

EVALUATING THE EFFECTIVENESS OF HEMORRHOIDECTOMY USING THE LONGO OPERATION AND THE LIGA SURE DEVICE

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Abstract. *Hemorrhoids is a common disease in the developed countries of the world. According to world statistics, this disease occurs in 126 out of 1000 people. This indicator is increasing more and more [1,2]. The disease occurs in 43.7% of the adult population and 40% among patients with rectal diseases. Among men and women, the disease occurs in almost the same proportion, on average at the age of 30-50. This disease reduces the quality of life and causes temporary incapacity for work [2]. Since 1997, Longo's operation has been used, in which, with the help of a circular stapler, the submucosa of the rectum is cut without removing the knots, and the mucous membranes of the rectum and anus are sutured over the rectal ring. At the same time, a mechanical suture is used between the mucous membrane of the anus canal and the mucous membrane of the rectum with a circular device at a distance of at least 2 cm from the toothed line. Thus, the fixation of the mucous membrane and the cessation of blood flow through the upper hemorrhoidal artery, as well as the prolapse of hemorrhoids and mucous membranes, are eliminated. As a result, the normal anatomical proportions of the structures are restored. [3].*

Key words: *Longo's operation, Liga Sure, hemarrhoidectami, bavosil.*

The purpose of the study: to evaluate the results of treatment in patients who underwent hemorrhoidectomy using the Longo operation and the Liga Sure device.

Materials and Methods: A retrospective study was conducted. Patients were divided into two groups. Group 1: those who underwent Longo's operation. Group 2 performed hemorrhoidectomy using the Liga Sure device. A total of 50 patients. Group 1 included 20 patients with stage III internal hemorrhoids. They were between 23 and 71 years old, 12 (60%) men and 8 (40%) women. The mean age was 47.8 ± 24.01 ($M \pm \sigma$). Group 2 included 30 patients with III-IV stages of mixed hemorrhoids. They were between 29 and 69 years old, 23 (76.7%) men and 7 (23.3%) women. Mean age was 47.0 ± 10.7 years ($M \pm \sigma$). The following parameters are analyzed: the time spent on the operation, the duration and intensity of the pain, the length of stay of the patients in the hospital.

Research results and their discussion: Longo's operation was used in group 1. Two hemorrhoidal nodes were removed from each patient. The average time spent on the operation was 15.1 ± 2.6 minutes ($M \pm \sigma$). The average duration of inpatient treatment of patients is 2 days. The pain syndrome in the patients was eliminated with narcotic

analgesics on the 1st day after surgery. Bleeding from the area of the operative wound was observed in 1 patient. Group 2 patients underwent hemorrhoidectomy using the Liga Sure device. The average duration of the operation is 16.7 ± 2.9 minutes ($M \pm \sigma$). The average duration of inpatient treatment of patients is 2 days. There was no need to use narcotic analgesics in the postoperative period. There were no postoperative complications.

Conclusion: using the Liga Sure device, it is possible to perform hemorrhoidectomy in patients with III-IV stages of mixed hemorrhoids, and using the Longo device, internal hemorrhoids are performed. If there is an external tumor, or if there is a purulent process in this area, then additional surgery is required. Postoperative complications are more common in Longo surgery. After the operations of both methods, the duration and intensity of the pain syndrome was significantly reduced, and the duration of inpatient and outpatient treatment was shorter.

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