N23. - P. 6959-6965.
10. Burk R.D., Chen Z., et al. Classification of papillomaviruses based on 189 types and proposal of taxonomic amendments // Virology. - 2010. - V. 401 - P. 70-79.
11. Burk R.D., Chen Z., Van Doorslaer K. Human papillomaviruses: genetic basis of carcinogenicity // Public Health Genomics. - 2009. - V.12. - P. 281-290.
12. Olimova Aziza Zokirovna, (2021, July). Comparative characteristics of the morphological parameters of the liver at different periods of traumatic brain injury. In Euro-Asia Conferences (pp. 139-142).
13. Olimova Aziza Zokirovna. Частота Встречаемости Миомы Матки У Женщин В Репродуктивном Возрасте. JOURNAL OF ADVANCED RESEARCH AND STABILITY (JARS). Volume: 01 Issue: 06 | 2021. 551-556 p
14. Olimova Aziza Zokirovna, Sanoyev Bakhtiyor Abdurasulovich. OVARIAN DISEASES IN AGE OF REPRODUCTIVE WOMEN: DERMOID CYST. Volume: 01 Issue: 06 | 2021. 154-161 p
15. Olimova Aziza Zokirovna. РЕПРОДУКТИВ ЁШДАГИ ЭРКАКЛАРДА БЕПУШТЛИК САБАБЛАРИ: БУХОРО ТУМАНИ ЭПИДЕМИОЛОГИЯСИ. SCIENTIFIC PROGRESS. 2021 й 499-502p
16. Olimova Aziza Zokirovna .MACRO- AND MICROSCOPIC STRUCTURE OF THE LIVER OF THREE MONTHLY WHITE RATS. ACADEMIC RESEARCH IN EDUCATIONAL SCIENCES /2021 й. 309-312 p
17. Sanoyev Bakhtiyor Abdurasulovich, Olimova Aziza Zokirovna. Pathology of Precancerous Conditions of the Ovaries in Women of Reproductive Age. Volume: 01 Issue: 06 | 2021.
18. Aziza Zokirovna Olimova ECHINOCOCCOSIS OF LIVER OF THREE MONTHLY WHITE RAT // Scientific progress. 2022. №3. URL: https://cyberleninka.ru/article/n/echinococcosis-of-liver-of-three-monthly-white-rat (дата обращения: 17.06.2022).
19. Aziza Zokirovna Olimova GASTRIC ULCER AND ITS COMPLICATIONS // Scientific progress. 2022. №3. URL: https://cyberleninka.ru/article/n/gastric-ulcer-and-its-complications (дата обращения: 17.06.2022).
20. Олимова, Азиза Зокировна, Турдиев, Машраб Рустамович БУХОРО ШАҲРИДА МЕЪДА ВА ЎН ИККИ БАРМОҚЛИ ИЧАК ЯРАСИ УЧРАШ

ЭПИДЕМИОЛОГИЯСИ // ORIENSS. 2022. №4. URL: https://cyberleninka.ru/article/n/buhoro-sha-rida-meda-va-n-ikki-barmokli-ichak-yarasi-uchrash-epidemiologiyasi (дата обращения: 17.06.2022).

21. Akhtamovna, K. N. ., & Muyitdinovna, K. S. . (2022). Ischemic Heart Disease in Path Anatomic Practice: Cardio Sclerosis. European Multidisciplinary Journal of Modern Science, 5, 402–406. Retrieved from https://emjms.academicjournal.io/index.php/emjms/article/view/288