

**"DISTINCTIVE FEATURES OF HYPERCOAGULATION SYNDROME IN
PATIENTS WITH DYSCIRCULATORY ENCEPHALOPATHY (DE)
CONDUCTED COVID-19"**

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Objective of the Study:

To analyze the hypercoagulation syndrome in patients with COVID-19-induced disruption of cerebral blood circulation of I and II degrees.

Materials and Methods:

Biochemical blood analysis was conducted for n=42 patients (10 males, 32 females) with I and II degrees of COVID-19-induced disruption of cerebral blood circulation. The age range of the patients was 34-86 years with an average age of 60 ± 2 years. All patients underwent a thorough examination of complaints, medical and life history, somatic, and neurological status. Levels of D-dimer and ferritin were analyzed.

Research Results:

In 42 male patients, the average level of D-dimer in the blood (normal range - 0.00-0.55 mg FEU/ml) was 1.82 ± 1.01 mg FEU/ml, while ferritin (normal range for males: 22-346 ng/ml) had an average level of 382.6 ± 90.7 ng/ml. For 32 female patients, the average D-dimer level in the blood was 1.045 ± 0.62 mg FEU/ml (normal range - 0.00-0.55 mg FEU/ml), and the average ferritin level (normal range for non-pregnant females: 13-332 ng/ml) was 112.1 ± 70.7 ng/ml. The average level of C-reactive protein (normal range - 0-6 mg/l) was 19 mg/l for males and 18.9 ± 5.14 mg/l for



females. Both genders showed elevated average levels of C-reactive protein compared to the norm, and the average levels were significantly close. The average D-dimer level in males was found to be 3.3 times higher than the norm and 1.75 times higher in females. Ferritin levels in the blood were also found to be 3.4 times higher in male patients compared to females.

Conclusion:

In males who experienced a rapid disruption of blood circulation due to COVID-19, a more pronounced development of hypercoagulation syndrome compared to females was identified.

