



**New Day in Medicine**  
**Новый День в Медицине**

**NDM**



# TIBBIYOTDA YANGI KUN

Ilmiy referativ, marifiy-ma'naviy jurnal



**AVICENNA-MED.UZ**



ISSN 2181-712X.  
EiSSN 2181-2187

**4 (54) 2023**

**Сопредседатели редакционной коллегии:**

**Ш. Ж. ТЕШАЕВ,  
А. Ш. РЕВИШВИЛИ**

**Ред. коллегия:**

М.И. АБДУЛЛАЕВ  
А.А. АБДУМАЖИДОВ  
А.Ш. АБДУМАЖИДОВ  
Р.Б. АБДУЛЛАЕВ  
М.М. АКБАРОВ  
Х.А. АКИЛОВ  
М.М. АЛИЕВ  
С.Ж. АМИНОВ  
Ш.Э. АМОНОВ  
Ш.М. АХМЕДОВ  
Ю.М. АХМЕДОВ  
Т.А. АСКАРОВ  
Ж.Б. БЕКНАЗАРОВ (главный редактор)  
Е.А. БЕРДИЕВ  
Б.Т. БУЗРУКОВ  
Р.К. ДАДАБАЕВА  
М.Н. ДАМИНОВА  
К.А. ДЕХКОНОВ  
Э.С. ДЖУМАБАЕВ  
А.Ш. ИНОЯТОВ  
С. ИНДАМИНОВ  
А.И. ИСКАНДАРОВ  
С.И. ИСМОИЛОВ  
Э.Э. КОБИЛОВ  
Д.М. МУСАЕВА  
Т.С. МУСАЕВ  
Ф.Г. НАЗИРОВ  
Н.А. НУРАЛИЕВА  
Б.Т. РАХИМОВ  
Ш.И. РУЗИЕВ  
С.А. РУЗИБОЕВ  
С.А.ГАФФОРОВ  
С.Т. ШАТМАНОВ (Кыргызстан)  
Ж.Б. САТТАРОВ  
Б.Б. САФОЕВ (отв. редактор)  
И.А. САТИВАЛДИЕВА  
Д.И. ТУКСАНОВА  
М.М. ТАДЖИЕВ  
А.Ж. ХАМРАЕВ  
А.М. ШАМСИЕВ  
А.К. ШАДМАНОВ  
Н.Ж. ЭРМАТОВ  
Б.Б. ЕРГАШЕВ  
Н.Ш. ЕРГАШЕВ  
И.Р. ЮЛДАШЕВ  
Д.Х.ЮЛДАШЕВА  
А.С. ЮСУПОВ  
М.Ш. ХАКИМОВ  
К.А. ЕГЕЗАРЯН (Россия)  
DONG JINCHENG (Китай)  
КУЗАКОВ В.Е. (Россия)  
Я. МЕЙЕРНИК (Словакия)  
В.А. МИТИШ (Россия)  
В.И. ПРИМАКОВ (Беларусь)  
О.В. ПЕШИКОВ (Россия)  
А.А. ПОТАПОВ (Россия)  
А.А. ТЕПЛОВ (Россия)  
Т.Ш. ШАРМАНОВ (Казахстан)  
А.А. ЩЕГОЛОВ (Россия)  
Prof. Dr. KURBANHAN MUSLUMOV (Azerbaijan)  
Prof. Dr. DENIZ UYAK (Germany)

[www.bsmi.uz](http://www.bsmi.uz)

<https://newdaymedicine.com>

E: [ndmuz@mail.ru](mailto:ndmuz@mail.ru)

Тел: +99890 8061882

**ТИББИЁТДА ЯНГИ КУН  
НОВЫЙ ДЕНЬ В МЕДИЦИНЕ  
NEW DAY IN MEDICINE**

*Илмий-рефератив, маънавий-маърифий журнал*

*Научно-реферативный,*

*духовно-просветительский журнал*

**УЧРЕДИТЕЛИ:**

**БУХАРСКИЙ ГОСУДАРСТВЕННЫЙ  
МЕДИЦИНСКИЙ ИНСТИТУТ  
ООО «ТИББИЁТДА ЯНГИ КУН»**

Национальный медицинский  
исследовательский центр хирургии имени  
А.В. Вишневского является генеральным  
научно-практическим  
консультантом редакции

Журнал был включен в список журнальных  
изданий, рецензируемых Высшей  
Аттестационной Комиссией  
Республики Узбекистан  
(Протокол № 201/03 от 30.12.2013 г.)

**РЕДАКЦИОННЫЙ СОВЕТ:**

М.М. АБДУРАХМАНОВ (Бухара)  
Г.Ж. ЖАРЫЛКАСЫНОВА (Бухара)  
А.Ш. ИНОЯТОВ (Ташкент)  
Г.А. ИХТИЁРОВА (Бухара)  
Ш.И. КАРИМОВ (Ташкент)  
У.К. КАЮМОВ (Тошкент)  
Ш.И. НАВРУЗОВА (Бухара)  
А.А. НОСИРОВ (Ташкент)  
А.Р. ОБЛОКУЛОВ (Бухара)  
Б.Т. ОДИЛОВА (Ташкент)  
Ш.Т. УРАКОВ (Бухара)

**4 (54)**

**2023**

*апрель*

Received: 20.04.2023, Accepted: 25.04.2023, Published: 29.04.2023.

UDC 618.179+618.3-06

## WOMEN'S HEALTH - NATION'S HEALTH

Zakirova Nodira Islamovna, <https://orcid.org/0000-0002-2663-0110>

Abdullaeva Nigora Erkinovna <https://orcid.org/0009-0002-6236-0696>

Samarkand State Medical University Uzbekistan, Samarkand, st. Amir Temur, Tel: +99818 66 2330841 E-mail: [sammi@sammi.uz](mailto:sammi@sammi.uz)

### ✓ Resume

*The article presents data on the reproductive health of girls, girls, women of the Samarkand Branch of the Republican Center for Reproductive Health of the Population for 2018-2020, and ways to improve it are given. The analysis of the reproductive health of women in the Samarkand region indicates a low health index for this contingent (37.3% of pregnant women and 19.4% of adolescent girls are sick), they do not adequately treat their health, have an insufficient socio-economic standard of living. In order to improve reproductive health indicators at all stages of its formation, it is necessary to improve and optimize the provision of obstetric and gynecological care, to strengthen work on improving the health of women of childbearing age, and to improve services for mothers and children.*

*Key words: Reproductive health, women's health, girls' health, extragenital diseases, pregnancy complications, childbirth complications, pregnancy pathology, congenital malformations of the fetus.*

## ЗДОРОВЬЕ ЖЕНЩИНЫ - ЗДОРОВЬЕ НАЦИИ

Закирова Н.И., Абдуллаева Н.Э.

Самаркандский государственный медицинский университет Узбекистан, г.Самарканд, ул. Амира Темура, Тел: +99818 66 2330841 E-mail: [sammi@sammi.uz](mailto:sammi@sammi.uz)

### ✓ Резюме

*В статье приведены данные репродуктивного здоровья девочек, девушек, женщин Самаркандского Филиала Республиканского Центра репродуктивного здоровья населения за 2018-2020 г.г., даны пути его улучшения. Проведенный анализ репродуктивного здоровья женщин Самаркандской области свидетельствует о невысоком индексе здоровья этого контингента (37,3% беременных и 19,4% девушек-подростков больны), они неадекватно относятся к своему здоровью, имеют недостаточный социально-экономический уровень жизни. Для улучшения показателей репродуктивного здоровья на всех этапах его формирования необходимы усовершенствование и оптимизация предоставления акушерской и гинекологической помощи, усилить работу по оздоровлению женщин фертильного возраста, по улучшению обслуживания матерей и детей.*

*Ключевые слова: Репродуктивное здоровье, здоровье женщины, здоровье девочек, экстрагенитальные заболевания, осложнения беременности, осложнения родов, патология беременности, врожденные пороки развития плода.*

## AYOLLAR SALOMATLIGI - XALQ SALOMATLIGI

Zakirova N.I., Abdullaeva N.E.

Samarqand davlat tibbiyot universiteti O'zbekiston, Samarqand, st. Amir Temur, Tel: +99818 66 2330841 E-mail: [sammi@sammi.uz](mailto:sammi@sammi.uz)

## ✓ Rezyume

*Maqolada Respublika aholi reproduktiv salomatligi markazi Samarqand filialining 2018-2020 yillarga mo'ljallangan qizlar, qizlar, ayollarning reproduktiv salomatligiga oid ma'lumotlar keltirilgan va uni yaxshilash yo'llari keltirilgan. Samarqand viloyatida ayollarning reproduktiv salomatligi tahlili ushbu kontingent uchun salomatlik indeksining pastligini (homilador ayollarning 37,3% va o'smir qizlarning 19,4: kasal), ular o'z sog'lig'iga yetarlicha munosabatda emasligini, ijtimoiy-iqtisodiy ahvoli yetarli emasligini ko'rsatadi. turmush darajasi. Reproductiv salomatlik ko'rsatkichlarini uning shakllanishining barcha bosqichlarida yaxshilash maqsadida akusherlik va ginekologik yordam ko'rsatishni takomillashtirish va optimallashtirish, tug'ish yoshidagi ayollar salomatligini mustahkamlash, onalar va bolalarga xizmat ko'rsatishni yaxshilash bo'yicha ishlarni kuchaytirish zarur.*

*Kalit so'zlar: Reproductiv salomatlik, ayollar salomatligi, qizlar salomatligi, ekstragenital kasalliklar, homiladorlikning asoratlari, tug'ruqning asoratlari, homiladorlik patologiyasi, homilaning tug'ma nuqsonlari.*

## Relevance

A woman is a mother, the successor of the human race. The fate of the country largely depends on her health, on the health of children. It is no coincidence that we pay so much attention to protecting the health of motherhood and childhood. And today, one of the priority tasks of the state is to ensure the implementation of the reproductive function of women.

The Government of Uzbekistan, which has embarked on the implementation of the Sustainable Development Goals, on February 15, 2019 adopted the Law of the Republic of Uzbekistan "On the Protection of the Reproductive Health of Citizens", and recently developed the National Strategic Plan for 2017-2021, which emphasizes health care reform as a state priority and provides for the improvement of women's , maternal and child health by expanding access to quality health care.

The concept of human reproductive health can be perceived in different ways. The correct definition of the term is given by WHO (World Health Organization), according to which, reproductive health is a state of complete physical, mental and social well-being, and not just the absence of diseases or ailments in all areas, incl. concerning the reproductive system, its functions and processes. Accordingly, not only the development of informative methods for assessing the state of the reproductive system, but also the problem of restoring reproductive health are becoming increasingly relevant.

**Purpose of the study.** Assess the reproductive health indicators of women in the Samarkand region and identify ways to improve.

## Materials and methods

To assess the reproductive health of women, we used the data of the Samarkand branch of the Republican Center for Reproductive Health of the Population for 2018-2020.

## Result and discussion

The maternal mortality rate in Samarkand region decreased from 26 per 100,000 live births in 2018 to 14.7 in 2020. Perinatal mortality decreased from 7.3%o in 2018 to 5.2%o in 2020.

A woman's health and its integral component - reproductive health - are largely determined by the conditions of her development in the womb, during the neonatal period, childhood and adolescence. Low level of somatic and reproductive health before pregnancy cause a high incidence of complicated births, which leads to a deterioration in the development of subsequent generations.

In 2018-2020 in the Samarkand region, 2,990,922 women of childbearing age underwent a medical examination, of which 1,957,513 (64.2%) underwent a full clinical examination. It is known that the reproductive system of a woman is the most dynamic biological object, which is extremely sensitive to adverse external and internal factors by the emergence of new adaptive reactions, which, under certain conditions, acquire the properties of a pathological process.

The state of reproductive health is also greatly influenced by the somatic and mental health of the population. It is important to note that every third 213869 (37.3%) woman in our country suffers from one or another extragenital disease. So, in recent years, the proportion of pathologies with a chronic relapsing course has increased; the number of people with diseases of the genitourinary system, blood circulation, nervous system, infectious diseases, tuberculosis has increased. So, at the end of 2019, the

following diseases were noted among pregnant women: anemia - 50.5%; diseases of the genitourinary system - 10.8%; diseases of the circulatory organs - 4.5%, which indicates unfavorable trends in the formation of the level of their reproductive health, because these diseases pose a threat not only to disruption of the formation of the reproductive system, but also to the possibility of adequate implementation of the reproductive function in the future (3). Diseases accompanied by the formation of foci of latent infection in the body have a particularly adverse effect on the reproductive health of women. Meanwhile, a significant increase in the incidence of sexually transmitted infections was noted - 3.2%. The number of people infected with HIV decreased from 479 in 2018 to 407 in 2020. It should be noted that the number of patients with chronic inflammatory diseases has also increased, among which cervical erosion, menstrual irregularities in both adolescents and adult women are leading (by 3.7 and 2.3 times, respectively), infertility, and tumors of the genital organs. (uterine fibroids, cervical cyst) and others. The incidence of infertility increased from 5.3% in 2018 to 8.4% in 2020. It is not only a medical but also a social problem.

It is known that exposure to adverse factors during pregnancy causes a response in both the pregnant woman and the fetus, and these stimuli have a lasting effect throughout his subsequent life [1]. According to long-term observation, more than 5.5% of children with fetal malformations are born in the world [2].

Analysis of the frequency of fetal malformations revealed 255 children with congenital malformations over the past 2 years, among them facial defects prevailed - cleft palate - 51 (20%), congenital malformations of the cardiovascular system amounted to 33 (12.9%), congenital malformations of the extremities - in 32 (12.5 %), malformations of the central nervous system, spina bifida - 12 (4.7%), anomalies of the gastrointestinal tract -9 (3.5%), Down's syndrome -10 (3.9%), in the rest 108 (42, 3%) of newborns were found other, rare defects, which indicates the effect of various adverse factors on the fetus. The main causes of congenital malformations were: aggravated obstetric history and heredity, past viral and bacterial infections, late prenatal diagnosis, adverse environmental factors, etc.).

It should be noted that contraindications for pregnancy in 2020 had 156034 women, including 7279 (4.7%) women had absolute contraindications, the rest - relative - 148755 (95.3%).

Contraception, being a method of family planning, is also considered a way to prevent abortion and its complications. In order to preserve and strengthen the reproductive health of women, individuality and careful selection of a contraceptive method, as well as informing women about contraceptive methods, is necessary. It should be emphasized that 124,919 (80.05%) women were covered by contraception, and in our region, intrauterine contraception is ahead of all other methods of contraception in frequency [4].

A significant number of works have been devoted to the study of the characteristics of the course of pregnancy and childbirth in patients at a young age. According to the literature [2,3], adolescents are much more likely to experience pregnancy complications such as preeclampsia, anemia, miscarriage, gestational pyelonephritis, and in childbirth - premature rupture of amniotic fluid, anomaly of labor forces and intrauterine fetal hypoxia. Our studies have shown that in 2019-2020, out of 375,210 adolescent girls, 237,549 (63.3%) underwent medical examination, while EGD was found in 46,099 (19.4%). Thus, it was found that in the Samarkand region every fifth girl has deviations in reproductive health. A small number of girls enter into sexual activity before adulthood, childbirth in minors over the past 3 years has occurred in 33 (0.008%) cases.

Thus, it is important to realize that pregnancy and childbirth is a unique time for the primary prevention of child health problems. Knowledge of this should become the property of the population and professionals. Professional training for professionals who come into contact with pregnant women should include information on the achievements of recent decades in the field of studying the life of the child before birth and the impact of adverse effects during pregnancy and childbirth.

### Conclusions

1. The analysis of the reproductive health of women in the Samarkand region indicates a low health index for this contingent (37.3% of pregnant women and 19.4% of adolescent girls are sick), they do not adequately treat their health, have an insufficient socio-economic standard of living. Every second pregnant woman suffers from anemia (50.5%) and every tenth (10.8%) suffers from a disease of the

genitourinary system. The number of patients with chronic inflammatory diseases of the genital organs and infertility also increased (8.4%).

2. Children with malformations are born from sick mothers, among them newborns with a cleft of the soft and hard palate, congenital malformations of the cardiovascular system and congenital malformations of the limbs predominate.

3. In order to improve reproductive health indicators at all stages of its formation, it is necessary to improve and optimize the provision of obstetric and gynecological care, to strengthen work on improving the health of women of childbearing age, and to improve services for mothers and children.

4. Family physicians should provide counseling, information and access to safe and effective methods of contraception, achieve full contraceptive coverage for women with contraindications to pregnancy.

5. To prevent congenital anomalies in the development of newborns, continue prenatal activities aimed at improving women's health (formation of a healthy lifestyle, attitude to motherhood, folate prevention, etc.), stage-by-stage examination (ultrasound screening, genetic examination, etc.).

#### **Recommended:**

- personalized control over each woman, high-quality medical examination, monitoring of pregnant women, involving paramedical workers in the dispensary observation and listening to district obstetrician-gynecologists, therapists who do not follow the procedures for dispensary observation at conference calls

- ensuring that all women, including adolescent girls, are covered by preventive medical examinations at least once a year

- ensuring optimal accessibility for the population of medical organizations providing primary health care,

-optimization of the work of medical organizations providing primary health care

- remote and face-to-face consultative and diagnostic assistance to district hospitals and polyclinics;

-introduction of new technologies in inter-district centers and on-the-job training;

-routing of patients with severe chronic diseases to specialized hospitals.

#### LIST OF REFERENCES:

1. Джалилова Г.А. Оценка показателей репродуктивного здоровья женщин в Узбекистане / Г.А. Джалилова, И.С. Исаев, М.И. Икрамова, Н.А. Раджабова. / Текст: непосредственный // Молодой ученый. 2014;3(62):176-178.
2. Нацун Л.Н. Здоровье женщин репродуктивного возраста // Социальные, культурные исследования и безопасность, 2020;3:168-179.
3. Черненко Ю.В., Нечаев В.Н., Каткова Е.В. Врожденные пороки развития плода и новорожденного по данным перинатального центра Саратовской области // Саратовский научно-медицинский журнал 2016;12(3):393-398.
4. Zakirova N.I., Zakirova F.I., Abdullaeva N.E. Women's health and modern contraceptive technology after childbirth // Вестник фундаментальной и клинической медицины 2022;3(3):82-83.

**Entered 20.04.2023**