

**PERFORMANCE EVALUATION OF ADDITIONAL USE OF
PARENTERAL NUTRITION IN THE POSTOPERATIVE PERIOD FOR
ONCOLOGICAL PATIENTS**

**Akhmetov D.M.¹, Zhabbarova A.A.², Karibayev S.B.³, Baydaliev Ye.R.⁴,
Rakhimov K.I.⁵**

*¹Akhmetov Dosymzhan Mahmutuly - Surgeon, Resident anesthesiologist
resuscitator;*

*²Zhabbarova Asly Asafkyzy - Pediatrician, Resident anesthesiologist
resuscitator;*

*³Karibayev Sherkhan Bahytbekuly - general Doctor, Resident anesthesiologist
resuscitator;*

*⁴Baydaliev Yerzhan Rahimuly – Surgeon, Resident anesthesiologist
resuscitator;*

*⁵Rakhimov Kanat Isabekovich - Therapist, Resident anesthesiologist
resuscitator,*

*DEPARTMENT OF ANESTHESIOLOGY, INTENSIVE CARE,
KAZAKH NATIONAL MEDICAL UNIVERSITY NAMED AFTER S.D.
ASFENDIYAROV,
ALMATY, REPUBLIC OF KAZAKHSTAN*

Abstract: *every year oncological diseases gain epidemiological character. Also problems of treatment of the postoperative period of this category of patients grow. This research sets tasks of improvement and acceleration of the correction of metabolic frustration for the patients who have been made operation on malignant tumor of gastrointestinal.*

Keywords: *oncological diseases, parenteral, postoperative, nutrition, patient.*

Relevance. Any patient with a malignant formation of the gastrointestinal tract has disorders in nutrition and metabolic balance. Preparation of the intestine for surgery reduces the effectiveness of enteral nutrition. Along with the surgical treatment, anesthetic aid aggravate the malabsorption syndrome in this category of patients. Considering these factors, one of the crucial unresolved issues in cancer patients in the postoperative period is the problem of conducting and evaluating the effectiveness of nutritional support for these patients. Timely diagnosis of the assessment of metabolic disorders, the choice of their optimal correction, in patients being treated in the intensive care unit and intensive care unit, provides significant difficulties for resuscitators. **The purpose of the study:** to identify the nature of changes in protein metabolism during additional parenteral nutrition against the background of conventional nutrition. To evaluate the effectiveness of parenteral nutrition as a component of postoperative therapy in general. **Materials and methods:** In the period from 01.12.2020 to 01.12.2021, we examined 27 patients who received surgical treatment, standard gastrosplenectomy with lymphodissection of LD (5), resection of the transverse colon (5), resection of the distal small intestine (7), resection of the colon in various departments (10), for

malignant tumors. The examined patients were divided into two groups: 1st group (14) – patients who received standard enteral nutrition, 2nd group (14) – patients who received parenteral support with Oliklinomel and Nutricomp on the background of enteral nutrition. All patients had identical age, similar somatic status. The metabolism was assessed using indicators of total protein, transferrin, albumin, and urine nitrogen.

Results and discussions: The results of our research have demonstrated that the inclusion of parenteral nutrition in therapy provides the body with energy donors: carbohydrates, lipids and plastic material, supports the body's protein mass, restores existing losses, corrects hypermetabolic disorders of the early postoperative period. In patients of the second group, it was possible to adjust the studied materials faster by the tenth postoperative day. The indicators were as follows: total protein 68.8 ± 4.1 ; albumin 32.39 ± 3.07 ; transferrin 3.16 ± 0.15 ; urine nitrogen is 8 ± 26 . Correction of indicators in the first group lagged significantly: total protein 63.71 ± 2.47 ; total albumin 36.43 ± 2.24 ; transferrin 2.73 ± 0.14 ; urine nitrogen 11 ± 1 .

Conclusion: Enteral nutrition in the postoperative period does not allow adequate correction of the initial disorders of protein metabolism. The use of parenteral nutrition promotes earlier activation of anabolic processes and normalization of protein metabolism in this category of patients. Patients with neoplasms of the gastrointestinal tract due to the severity of the general condition, the influence of postoperative stress factors, anesthesia, are shown to carry out parenteral nutrition in the postoperative period. This makes it possible to optimize the rehabilitation process of patients undergoing surgery and reduces the stay of patients in the intensive care unit.

References

1. Anesthesiology and Resuscitation, edited by O.A. Dolina. 3rd edition, 2016. 576 p.
2. Basic nutritional support in an oncological clinic / edited by Corresponding member of the Russian Academy of Medical Sciences A.I. Saltanov, 2009. 239 p.
3. Anesthesiology: National Guidelines edited by A.A. Bunyatyan, 2013. 1104 p.