



# The Assumption of Dynamic Control of Psychosomatic Disorders in Children in the Treatment of Bronchial Asthma

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ABSTRACT

In the formation of respiratory diseases with a psychosomatic component, as a stage in the development of the disease (for example, bronchial asthma (BA)), it is very important to clearly represent the contribution to the realization of the disease of the autonomic nervous system and the psychological characteristics of the child. Knowledge of the characteristics of child psychology is extremely important in understanding the formation of the somatic and mental health of a child-adolescent-adult.

**Keywords:**

adolescence, psychosomatic conditions, bronchial asthma.

**Relevance.** Despite the successes achieved in the drug therapy of patients with AD, the level of control of the course of the disease cannot be considered satisfactory [6], it remains quite low. It is necessary to identify the causes and factors of a low level of AD control.

To date, prognostic factors affecting the dynamics of the level of disease control have not been determined. Previously, numerous factors were studied (demographic and social, clinical features of the disease and treatment, behavioral characteristics of AD patients), but they were evaluated in terms of their influence on the course of AD. In addition, a number of studies have studied the influence of mental disorders (anxiety, depression) on the course of AD, but rather contradictory data have been obtained. Some researchers consider depression as the cause of the severe course of the disease and a high mortality rate, while others believe that the severity of anxiety,

depression does not affect the course of the disease [2,7].

It has been demonstrated that alexithymia (poorer imagination, inability to distinguish emotional problems from experienced physical disorders) independently as a personal characteristic of patients with AD, and in combination with anxiety-depressive traits, has an adverse effect on the course of AD [1,4]. However, mental disorders, as well as individual personal characteristics (alexithymia) were considered only from the point of view of their impact on the dynamics of the BA course.

To date, the prognostic effect of pathoharacterological and psychopathological disorders of patients on the dynamics of AD control has not been determined. One of the components of the effectiveness of disease control is the adherence of patients to the treatment.

The works of foreign researchers devoted to the study of the patient's adherence to prescribed therapy, as a rule, are based on the assessment of compliance, which determines the patient's compliance with certain doctor's recommendations [3,5].

Until now, the relationship between CP and the level of control over the symptoms of the disease has not been considered. It follows from the above that understanding the factors influencing the control of the symptoms of the disease, including the personality characteristics of patients, as well as such mental disorders of patients with asthma as anxiety and depression, is relevant, because it can help in identifying ways of beneficial effects on the course of the disease, improving the prognosis and optimizing approaches to therapy of these patients. Special attention needs to be paid to the study of the ratio of patients' CP and the dynamics of the level of BA control [2,6]

**The purpose of the study.** To study the influence of psychopathological and pathoharacterological personality disorders and patients' adherence to anti-asthmatic therapy on the level of AD control and its dynamics.

**Materials and methods of research.** To assess the influence of psychopathological conditions and pathologic characteristics of patients, their adherence to treatment on the dynamics of the level of AD control, 106 patients were included in the study (83 women and 23 men aged 17 to 74 years; average age –  $48.9 \pm 13.0$  years; duration of the disease – from 1 month to 42 years, average duration –  $10.8 \pm 9.7$  years).

**The results of the study.** The results of the study. In children with AD, the structure of emotional and personal characteristics is represented by a stable internal conflict, due to the accentuation of opposite personality traits in the same child. For a teenager, the personality structure consists in the accentuation of hysteroid and (or) epileptoid traits, in the manifestation of autodestructive

tendencies, confirmed by a tendency to alcoholism.

A common feature for sick children and adolescents in the structure of the emotional and personal background is the dominance of indicators on the scales: aggressiveness and anxiety.

In adolescents suffering from B A, the dominant mechanisms of psychological defense are: denial of unacceptable events or their own qualities, as well as hypercompensation of their shortcomings in the field of low self-esteem.

In children with AD, significant deviations in the mnesic sphere are detected in the form of a decrease in the volume of short-term figurative (35%) and verbal memory (62%) compared with healthy children.

The majority of patients (75%) are characterized by complete left-hemisphere dominance, which indicates the ineffectiveness of their psychophysiological adaptation in stressful situations.

The analysis of emotional and personal characteristics of children with bronchial asthma will allow a more complete study of the components of the pathological psychosomatic system, which makes it possible to optimize measures for the prevention and timely correction of factors that aggravate the course of this disease.

Forecasting the types of emotional and personal response, knowledge of the mechanisms of psychological protection of a child with bronchial asthma, makes possible an individual approach to therapy and triggers adaptive mechanisms for the development of a full-fledged personality, preventing possible deviations in a critical period of life.

The presented results of the assessment of functional asymmetry indicate the need to create a system of education, upbringing, working conditions and everyday life, taking into account the peculiarities of the mental organization of children and adolescents suffering from bronchial asthma.

**Conclusion.** Thus, during the study of patients with AD, a high frequency of pathoharacterological RLS, such as paranoid, schizoid, schizotypal, anxious and hysterical,

was revealed. In addition, the deterioration of the level of disease control contributes to the high frequency and severity of anxiety and depression.

To improve the dynamics of the level of AD control, it is necessary to take into account psychopathological and pathoharacterological personality disorders, patients' adherence to treatment and to study factors contributing to an increase in their KP.

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