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## Use of Mumiyo-Asil in the Therapy of Chronic Pulmonary Tuberculosis

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**Summary.** Treatment of tuberculosis, especially chronic forms, is one of the most urgent problems not only of tuberculosis, but also of general medicine. In addition to the main chemicals in the modern treatment plan, the widespread use of folk remedies is widely promoted. In a patient with chronic tuberculosis, various concomitant diseases do not allow official tuberculosis to completely pass the sex preparations.

Articles on the treatment of mummy tuberculosis in the official scientific literature over the past decade have not been identified. No articles were found on its use in chronic forms of pulmonary tuberculosis.

Mumiye has a strong antimicrobial effect, in addition, the drug accelerates the healing process, has a high antiinflammatory effect, has a positive effect on metabolism, contains herbs, vitamins, macro- and microelements, and has a positive effect on the body of a patient weakened by tuberculosis.

Keywords: herbs, vitamins, macro- and microelements, Fibrous-cavernous pulmonary tuberculosis, mumiyo-asil.

**Relevance:** One of the features of modern tuberculosis is the increase in the proportion of severe forms of lung damage with widespread necrotic changes, decay and formation of cavities [5]. Fibrous-cavernous pulmonary tuberculosis (FCTL) occupies a leading place in the structure of mortality from tuberculosis. Among the causes of death from FCTL, there is a trend towards an increase in the progression of the tuberculous process while maintaining its chronic nonspecific complications [8]. A characteristic of the course of tuberculosis is extensive processes, the presence of various concomitant diseases, poor tolerance of anti-tuberculosis drugs and the development of drug resistance. An analysis of domestic literature on the problem of treating mumiyo tuberculosis revealed that mumiyo was widely used in the complex treatment of bone articular tuberculosis in the late 60s to the mid-70s of the 20th century. In 1972, the dried mumiyo extract as part of a complex treatment was used among patients with bone tuberculosis to normalize the condition after the operation (Professor I. Suleimanov).

The study group of 57 people included patients with lesions of the hip joint (37 people), spine (12 people) and knee joint (8 people). Unlike medical drugs used to treat tuberculosis, mummy is the most effective today. It contains organic and mineral substances, it has antimicrobial, regenerative and anti-inflammatory effects, strengthens the general condition of the body.

It contains many important chemical elements, such as iron, calcium, magnesium, potassium, zinc, more than thirty micro and macro elements, metal oxides, amino acids and vitamins. Due to this, in the treatment of the disease, all body functions are restored. [1,2,3]. With the help of mumiyo, T-cell immunity is stimulated, and zinc has the ability to produce its own interferon, which is the main antiviral substance. Mumiyo is a natural complex of useful substances, contains more than 80 chemical elements and other components. The people call mumiyo a natural balm because of its rich composition of mountain healing herbs, including: juniper, dog rose, juniper, rhubarb, lichen, couch grass, mint, thyme, valerian, wormwood and others. After all, mummy is a storehouse of useful microelements and natural substances that are very necessary for the body of a sick person weakened by tuberculosis [2, 4,6,7, 9,].

Internet sites are filled with recipes for the use of mumiyo asil for pulmonary tuberculosis. So, according to a number of healers, even with the most severe symptoms of tuberculosis, mumiyo is able to help the progress of treatment. This natural complex of useful substances acts as a bactericidal, anti-inflammatory, antiviral and immunostimulating drug. Due to the presence of substances such as vitamins E, C, group B, copper, zinc, sulfur, calcium, phosphorus, flavonoids, carotenoids, succinic acid, etc., mumiyo stimulates the secretion of mucous membranes, eliminates swelling and restores the body's strength after illness. However, we have not found any official scientific articles on the treatment of pulmonary tuberculosis in mumiyo.

Materials and methods of research: the development included the case histories of 58 patients with chronically current fibrous-cavernous pulmonary tuberculosis who received treatment in the regional anti-tuberculosis

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dispensary. These patients were treated with anti-tuberculosis drugs according to an individual scheme. As usual, the regimen included drugs that the patient tolerates normally.

**The results of the study and their discussion:** the duration of observation in the hospital was 3.5 years. Age ranged from 23 to 54 years old, males under the age of 40 prevailed. The process in the lungs prevalence: in 20 patients it was limited to a fraction. Two lobes and foci of dropouts - in 13; bilateral processes y-25. Single caverns of medium size y-23; multiple large cavities - in 35. All patients had abundant bacterial excretion, with preserved sensitivity to anti-tuberculosis drugs. Concomitant diseases: gastritis - 16, gastric and duodenal ulcer - 10, chronic hepatitis, including drug-induced toxic hepatitis - 29; pulmonary heart failure - 27. Some patients had several concomitant diseases. Clinical symptoms in patients: all 58 patients had a prolonged cough, with purulent sputum difficult to separate; fatigue-35, shortness of breath-26, chest pain in 24 patients, fever over 37.5 0 C - 38 patients; hemoptysis - 16 patients, weight loss - 29.

Prolonged cough with a chronic course in these patients was associated both with the tuberculous process, and in 32 patients it was associated with smoking (the average smoking experience was 8 years, the intensity of smoking was an average of 15 cigarettes per day).

Auscultatory picture: in 47 patients, dry rales of various timbres were heard, in 34 patients wet (various rales, mostly inaudible); in 12 patients, amphoric breathing was heard (these are patients who had giant cavities in their lungs).

Hemogram indicators: anemia in the main moderate severity in 27, severe anemia in 15; leukocytes - 39 patients had leukocytosis of the order of 9-10x109; stab-nuclear shift to the left - at 31; ESR increased in 41 patients.

Individual anti-tuberculosis therapy includes drugs that patients, most often it was the scheme: isoniazid + pyrazinamide + ethambutol or isoniazid + ethambutol + streptomycin. A month or a month and a half after the start of treatment, patients were included in the treatment complex muniyo-asil (pharmacy 0.2-2 times a day for a month).

From the moment you started taking the mummy, a dynamic observation was carried out: clinical, laboratory, radiological.

Starting from the second week - 23 showed a decrease in the intensity of coughing and a decrease in the amount of sputum discharge. By the end of the mummy treatment in 40 patients, the sputum was already mucous in nature, it was separated easily. The state of health improved, appetite slightly improved in 38 patients, temperature normalization was achieved in 25 patients. Dynamics of auscultatory symptoms: decrease in the number of dry rales in 29; moist rales in 26 patients. Hemogram parameters after 1 month of treatment with mumiyo-asil - in 39 patients there was a slight increase in the number of erythrocytes, positive changes in the leukoformula and a decrease in ESR were in 38 patients. Positive changes in X-ray examination: some resorption of seeding foci was observed in 41 patients, resorption of infiltrative shadows in 19, a decrease in the size of the cavity in 15.

Despite the ongoing complex therapy, 4 patients died from the progression of pulmonary heart failure, due to the progression of the process.

**Conclusions:** in patients with chronic fibrous-cavernous tuberculosis with concomitant liver diseases, the use of mumiyo-asil in a complex treatment regimen gives positive clinical, laboratory and radiological dynamics. And this effective drug can be recommended for repeated use in outpatient treatment against the background of 3-4 anti-tuberculosis drugs.

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