

**PREVALENCE OF DIABETIC FOOT IN PATIENTS WITH TYPE 2
DIABETES MELLITUS**

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The purpose of the study : to assess the prevalence of diabetic foot syndrome (DFS) in patients with type 2 diabetes mellitus among the adult population in the Samarkand region for 2021.

Methods and material . The object of the study is the database of the RSNPMCESF of Samarkand . Data on the prevalence of DFS were analyzed, taking into account the age and gender of patients, depending on the type of DM, based on official statistical reporting forms No. 13 compiled according to the data of the regional register of diabetic foot syndrome for 6 months of 2021.

Results and discussion. The most common complications in diabetic patients are neuropathy, nephropathy, and retinopathy. This suggests that the nervous system and organs of vision are most sensitive to the negative effects of diabetes. According to the data obtained, in patients with type 2 diabetes, such a complication as diabetic polyneuropathy was only 31.3% of cases . The main symptoms of polyneuropathy were paresthesia and sensory disturbances, in some cases emotional lability was observed. For 6 months of 2021 , 2445 patients with type 2 diabetes were registered, 868 (35.5%) of which were women. Distal neuropathy in 819 people (33.5%), 336 (41.02%) of them women, neuroischemic form in 417 (17.05%), and 153 (36.69%) of them women.

Conclusions : Available significant gender differences in the prevalence of DFS in type 2 diabetes. DFS only in type 2 DFS occurred in men more than 1.8 times than in women. Maintaining optimal glucose levels can prevent microcirculatory complications. In addition, diabetic patients with SDS must always receive insulin therapy in adequate doses, which has a positive effect on diabetes compensation.

**MODERN STATE OF THE DEVELOPMENT OF MEDICAL
DIAGNOSIS BASED ON INFORMATION AND COMMUNICATION
TECHNOLOGIES**

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Abstract: In modern medicine, the transition to information technology (IT) provides a number of new opportunities and connection to the digital diagnostic system. This increases the quality of service, shortens examination time, increases the accuracy of diagnosis, creates opportunities for remote consultation, research, remote processing of primary data, and ensures long-term storage of patient information in digital form.

Keywords: quality of service, remote consultation, research.

In recent times , the creation of decision-making systems (DMS) has been developed, and information and computer technologies are widely used in this. There are different types of EQQQT, and they can be divided into the following types according to the field of use: a) in clinical practice, in this case they are called consultants, but they can be called more precisely assistants; b) in learning and improving skills (testing, debating, opposing); c) in scientific research (to solve the problem of situation analysis and assessment).

EQQQT should perform the following tasks in the medical field:

- in case of a large number of nosological forms, selection of differential diagnosis and treatment measures;
- choosing an effective solution regardless of the clinical appearance of the disease, taking into account that the initial symptoms of the disease influence the diagnosis;
- taking into account the patient's other medical background is important for the correct treatment;
- analysis of the prognosis of adverse events that may arise from the dynamics of the pathological process (adverse effects of ongoing therapy and medications);
- assessment of the patient's condition in real time can be achieved by activating logic computing systems based on information from the monitor-equipment complex.

Currently, many EDs are being created in the form of intellectual EDs, that is, they are created based on the knowledge of experts or information from the literature, as well as information obtained from the database of disease history. If the intellectual EQQQT is based on the knowledge of the majority of experts, it can be used in the virtual organization of the council of doctors.

The practical significance of EQQQT is its effectiveness in the following various limitations:

- lack of time to make a decision, which is very important in urgent and emergency situations;
- incompleteness of the clinical picture and medical anamnesis data, usually this situation is common in the work of an emergency medical doctor;
- inaccuracies in the data, which cannot be clarified by the doctor, but in these cases it may be necessary to use fuzzy logic methods;
- when additional tests are required on the criteria of diagnostic efficiency and the possibilities of its implementation (indicating the level of danger to the patient's life).

Despite the fact that individual parts of the above-mentioned directions have been reflected in one form or another in the EQQQT, they have not been reflected in the level of acceptance of generalized solutions in practice. Nevertheless, each of the actions in this direction is important for the development of all types of EQQQT.

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