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OSTEOARTHRITIS DISEASE AND ITS REHABILITATION

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Brief explanation: To prevent and detect osteoarthritis of the knee joint among the population of Uzbekistan, different degrees of osteoarthritis were determined in 120 patients during 2022-2023. The patients were aged between 28 and 75, most of them were women (on average 80%) and we studied the origin of the disease - age, sex, hereditary diseases, concomitant diseases, lifestyle, weight, and harmful habits and analyzed based on several principles. and evaluated. We put the obtained data in tables and diagrams for easy analysis. From the obtained data, it became clear that the number of patients suffering from osteoarthritis is much higher than that of men, and the reason for this is that our women do little or no physical education, which leads to an increase in overweight people. Failure to treat osteoarthritis in time has been found to have a high rate of early disability.

Keywords. Women, nutrition, physical activity, bad habits, sports, excess weight, congenital and acquired diseases of bones and joints.

Complications: Osteoarthritis is the most common disease of the joints, and patients suffer from difficulties in supporting movement during this disease. Late diagnosis of osteoarthritis patients results in early loss of function. Early detection of the disease makes it easier to treat and lowers the cost. The prevalence of women with osteoarthritis has a significant impact on society.

Osteoarthritis is not life-threatening, but it is the second most common cause of premature disability in men in many countries, second only to IBS. The mortality rate after joint replacement surgery is on average 1%.(1)

Osteoarthritis is one of the major factors affecting longevity among people because early disability is high in patients with osteoarthritis. Osteoarthritis is most common in older people (on average 70% are over 55).

With the increase in life expectancy among people, the number of joint diseases will also increase. The onset of the disease is between the ages of 40 and 50. Osteoarthritis usually occurs in adults, but this disease can also be observed among young people, and the reason for this can be injuries received in the joints and bones. On average, 60% of patients with osteoarthritis in America and Europe are women. (2)

Today, the state of bones and tissues and the post-injury situation occupies a great social place in society. Because of this, the treatment and rehabilitation of osteoarthritis is expensive, it causes a long-term (temporary) loss of work ability and a very high rate of work loss. 55% of patients presenting with orthopedic diseases have osteoarthritis. and one-third of them falls on the knee joint, which means 33%. According to the authors' data, it was found that 48% of the patients who referred to the orthopedist were previously treated by other specialists, and the

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pain from ostearthritis lasted for an average of 47.3 + 8.4 months. the period of time until referral is 16.5+- 3.4 months, which means 1.5 years. Conservative and temporary treatment of the disease is observed in stages I-II. The results of the anamnesis show that patients with osteoarthritis of the knee joint have insufficient and incomplete treatment until they refer to an orthopedist it will be known that it is hot. At this point, it should be said that the method of treatment of complex, including NPVP, chondroprotectors, vitamin therapy and vascular drugs Only 7.8% of stage I patients, 14.4% of stage II patients, and 40.7% of stage III patients receive it, which is insufficient in terms of quantity and quality of conservative treatment.

Timely and effective treatment of osteoarthritis is of great social and economic importance. Unfortunately, due to the lack of specialists in polyclinics, outpatient care is not provided to patients in a timely manner. In addition to traumatologists-orthopedics in outpatient diagnosis of osteoarthritis: surgeons (23-41.4%), neurologists (21, 4-41%), therapists (14.6-36%).

31.5% of patients with osteoarthritis are treated by surgeons, 34.9% by physiotherapists, 18.4% by neurologists, and 12.3% by therapists. According to the literature, 34.5% of patients with large joint disease do not receive orthopedic consultation.

One of the most important factors in the treatment of osteoarthritis is early diagnosis. Clinical and radiological features are the basis for diagnosis. Unfortunately, these qualities are detected in the last stages of the disease.

Nowadays, the X-ray method plays a key role in the diagnosis of osteoarthritis of the knee joint. Some experts say that from stage I of osteoarthritis, the distance between the joints is reduced and uneven. In the II stage, joint space reduction is noticeable, which is the basis for making a diagnosis, and in III stage, the joint space is very strongly reduced and bone osteophytes are visible.

Today, the development of modern technical possibilities and new methods in early detection of gonarthrosis helps.

The arthroscopic diagnostic method is the most informative, the accuracy in diagnosing osteoarthritis of the knee joint reaches 90-100%.

The disadvantage of this method is the invasiveness of the method and the high cost of the equipment.

As an etiopathogenetic factor in the development of osteoarthritis, human hypodynamism can be caused by a lack of microelements in the diet.

Properly organized work is a part of a healthy lifestyle. It has been proven that the systematic and regular organization of physical and mental work has a positive effect on the nervous, cardiovascular, muscular, bone, and nervous systems.

Another key component of a healthy lifestyle is proper nutrition. It is advisable to ensure that the energy expended with food is always in balance and that the amount of protein, carbohydrates, and fat in the daily food is sufficient.

In Uzbekistan, several decrees and decisions aimed at leading a healthy lifestyle have been developed and implemented. Including; Work being carried out based on the decree of the President of the Republic of Uzbekistan Shavkat Miromonovich Mirziyoyev dated October 30, 2020 No. 6110 "On the wide promotion of a healthy lifestyle and development of mass sports".

Research methods and materials: development of methods for the prevention of osteoarthritis among the population of Uzbekistan, proper treatment of those suffering from this disease, early diagnosis, promotion of a healthy lifestyle among people, explaining to patients with osteoarthritis the importance of treating this disease in the initial period, which

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method of treatment is successful to find out the factors affecting the spread of the disease and to inform the population, to explain that people's regular sports activities not only prevent osteoarthritis, but also to other diseases, and to study the benefits of complex methods in the treatment of osteoarthritis.

Research methods and materials: We took 120 patients with osteoarthritis from the Surkhandarya region. X-ray, blood analysis, external appearance of joints, body weight, bone length, changes in joint size, EKG, and biochemical analysis methods were used in the diagnosis.

Results: 120 patients aged between 25 and 75 were taken from the Surkhandarya region. They were separated by age and gender. According to WHO age distribution, 22 young people aged 25-44 years, 45-60 years old, 28 middle-aged people, 61-75 years old, 67 elderly people, 76-90 years old, and 3 old people. Women and men are 25 to 95. We put these indicators in a diagram. (1-2 pictures)

In the first picture, we can see that we have an average of 9% more women with osteoarthritis than other countries, and this is due to poor lifestyle, lack of physical education and poor diet.

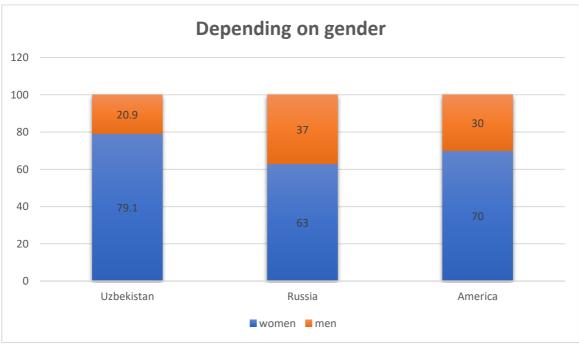


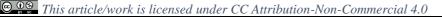
Figure 1

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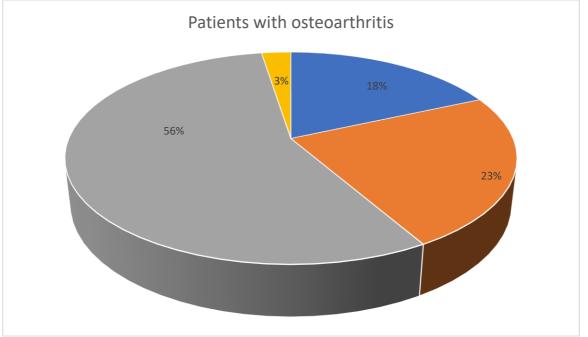


Figure 2

In Figure 2 of the table, 56% of the cases of osteoarthritis are old people. This indicator is considered the norm compared to the world because the incidence of osteoarthritis increases after the age of 40-45.

Patients were divided into three groups.

It aims to:

1. To demonstrate the high efficiency of the complex treatment method

2. To study the recurrence of the disease in the period after these treatments

3. To prove the low cost of LFK and physiotherapy methods

4. It is to show that the right lifestyle of the patients prevents the development of the disease.

I In the third group, 40 patients were treated only with medicinal methods

40 patients in the II group were treated with medication and physiotherapy methods

40 patients in the III group were treated with medication, physiotherapy, and LFK methods.

Group I patients were treated with medication and a separate drug was used for each patient. If the patient has weak, occasional, cold symptoms, weak analgesic (paracetamol) is used, if the pain is strong, constant, and cold symptoms, NPVS drug is used. In patients with rapidly growing pain and progression of osteoarthritis in stages II-III, chondroitin sulfate or glucosamine was used. Patients in this group did not have a recurrence of pain and movement difficulties for several months after the course of treatment.

II - patients in the group were treated with medication and physiotherapy methods. In addition to the drugs used in the group, tissue massage, laser therapy, joint magnetotherapy, mud treatment, electrophoresis drugs, and paraffin-ozokerytotherapy were used.

Patients in this group had no recurrence of pain and movement difficulties for 4-6 months after the course of treatment.

Group III was treated with medication, physiotherapy, and LFK methods. Medication and physiotherapy methods were the same as in other groups, and in addition, the LFK method was used.

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This includes special exercises in the sitting and lying position, using a crutch in the knee joint on the opposite side of the osteoarthritis, regular light sports, diet, and orthopedic shoes. Patients in this group had no recurrence of pain and movement difficulties for 11-13 months after the course of treatment.

If the degree of joint damage is very high, the joint endoprosthesis can be used, but this is very expensive and if the patients do not take care of body weight, lifestyle, and LFK, the disease will recur.

In conclusion, we can see the differences in 3 pictures.

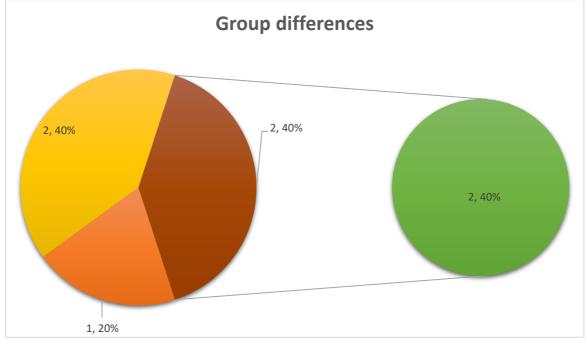


Figure 3

The initial cost of a single knee replacement starts at \$6,500, and if we consider LFK, medication, and physical therapy, the average cost will not exceed \$400-600. The difference between the two is 10 times.

Discussion. When studying foreign data, the incidence of disease among women was up to 70%. The activity of rehabilitation centers in European countries and America shows very high efficiency in the treatment of basic movement disorders. In Uzbekistan, based on the obtained data and the diagram, we can say that this indicator is at a high level of 79%, and the reason for this is wrong lifestyle and lack of physical training.

II - III stage of osteoarthritis is found in large numbers in us, the reasons for this are:

1. Lack of specialists in early diagnosis

2. Indifference to people's health.

3. Low socio-economic lifestyle.

4. Lack of sufficient substances in food or indifference to nutrition.

5. In the treatment of patients, the treatment of symptoms, not the disease, is carried out.

Of course, in recent years, several works have been carried out to make people pay attention to their lifestyle and health.

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Summary:

1. An unhealthy lifestyle and irrational diet are some of the reasons for high indicators.

2. Low level of medical culture and indifference to one's health among women is also the reason.

3. We, the medical staff, should form a medical culture among people, and spread the word that health is a priceless wealth given to man.

4. Lack of physical activity (lack of physical activity) causes weight gain, an increase in blood cholesterol levels, and, as a result, the development of non-infectious diseases.

5. We need to explain to our people that early detection and treatment of the disease takes less time and costs.

6. Absence of rehabilitation in the treatment of basic movement organs.

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