POLIPLI RINOSINUSITDA EOZINOFIL YALLIG'LANISH VA 2-TIP IMMUN JAVOBNING KLINIK AHAMIYATI

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Annotatsiya. Polipli rinosinusit yuqori nafas yo'llarining surunkali, qaytalanuvchi va ko'p omilli yallig'lanish kasalligi bo'lib, uning patogenezida immunologik mexanizmlar muhim o'rin tutadi. Ayniqsa, eozinofillar, IL-4, IL-5, IL-13, IgE hamda ILC2 va Th2 hujayralari ishtirokidagi 2-tip yallig'lanish polip shakllanishining muhim mexanizmlaridan biri hisoblanadi. Ushbu tezisda polipli rinosinusitda eozinofil yallig'lanishning patogenetik va klinik ahamiyati tahlil qilindi.

Kalit so'zlar: polipli rinosinusit, burun poliplari, 2-tip yallig'lanish, eozinofillar, IL-4, IL-5, IL-13, IgE, ILC2, Th2.

Polipli rinosinusit (CRSwNP) burun va burun yon bo'shliqlarining uzoq davom etuvchi yallig'lanish kasalligi bo'lib, burun bitishi, burundan ajralma, yuz sohasidagi noqulaylik va hid bilishning pasayishi kabi simptomlar bilan namoyon bo'ladi. Kasallikning rivojlanishida epitelial barerning buzilishi va immun tizimining patologik faollashuvi muhim ahamiyatga ega. So'nggi yillarda CRSwNP patogenezida 2-tip immun yallig'lanish alohida e'tibor markaziga aylandi. Epitelial hujayralardan ajraladigan TSLP, IL-25 va IL-33 kabi alarminlar ILC2 va Th2 limfotsitlarini faollashtiradi. Natijada IL-4, IL-5 va IL-13 ishlab chiqarilishi ortadi. IL-5 eozinofillarning differensiallanishi, migratsiyasi va to'qimalarda uzoq vaqt saqlanishini ta'minlasa, IL-4 va IL-13 IgE sintezi, shilliq gipersekretsiyasi va to'qima remodellashtirilishida ishtirok etadi. Eozinofillarning burun polipi to'qimasida to'planishi yallig'lanish jarayonining davom etishiga xizmat qiladi. Faollashgan eozinofillardan eozinofil kationik oqsil (ECP), major basic protein (MBP) va boshqa mediatorlarning ajralishi epitelial shikastlanishni kuchaytirishi mumkin. Natijada shilliq qavat shishi, hujayraviy infiltratsiya va to'qima qayta qurilishi rivojlanib, poliplarning shakllanishi va kattalashishiga sharoit yaratiladi. Klinik jihatdan 2-tip yallig'lanishning yuqori faolligi eozinofiliya, hid bilishning yaqqol pasayishi, bronxial astmaning hamrohligi va kasallikning qaytalanuvchi kechishi bilan bog'liq bo'lishi mumkin. Shu sababli qon eozinofillari, umumiy IgE, zarur hollarda polip to'qimasidagi eozinofil infiltratsiya va boshqa 2-tip biomarkerlarni baholash kasallikning immunologik xususiyatlarini aniqlashda yordam beradi.

Xulosa. Polipli rinosinusitda eozinofil yallig'lanish va 2-tip immun javob kasallik patogenezining muhim komponentlaridan biridir. IL-4, IL-5 va IL-13 kabi sitokinlarning biologik ta'sirini tushunish CRSwNPning zamonaviy endotipik tasnifini takomillashtirish hamda og'ir va qaytalanuvchi holatlarda individual davolash yondashuvlarini tanlash uchun muhim ahamiyatga ega.

Adabiyotlar:

1. Bachert C., Han J.K., Desrosiers M. et al. Efficacy and safety of dupilumab in patients with severe chronic rhinosinusitis with nasal polyps. The Lancet. 2019;394:1638–1650.

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2. Fokkens W.J., Lund V.J., Hopkins C. et al. European Position Paper on Rhinosinusitis and Nasal Polyps 2020. Rhinology. 2020;58(Suppl S29):1–464.
3. Gevaert P., Calus L., Van Zele T. et al. Dupilumab reduces local type 2 pro-inflammatory biomarkers in chronic rhinosinusitis with nasal polyps. Journal of Allergy and Clinical Immunology. 2019.
4. Gevaert P., Omachi T.A., Corren J. et al. Efficacy and safety of omalizumab in nasal polyps. Journal of Allergy and Clinical Immunology. 2020;146(3):595–605.
5. Han J.K., Bachert C., Fokkens W. et al. Mepolizumab for chronic rhinosinusitis with nasal polyps. New England Journal of Medicine. 2021;384:597–609.
6. Kato A. Immunopathology of chronic rhinosinusitis. Allergology International. 2015;64(2):121–130.
7. Schleimer R.P. Immunopathogenesis of chronic rhinosinusitis and nasal polyposis. Annual Review of Pathology. 2017;12:331–357.
8. Stevens W.W., Schleimer R.P., Kern R.C. Chronic rhinosinusitis with nasal polyps. Journal of Allergy and Clinical Immunology: In Practice. 2016;4(4):565–572.

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