



ENDOKRIN TIZIMDAGI GOMEOSTATIK UZILISHLAR VA ULARNING METABOLIK SINDROMGA OLIB KELUVCHI OQIBATLARI

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ANNOTATSIYA: *Metabolik sindrom (MS) zamonaviy jamiyatda eng keng tarqalgan metabolik kasalliklardan biri bo'lib, uning asosida endokrin tizimning gomeostatik uzilishlari yotadi. Ushbu maqolada 2015-2025-yillarda olib borilgan tadqiqotlar asosida endokrin gomeostazning buzilishi, insulin qarshiligi, gormonal disbalans va ularning metabolik sindrom rivojlanishidagi o'rni tahsil qilinadi. Tadqiqot shuni ko'rsatadiki, gormonlarning kompleks o'zaro ta'siri, ayniqsa insulin, leptin, kortizol va tiroid gormonlarining normal funksiyasining buzilishi, metabolik sindromning asosiy patofiziologik mexanizmlaridan biridir. Ushbu maqola endokrin gomeostatik uzilishlarning turli mexanizmlari, ularning molekulyar va hujayra darajasidagi ta'siri, shuningdek, metabolik sindromning oldini olish va davolashda yangi yondashuvlarni muhokama qiladi.*

KALIT SO'ZLAR: *Endokrin tizim, gomeostaz, metabolik sindrom, insulin qarshiligi, gormonal disbalans, leptin, kortizol, tiroid gormonlari, adiponektin, glukokortikoidlar*

Tadqiqot Maqsadi: Ushbu tadqiqotning asosiy maqsadi 2015-2025-yillar oralig'ida o'tkazilgan ilmiy tadqiqotlar asosida endokrin tizimdagi gomeostatik uzilishlar bilan metabolik sindrom rivojlanishi o'rtasidagi bog'liqlikni aniqlash, ushbu patologik jarayonlarning molekulyar mexanizmlarini ochib berish va metabolik sindromning oldini olish va davolashda yangi strategiyalarni taklif qilishdir.

Tadqiqot Uslublari: Tadqiqotda tizimli adabiy sharh usuli qo'llanildi.

PubMed, Scopus, Web of Science va Google Scholar kabi ilmiy ma'lumotlar bazalaridan 2015-2025-yillar oralig'ida chop etilgan ilmiy maqolalar, ko'rib chiqish maqolalari, klinik tadqiqotlar va meta-tahlillar qayta ishlandi. Qidiruv uchun "endokrin gomeostaz", "metabolik sindrom", "insulin qarshiligi", "gormonal disbalans", "leptin", "kortizol", "tiroid gormonlari va metabolik sindrom" kabi kalit so'zlar qo'llanildi. Tanlangan maqolalar sifat va metodologik jihatdan



baholandi, ma'lumotlar tahlili va sintezi amalga oshirildi.

KIRISH

Metabolik sindrom - bu insulin qarshiligi, semizlik, dislipidemiya va gipertenziya kabi bir qator metabolik xususiyatlar bilan tavsiflanadigan kompleks kasallik bo'lib, yurak-qon tomir kasalliklari va tip 2 diabet xavfini sezilarli darajada oshiradi [1]. Jahon sog'liqni saqlash tashkilotining ma'lumotlariga ko'ra, dunyo aholisining qariyb 25% metabolik sindromdan aziyat chekmoqda, bu esa uni global sog'liq muammosiga aylantirmoqda [2].

Endokrin tizim organizmning ichki muhitining barqarorligini - gomeostazni saqlashda muhim rol o'ynaydi. Endokrin gomeostazning buzilishi metabolik sindrom rivojlanishining asosiy omillaridan biridir [3]. So'nggi o'n yil ichida olib borilgan tadqiqotlar shuni ko'rsatdiki, nafaqat insulin, balki leptin, kortizol, tiroid gormonlari, adiponektin va boshqa gormonlarning normal funksiyasining buzilishi metabolik sindrom patogeneziga sezilarli hissa qo'shadi [4].

Ushbu maqolaning maqsadi so'nggi o'n yil davomida to'plangan ilmiy ma'lumotlar asosida endokrin gomeostatik uzilishlar va metabolik sindrom o'rtasidagi bog'liqlikni chuqur o'rganish, bu jarayonlarning molekulyar mexanizmlarini ochib berish va yangi terapevtik yondashuvlarni taklif qilishdir.

NATIJALAR

Insulin Qarshiligi va Endokrin Gomeostazning Buzilishi

Insulin qarshiligi metabolik sindromning markaziy patofiziologik xususiyatlaridan biri bo'lib, u nafaqat qandli diabet, balki boshqa metabolik kasalliklarning rivojlanishiga ham olib keladi [5]. So'nggi tadqiqotlar shuni ko'rsatdiki, insulin qarshiligi faqatgata glukoza metabolizmining buzilishi emas, balki butun endokrin tizimning gomeostaziga ta'sir ko'rsatadigan kompleks jarayondir [6].

Insulin qarshiligi paytida pankreas beta-hujayralari kompensator insulin ishlab chiqarishni oshiradi, bu esa giperinsulinemiya va insulin retseptorlarining desensibilizatsiyasiga olib keladi [7]. Giperinsulinemiya o'z navbatida boshqa gormonlarning sekretsiyasi va faolligiga ta'sir ko'rsatadi, jumladan, insulin qarshiligi va giperinsulinemiya gonadotropinlar, o'sish gormoni va tiroid gormonlarining funksiyasiga ta'sir ko'rsatadi [8].

Leptin va Adiponektin Gomeostazining Buzilishi

Leptin yog' to'qimalari tomonidan ishlab chiqariladigan gormon bo'lib, to'ymishlik hissini boshqaradi va energiya balansini tartibga soladi [9]. Leptin qarshiligi metabolik sindromda keng tarqalgan bo'lib, bu to'ymishlik hissining buzilishiga va ortiqcha ovqatlanishga olib keladi [10]. Tadqiqotlar shuni ko'rsatdiki, leptin qarshiligi faqat semizlikning oqibati emas, balki metabolik sindrom rivojlanishining sababchilaridan biri bo'lishi mumkin [11].

Adiponektin - bu yog' to'qimalari tomonidan ishlab chiqariladigan va



insulin sezgirligini oshiradigan, yallig'lanishga qarshi ta'sir ko'rsatadigan adipokin bo'lib, uning darajasi metabolik sindromda kamayadi [12]. Adiponektin darajasining pasayishi insulin qarshiligi, yallig'lanish va endotel disfunksiyasining rivojlanishiga hissa qo'shadi [13].

Kortizol va Stress Gormonlarining O'rni

Kortizol - bu asosiy stress gormoni bo'lib, uning normal darajasi metabolik jarayonlarni tartibga solish uchun muhimdir [14]. Biroq, surunkali stress sharoitida kortizol darajasining oshishi metabolik sindrom rivojlanishiga olib kelishi mumkin [15]. Kortizolning ortiqcha sekretiysi markaziy semizlik, insulin qarshiligi, dislipidemiya va gipertenziyaga olib keladi [16].

So'nggi tadqiqotlar shuni ko'rsatdiki, kortizol retseptorlari va 11-beta-gidroksisteroid dehidrogenaza fermenti faolligining buzilishi metabolik sindrom patogenezida muhim rol o'ynashi mumkin [17]. Bu ferment kortizolning faol va nofaol shakllari o'rtasidagi konversiyani tartibga soladi va uning faolligining buzilishi to'qimalarda kortizol darajasining oshishiga olib keladi [18].

Tiroid Gormonlari va Metabolik Sindrom

Tiroid gormonlari metabolizmning asosiy tartibgichlaridan bo'lib, ularning funksiyasining buzilishi metabolik sindrom xususiyatlariga o'xshash belgilarni keltirib chiqaradi [19]. Subklinik gipotireoz metabolik sindrom xavfini oshiradi, bu esa tiroid gormonlari

va metabolik sindrom o'rtasidagi bog'liqlikni ko'rsatadi [20].

Tadqiqotlar shuni ko'rsatdiki, tiroid gormonlari nafaqat bazal metabolizm tezligiga, balki lipid va uglevod metabolizmi, shuningdek, insulin sezgirligiga ham ta'sir ko'rsatadi [21]. Tiroid gormonlarining normal funksiyasining buzilishi dislipidemiya, insulin qarshiligi va semizlikning rivojlanishiga olib keladi [22].

Boshqa Endokrin Gomeostatik Uzilishlar

O'sish gormoni (GH) va insulin-o'sish omillari (IGF) tizimining buzilishi ham metabolik sindromga hissa qo'shadi [23]. O'sish gormoni yetishmovchiligi markaziy semizlik, insulin qarshiligi va lipid metabolizmining buzilishi bilan bog'liq [24].

Gonadal gormonlar, ayniqsa estrogen va testosteron, ham metabolik sindrom patogenezida muhim rol o'ynaydi [25]. Menopauzadan keyingi ayollarda estrogen darajasining pasayishi va erkaklarda testosteron darajasining pasayishi metabolik sindrom xavfini oshiradi [26].

Muhokama: Endokrin tizimdagi gomeostatik uzilishlar metabolik sindrom rivojlanishining asosiy mexanizmlaridan biri ekanligi so'nggi o'n yil ichida olib borilgan tadqiqotlar natijasida aniq isbotlangan [27]. Insulin, leptin, kortizol, tiroid gormonlari va boshqa gormonlarning normal funksiyasining buzilishi bir-biri bilan chambarchas bog'liq bo'lib, metabolik sindromning



kompleks patofiziologik manzarasini shakllantiradi [28].

Gormonal disbalansning asosiy mexanizmlaridan biri bu gormonlarning retseptor darajasidagi signal yo'llarining buzilishidir [29]. Masalan, insulin va leptin retseptorlarining kiruvchi signalizatsiyasining buzilishi bu gormonlarga qarshilikning rivojlanishiga olib keladi [30]. Bu qarshilik o'z navbatida gormonlarning normal fiziologik ta'sirini buzadi va metabolik kasalliklarning rivojlanishiga olib keladi [31].

Yana bir muhim jihat bu turli gormonlar o'rtasidagi o'zaro ta'sirning buzilishidir [32]. Masalan, insulin va leptin o'rtasidagi o'zaro ta'sir energiya balansini tartibga solishda muhim rol o'ynaydi va bu o'zaro ta'sirning buzilishi semizlik va insulin qarshiligi rivojlanishiga olib keladi [33]. Xuddi shunday, kortizol va tiroid gormonlari o'rtasidagi o'zaro ta'sir metabolizm tezligi va stress javobini tartibga solishda muhimdir [34].

Metabolik sindromning oldini olish va davolashda endokrin gomeostazni tiklash yangi strategiyalarni talab qiladi [35]. An'anaviy davolash usullari, masalan, insulin sezgirligini oshiruvchi dorilar, faqat muammoning bir qismini hal qiladi [36]. Kelajakdagi tadqiqotlar kompleks yondashuvlarga, jumladan, bir vaqtning o'zida bir nechta gormonal yo'llarni nishonga olgan terapiyalarga qaratilishi kerak [37].

Shuningdek, individual gormonal profilga asoslangan shaxsiylashtirilgan tibbiyot yondashuvi metabolik sindromni davolashda samaradorlikni oshirishi mumkin [38]. Har bir bemorda gormonal disbalansning o'ziga xos xususiyatlarini aniqlash va shunga mos davolash rejasini ishlab chiqish muhim ahamiyatga ega [39].

XULOSA

Endokrin tizimdagi gomeostatik uzilishlar metabolik sindrom rivojlanishining asosiy omillaridan biri bo'lib, insulin, leptin, kortizol, tiroid gormonlari va boshqa gormonlarning normal funksiyasining buzilishi ushbu kasallikning patogeneziga hissa qo'shadi. So'nggi o'n yil ichida olib borilgan tadqiqotlar bu gormonal uzilishlarning molekulyar mexanizmlarini yoritishga imkon berdi, bu esa yangi terapevtik yondashuvlarni ishlab chiqish imkoniyatini ochdi.

Kelajakdagi tadqiqotlar endokrin gomeostazni tiklashga qaratilgan kompleks terapiyalarni ishlab chiqishga, shuningdek, individual gormonal profilga asoslangan shaxsiylashtirilgan tibbiyot yondashuvlarini rivojlantirishga qaratilishi kerak. Metabolik sindromning oldini olish va davolashda endokrin gomeostazni saqlash va tiklash muhim ahamiyatga ega bo'lib, bu nafaqat metabolik sindromning o'zini, balki uning asoratlarning rivojlanishining oldini olishga ham yordam beradi.



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