



THE ROLE OF THE FAMILY PHYSICIAN IN REVEALING THE RISK FACTORS OF
THE PRE-STROKE CONDITION

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In order to improve the mechanisms for improving the health of the population, the Republic adopted the Concept for the Prevention of Non-communicable Diseases, Support for a Healthy Lifestyle and Increasing the Level of Physical Activity of the Population for 2019-2022, taking into account the recommendations of the World Health Organization. The main goal of this Concept is to create conditions in the country for involving various segments of the population in physical culture and sports activities, familiarization with a healthy lifestyle, and health promotion.

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. There are the following gradations of health - physical, psychological, social, spiritual, individual, public, etc. Everyone knows that the state of health of the population is the main criterion for the well-being of a particular society. In all countries of the world, the health of the nation is recognized as the most important social value that assesses the level of development of the state.

The health of the population is affected by various health-saving and destructive factors, and their approximate ratio is determined by WHO experts: conditions and lifestyle (50-55%), genetic (15-20%), environmental conditions (20-25%), level of medical care. assistance (10-15%).

When assessing the health of the population of a country, the main criteria are considered to be medical and demographic indicators, such as fertility, mortality, natural population growth, infant mortality, the frequency of premature births, and life expectancy. Also, health is assessed by the level of morbidity - general, infectious, with temporary disability, according to medical examinations, major non-communicable diseases, hospitalized types of morbidity.

Morbidity rates state not only the fact of the presence of diseases, but also the effectiveness of medical support and preventive measures aimed at protecting health. The factor of medical provision of human health contributes to its strengthening in the case of constant medical screening, a high level of preventive measures, timely and comprehensive medical care. The lack of constant medical control, the low level of primary prevention, and poor-quality medical care lead to a deterioration in human health.

The genetic factor that negatively affects health is determined by the presence of hereditary diseases and disorders, as well as hereditary predisposition to diseases.



Strengthening health is genetically determined by healthy heredity, the absence of morphological and functional prerequisites for the onset of the disease.

The Decree of the President of the Republic of Uzbekistan No. PP-3925 of August 30, 2018 “On measures to improve neurological care for the population” notes that despite the fact that comprehensive work is being carried out to increase the availability and efficiency of neurological care provided to the population, the introduction of modern methods of diagnosis and treatment, increase the level of quality of medical services provided, there are still some problems and shortcomings in the field of diagnosis, prevention and treatment of these diseases [2].

In recent years, there has been an increase in the incidence of stroke, the death rate from which by 2030 worldwide may increase to 7.8 million people per year, while in about 1/3 of patients it is not possible to establish the cause of stroke and the leading risk factors [1,3,5]. In Uzbekistan, the number of patients with stroke also tends to increase - about 40-45 thousand are registered annually

The purpose of the study: based on the analysis of literary sources, to determine the most significant risk factors that contribute to the development of stroke.

Results of the study: Numerous studies conducted over the past decades have made it possible to identify and substantiate the role of various risk factors in the development of cerebrovascular and cardiovascular pathology. Today, the significance of such basic factors as arterial hypertension, atherosclerosis of pre- and intracerebral vessels, dyslipidemia, and diabetes mellitus is beyond doubt [3,4,5].

To date, a number of programs and protocols have been developed for the correction of underlying risk factors, including recommendations for lifestyle modification and the use of drugs. All this made it possible to achieve a certain reduction in the incidence of cerebrovascular pathology. However, up to 25% of stroke cases are associated with exposure to new risk factors, especially in young adults.

To date, more than 50 new potential risk factors for stroke have been identified. At the same time, the factors with the greatest potential and evidence base include genetic predisposition, i.e. the presence of family cases of acute disorders of cerebral circulation (ACV).

Numerous clinical studies have shown that taking oral contraceptives, especially in combination with smoking, is a significant risk factor for stroke in young women; in a certain category of women, pregnancy may also be a risk factor for stroke. It has been proven that during pregnancy, the load on the right side of the heart increases, and the risk of thrombosis of the veins of the lower extremities and pelvis also increases. Preeclampsia and gestational hyperglycemia are independent risk factors for stroke.

Studies of the incidence of comorbidities in patients who have had a stroke have shown that arterial hypertension, coronary pathology, obesity, diabetes mellitus, arthritis, left ventricular hypertrophy and heart failure are significantly more common in stroke patients.

Thus, the analysis of literature sources led to the conclusion that the awareness of family doctors about the risk factors for stroke will make it possible to carry out personalized prevention of these diseases with a special emphasis on the formation of a



healthy lifestyle. Identification of risk factors for stroke in the early stages of its development will enable the family doctor, together with a neurologist and other specialists, to develop a program for both primary and secondary prevention of cerebrovascular disease and prevent deaths.

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