POSSIBLE WAYS TO IMPROVE THE RESULTS OF COMPLEX TREATMENT OF PATIENTS WITH DISSEMINATED COLORECTAL CANCER (CRC) WITH METASTATIC LIVER DAMAGE.

Method: Two groups of patients became the object of the study: 70 patients with colorectal cancer with synchronous liver metastases and 23 patients with metachronous liver damage. Preoperative chemotherapy was prescribed and carried out by 17 patients with synchronous liver damage and 8 patients with metachronous lesion (25 patients in all, 26.9\% of the total number of patients). During the course of chemotherapy, its tolerability (side effects) was assessed. All patients underwent 3-12 cycles of preoperative chemotherapy FOLFOX / FOLFIRI on the basis of the Department of Oncology of the Tashkent Medical Academy.

Introduction: Isolated liver damage with disseminated CRC may be the only manifestation of the systemic course of the disease for a long time, which, with timely cytoreduction, makes it possible to achieve a significant increase in life expectancy, and in some cases - complete cure of such patients. However, the choice of specific methods of combined treatment and the sequence of their application is still a matter of debate among specialists.

Conclusion: The use of neoadjuvant chemotherapy in patients with CRC with synchronous liver damage allows the resection of R0 in 46.7\%; when the first stage of operative care is performed, complete cytoreduction is feasible only in a quarter of patients (24.5\%). The time of appearance and the number of metastases in the liver are independent prognostic factors.

Result: In patients with colon cancer, synchronous liver metastases were detected significantly more frequently than metachronous (82.0\% and 18.0\%, respectively), whereas in patients with rectal cancer the proportion was significantly lower (67.4\% and 32.6\%, respectively) (p = 0.056), indicating a later diagnosis of colon tumors. 1 foci in the liver was detected in 21.7\% of patients with metachronous metastases and in 15.7\% of the group with synchronous metastases, 2-3 foci in 52.2\% and 31.4\% respectively, 1\% and 52.9\% of patients, respectively.

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