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The importance of anxiety-depressive disorders in the development of comorbid conditions

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There are some opinions about the correlation of anxiety-depressive disorders (ADD) with comorbid pathologies such as cardiovascular (CVD), metabolic and oncological diseases. Over the past period, a large amount of data has been collected that allows us to consider TDBs, especially depression, as an independent formative risk factor, but the mechanism of this connection has not yet been fully explored.

Early screening for the presence of depression in patients with comorbid conditions helps to improve the quality of life of patients by preventing the exacerbation of the main disease and providing timely competent care.

The purpose of the work: to study the interrelationship of combined cardiovascular and metabolic diseases in the comorbid condition against the background of anxiety-depressive disorders.

Material and methods: 127 male patients were included in the study. The study was conducted in special contingent patients aged 36 to 67 years (average 52.3 \pm 10.32 years). General clinical examinations for all patients: coagulogram taking into account prothrombin time (PTV), thrombin time (TV), fibrinogen, activated partial thromboplastin time (FQTV); blood sugar and uric acid (UC) levels were determined.

Among the studied patients, 79 (62.2%) had arterial hypertension (AG), type II diabetes (QD) - 46 (36.2%) patients; 17 (13.3%) patients had a history of myocardial infarction (MI).

Excess weight (TVI 25-29.9kg/m2) was confirmed in 40 patients (31.5%). 11 of them (27.5%) were obese (I degree (TVI 30-34.9kg/m2) - 5 (45.5%), II degree (TVI 35-39.9kg/m²) - 4 (36.4 %), III degree (TVI > 40kg/m²) - 2 (18.1%) patients) were diagnosed.

Results: Fibrinogen and uric acid levels were found to be 39.4% and 48.4% higher in patients with depressive symptoms. In the group of patients with TDB in comorbid pathology, the increase of QD type II and TVI was observed to be 38.1% and 17.4% higher than in the group without TDB.



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Conclusion: In comorbid conditions with high and often unpredictable variability, in the presence of cardiovascular diseases and metabolic disorders, diagnosis of hemostasis dysfunction, blood sugar level, and diagnostic markers before the appearance of TDB disease symptoms in obesity, early detection of negative consequences of cardiovascular diseases. and predictability measures are considered.

Based on the analysis obtained from the study, it is possible to predict early the development of UIK, the clinical course of ischemic heart dysfunction, the imbalance of the hemostasis system and metabolism.