

**DISEASES OF THE DIGESTIVE SYSTEM AS A MEDICAL AND SOCIAL PROBLEM***Bukhara State Medical Institute***Tursunova Matlyuba Akhrorovna**

**Summary:** *Diseases of the digestive organs (DOD) remain a pressing problem in clinical medicine and attract the attention of both practicing doctors and health care managers. All over the world, the number of people suffering from diseases of the gastrointestinal tract and hepatobiliary system increases every year.*

**Key words:** *incidence, prevalence, diseases of the digestive system. Diseases of the digestive organs (DOD) remain a pressing problem in clinical medicine and attract the attention of both practicing doctors and health care managers. All over the world, the number of people suffering from diseases of the gastrointestinal tract and hepatobiliary system increases every year.*

The purpose of the study was to study trends in the incidence of diseases of the digestive system at the present stage and assess the medical and social significance of this pathology in the health of the population of the Republic of Uzbekistan.

The general morbidity rate of the population of the Republic of Uzbekistan in the class "Diseases of the digestive organs" increased from 99.4 per 1000 population in 1996 to 112.4 in 2010. At the same time, the annual average was 1.14 per 1000 people per year. Over the past 15 years, the levels of primary incidence of BOP have remained stable: in 1995, 36.3 patients were diagnosed per 1000 population with a diagnosis established for the first time in their lives; in 2010, 33.4 (per 1000 population) patients were diagnosed for the first time.

In recent years, not only has the prevalence of diseases of the digestive system increased, but there has also been a change in the structure and pathomorphosis of this pathology: pathology of the upper gastrointestinal tract has become prevalent, and there has been a leveling of sex differences in the incidence of cholelithiasis, gastric and duodenal ulcers; there is an expansion of the age limits for the formation of pathology of the digestive organs. In particular, against the background of a decrease in the incidence of gastric and duodenal ulcers from 14.7 per 1000 adult population of the Republic of Uzbekistan in 2005 to 13.5 in 2008 and 11.3 in 2010, there is a clear upward trend

incidence of pathology of the upper gastrointestinal tract, namely gastroesophageal reflux disease, gastritis and duodenitis: from 22.4 per 1000 adults in 2005 to 24.2 in 2008.

A significant argument that determines the medical and social significance of diseases of the digestive system is that this pathology affects all age groups of the population - people of working age, the elderly and the elderly, children and adolescents. Serious concerns are caused by unfavorable trends in the health of young people, especially

students of higher educational institutions and students of secondary specialized educational institutions, as the most vulnerable and unprotected groups of the population. The specific living conditions of students and students (nervous and mental overload, irregular and unbalanced nutrition, financial problems, bad habits, stress during sessions, etc.) cause a high level of pathology of the gastrointestinal tract and hepatobiliary system, while the incidence is increasing from course to course. Children, adolescents, and young people are increasingly becoming patients of gastroenterologists and therapists.

The combination of lesions, the recurrent nature of the course of the disease, the formation of psychosomatic disorders associated with diseases of the digestive system, the iatrogenic factor ( polypharmacy in the treatment of patients, the widespread use of non-steroidal anti-inflammatory drugs, corticosteroids and other drugs that contribute to damage to the digestive organs) negatively affect the quality of life of patients, increasing number of patients with chronic forms of BOP. The share of patients with diseases of the digestive system in the general practitioner's dispensary group accounts for almost 32%. Diseases of the digestive organs often lead to long-term incapacity and disability, entail large direct and indirect costs associated with under-produced products, the need for expensive treatment and rehabilitation of patients, and cause enormous economic damage, therefore, prevention and anti-relapse treatment of this pathology is not only medical, but and a social problem. For example, in the USA alone, more than 10 billion dollars are spent annually on direct costs associated with the treatment of patients with gastroesophageal reflux disease (GERD) and gastritis, while the indirect costs associated with decreased productivity of GERD patients amount to \$75 billion per year.

Symptoms of GERD, primarily heartburn, upon careful questioning are detected in almost 50% of the adult population of developed countries, and changes in the mucous membrane of the esophagus are diagnosed in more than 10% of people who have undergone endoscopic examination. It has been shown that the most common complications of GERD are erosive esophagitis (proven in 45% of cases) and Barrett's esophagus (in 10.6% of cases). The prevalence of heartburn and erosive esophagitis is highest in the United States and Western Europe (about 20% of the population) and lowest in China (2.5%). Uzbekistan occupies an intermediate position in the frequency of occurrence of these symptoms (10 and 7.5%, respectively). According to the results of a multicenter study "Epidemiology of gastroesophageal reflux disease in Russia" (MEGRE), it is noted that heartburn occurs in 46–60% of Uzbek citizens, this differs slightly from the data obtained in European countries and the USA. One population-based study conducted in Argentina revealed the presence of gastroesophageal reflux in 1000 subjects using a special questionnaire ( Gastroesophageal Reflux Questionnaire - GERQ ). 61.2% of respondents reported heartburn no more than once a year; the presence of this symptom no more than once a month was noted by 20.5% of respondents; once a month – 16.8%; once a week – 10.3%; several times a week – 9.6%; daily 3.1%.

Based on population-based studies conducted in North America, Europe and Australia, the overall population prevalence of dyspepsia symptoms ranges from 7 to 41%, with an average of about 25%. These figures refer to so-called “unscreened dyspepsia,” which includes both organic and functional dyspepsia. According to various researchers, only every second to fourth patient with dyspepsia syndrome consults doctors. These patients make up about 2-5% of patients visiting general practitioners. About a third of patients with dyspepsia syndrome consult a gastroenterologist, a minority of patients consult doctors of other specialties (therapists, otolaryngologists, nutritionists, homeopaths, acupuncturists, psychiatrists). In Uzbekistan and Kazakhstan, among all gastroenterological complaints with which patients turn to medical specialists, dyspepsia symptoms account for up to 20-40%.

The range of diseases of the digestive system is wide and very diverse; Digestive diseases are multifactorial diseases. It is customary to identify a number of factors predisposing to the development of BOP: stress, work associated with an inclined position of the body, obesity, smoking, hiatal hernia, certain medications (calcium antagonists, anticholinergic drugs, beta-blockers, etc.), nutritional factors (fat, chocolate, coffee, fruit juices, alcohol, spicy foods, etc.), pregnancy. Risk groups for the development of pathological gastroesophageal reflux are persons with a family history of diseases of the gastrointestinal tract, predominantly males, with organic pathology of the gastroduodenal zone, autonomic dysfunction, foci of chronic infection, incl. helminthic - parasitic infestation, obesity, mesenchymal failure and others. The problem of the connection between the pathology of the upper gastrointestinal tract and obesity deserves separate study. Research is currently being conducted showing that in patients with chest pain, overweight and obesity may be a risk factor for decreased lower esophageal sphincter tone. The high prevalence of dyspepsia syndrome among the population also determines the high costs incurred by healthcare for the examination and treatment of such patients. Almost 25% of patients with functional dyspepsia consult a doctor more than 4 times a year.

Patients with diseases of the digestive system are 2.6 times more likely to take sick leave compared to other patients and stay on sick leave for 3-4 weeks more during the year compared to the average calculated for the entire population.

Due to a significant reduction in the working-age population due to various socio-economic reasons, including due to disqualification for health reasons, at the present stage the problem of protecting the health of the organized (working) population is of fundamental importance. Protecting the health of working people should become a strategic goal of the country's socio-economic development, with a key role given to the widespread implementation of programs for the primary prevention of non-communicable diseases, including diseases of the digestive system. The disease-centric model of medical care is being replaced by a health-centric paradigm with an emphasis on preserving and

strengthening the health of a healthy person rather than a sick person. Therefore, it is necessary to develop and implement automated screening diagnostic systems in the activities of health centers and prevention departments of polyclinics to optimize the early detection of diseases of the digestive system and assess the risk of their occurrence in people of different age categories, primarily among young people and the working population.

Thus, the problem of diseases of the digestive system has a pronounced medical and social orientation, and therefore should be solved comprehensively at both the state and regional levels.

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