



**МИНИСТЕРСТВО ЗДРАВООХРАНЕНИЯ РЕСПУБЛИКИ
УЗБЕКИСТАН**
**ТАШКЕНТСКИЙ ГОСУДАРСТВЕННЫЙ
СТОМАТОЛОГИЧЕСКИЙ ИНСТИТУТ**
**САМАРКАНДСКИЙ ГОСУДАРСТВЕННЫЙ МЕДИЦИНСКИЙ
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РАЗВИТИЯ ОХРАНЫ ЗДОРОВЬЯ НАСЕЛЕНИЯ»**

ПОСВЯЩЕННАЯ
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Данный сборник состоит из материалов республиканской научно-практической конференции с международным участием «Современные достижения и перспективы развития охраны здоровья населения» состоявшейся 9 апреля 2024 года в г.Ташкенте. Представленные в сборнике работы содержат материалы по актуальным вопросам здравоохранения, охраны здоровья населения. Представляет интерес для научных сотрудников и практических врачей всех областей, а также студентов бакалавриата и магистратуры высших медицинских учебных заведений. В сборнике представлены информации о состоянии здоровья разных стран, таких как Российская Федерация, Республика Беларусь, Казахстан и другие.

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4. Распространенность факторов риска неинфекционных заболеваний в российской популяции в 2012-2013гг. Результаты исследования ЭССЕ-РФ. Кардиоваскулярная терапия и профилактика 2014; 13(6):4-11.

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EFFECTIVE CONTROL AND DISPENSERIZATION OF ARTERIAL HYPERTENSION BY GROUP TRAINING OF PATIENTS IN POLYCLINICAL CONDITIONS

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Scientific research in recent years aimed at studying the factors of increasing the adherence of patients to the fulfillment of medical prescriptions has shown that one of the main methods that increase the completeness and accuracy of the fulfillment of medical prescriptions is patient education. It allows you to expand the sphere of influence of the doctor from the treatment of the disease to prevention and effective follow-up.

Purpose of the study. Increasing the effectiveness of prevention and clinical examination of arterial hypertension through group training of patients in a family polyclinic (FP) and a rural medical center (RMC).

Materials and methods. A retrospective analysis of outpatient cards was carried out and doctors of the FP of the city of Tashkent and RMC of the regions of the Republic, who had undergone 10-month retraining courses for a general practitioner, were interviewed. Before training, 156 doctors were questioned, after training 119, as well as 236 patients who were on dispensary observation with hypertension (HD) in the FP/RMC were questioned and examined. Subsequently, some of them (n=122, the main group) completed the course at the school for hypertensive patients, and some (n=114, the comparison group) did not participate in the educational program. All patients were under our supervision for 2 years.

Results and discussion. In most outpatient cards of FP/RMC, recommendations for non-drug treatment are given in an incomplete volume. The results are as follows -

restriction of sodium chloride is recommended by 35 (64.8%) SP doctors and 53 (31.5%) SVP doctors; auto-training 24 (44.4%) and 64 (38.0%); restriction of fat consumption 31 (57.4%) and 71 (42.2%); fluid restriction to 1-1.5 l / day 25 (46.2%) and 54 (32.1%); weight loss in obesity 37 (68.5%) and 71 (42.2%); smoking cessation 11 (20.3%) and 72 (42.8%); regular physical education is recommended by 37 (68.5%) and 67 (39.8%), respectively. A comparative analysis of retrospective indicators of outpatient cards with data from an oral survey of doctors and examination of the same patients revealed a significant discrepancy ($p < 0.001$) of the above risk factors. These data allow us to conclude that most of the patients did not undergo effective dispensary observation, timely identification and correction of risk factors for hypertension.

Research findings:

1. At the level of primary care in patients with hypertension, risk factors are not fully identified; some of them are not corrected for the identified modifiable risk factors; the overwhelming majority of patients use antihypertensive drugs in short courses (FP-35.1%; RMC-82%), not observing the regularity and duration (FP-64.8%; RMC-17.8%) of admission.

2. Patients with hypertension are not sufficiently aware of the risk factors (33.9%) that affect the course and prognosis of the disease; do not have the skills of self-control (63.3%) and self-help (75%) with an acute increase in blood pressure (BP); there is a low adherence (24%) of patients to the implementation of medical recommendations.

3. Group training of patients significantly contributes to the prevention of complications of hypertension, adequate control of blood pressure (96.7%); in our study, this training made it possible to achieve the target level of blood pressure in 82.7%.

**EFFECTIVE CONTROL AND DISPENSARY SUPERVISION OF
HYPERTONIC DISEASE IN THE CONDITIONS OF A FAMILY
POLYCLINIC AND A RURAL MEDICAL FACILITY**

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The majority of hypertensive patients (HD) are persons with an early stage of the disease, who account for more than half of all complications of cardiovascular diseases - cerebral stroke, myocardial infarction, fatal heart rhythm disturbances, the formation of heart failure and chronic renal failure. Only 37.1% of men and 58.9% of women are informed that they have a disease, only 21.6 and 46.7% are treated, including 5.7 and 17.5% effectively, respectively. Risk factors for diseases of the heart and blood vessels, being potentially dangerous for health - bad habits, food addiction, behavior and social lifestyle of a person, increase the likelihood of developing diseases, their progression and unfavorable outcomes. Therefore, long-term population programs to combat HD are becoming very relevant. Effective control and dispensary observation of patients with hypertension presupposes not only the correctness of medical prescriptions, but also the correction of the main risk factors closely related to the lifestyle.