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**CLINICAL AND NEUROPHYSIOLOGICAL CHARACTERISTICS OF PATIENTS WITH  
GUILLAIN BARRE****Kudratov Firuz Olimovich**  
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Guillain–Barre syndrome is a rare pathological condition in which the body's immune system attacks its own peripheral nerves. It can develop at any age, but most often it occurs in adult men. Even after the most severe forms of Guillain–Barre syndrome, complete recovery is achieved in most patients. Severe forms of Guillain–Barre syndrome rarely develop, but can lead to almost complete paralysis and respiratory disorders.

Guillain–Barre syndrome is a potentially life-threatening condition. This is a pathological condition in which the immune system attacks certain areas of the peripheral nervous system. In this case, the nerves that control muscle contractions or transmit pain, temperature and tactile sensations are affected. This can lead to a decrease in muscle tone, loss of sensitivity in the legs and/or arms, difficulty swallowing or breathing.

As a result of the research, new information was obtained about the pathogenesis of Guillain-Barre syndrome, which included the identification of pathogenetically significant factors with the potential ability to influence the development of the disease. Among these factors are the antiganglioside profile, components of the complement system, the number and functional state of CD56+ blood lymphocytes, catalytic antibodies, and the serum proteome.

The identification of individual proteins included in the proteomic characteristic of GBS made it possible to decipher many previously unknown features of the pathogenesis of this disease.

Based on the creation of schemes for the pathogenesis of Guillain-Barre syndrome, a hypothesis is proposed about the interaction of these pathogenetically significant factors in the development of disorders of peripheral nerve fibers.

As a result of detailed characterization of immune processes in patients with Guillain-Barre syndrome, it was possible to establish several types of development of autoimmune reactions with the participation of these factors that influenced the severity of the course of the disease and, presumably, the speed of their relief.

Thanks to the use of proteomic technologies, a method for the differential diagnosis of Guillain-Barre syndrome and chronic inflammatory demyelinating polyneuropathy (including acute onset) was developed.

As a result of biochemical studies of lipid profiles in Guillain-Barre syndrome, taking into account the hypothesis of the effect of the serum proteome on the pathogenesis of the disease, criteria have been obtained that can be proposed as prognostically significant for the development of this complication of infectious processes.

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