

ADVANTAGES AND DISADVANTAGES OF HOME-BASED REHABILITATION

Sodiqova Durdona Sultonmurodovna,
Deputy Director,

Karimalieva Dildora Qodirjonovna,
Head of Department,

Ganieva Shoir A'zamovna,
Teacher,

Fergana Branch of the Republican Center for Advanced Training and
Specialization of Medical and Pharmaceutical Workers, Fergana, Uzbekistan

Abstract

This article highlights the role, tasks, and principles of rehabilitation in restoring and strengthening health after illness, as well as the advantages and disadvantages of home-based rehabilitation.

Keywords: Rehabilitation, World Health Organization, therapy, autogenic training, medical diagnostics, functional diagnostics, psychodiagnostics.

Introduction

Rehabilitation is the process of restoring health, functional status, and work capacity impaired by diseases, injuries, or physical, chemical, and social factors. The goal of rehabilitation is the effective and early return of patients and disabled individuals to domestic and work processes, and to society; restoring a person's personal characteristics. The World Health Organization (WHO) defines rehabilitation as follows: "Rehabilitation comprises a set of measures that ensure that individuals with disabilities due to diseases, injuries, and congenital defects adapt to the new conditions of life in the society in which they live. According to the WHO, rehabilitation is a process aimed at providing comprehensive assistance to patients and disabled individuals to achieve the maximum possible physical, mental, vocational, social, and economic fulfillment in that disease."

DEGREE OF STUDY OF THE TOPIC

The term "rehabilitation" comes from the Latin word "habilis" - "ability," and "rehabilis" - "restoring ability."

The goal of rehabilitation is the effective and early return of patients and disabled individuals to domestic and work processes, and to society; restoring a person's personal characteristics. Thus, rehabilitation is regarded as a complex socio-medical problem that can be divided into several types or aspects: medical, physical, mental, vocational, and socio-economic. The first and main





direction of rehabilitation is medical and physical, which is aimed at maximizing the restoration of impaired physiological functions of the body using a complex of various means, restoring the patient's health, and when it is not possible to achieve this - developing compensatory and substitutive adaptations.

The psychological aspect of rehabilitation is aimed at correcting the patient's mental state, as well as shaping their attitude towards treatment, doctor's recommendations, and rehabilitation measures. It is important to create conditions for the patient's psychological adaptation to the altered life situation due to the disease.

The vocational aspect of rehabilitation deals with issues such as job placement of patients, vocational training and retraining, and determining work capacity.

Socio-economic rehabilitation consists of returning the victim to economic independence and social fulfillment. These tasks are solved not only by medical institutions but also by social security agencies.

The relationship between the patient and the community, the patient and the family, and issues of pension provision are considered. Information and advice on social adaptation are provided to the patient and their family members, and they are educated. The patient is taught self-service, the use of rehabilitation technical means. Social psychological and psychological rehabilitation is carried out (psychotherapy, psychocorrection, psychological counseling).

Tasks of Medical Rehabilitation

The main task of medical rehabilitation is the full restoration of the functional capabilities of various systems of the body and the musculoskeletal system, as well as the development of compensatory skills for daily life and work.

Specific tasks of rehabilitation include:

- Restoring the patient's domestic capabilities, i.e., mobility,
- Self-service and performing uncomplicated household chores;
- Restoring work capacity, i.e., restoring the professional skills lost by a disabled person while using and developing the functional capabilities of the musculoskeletal system;
- Preventing pathological processes leading to temporary or permanent loss of work capacity, i.e., implementing secondary prevention measures.

The goal of rehabilitation is to fully restore the lost capabilities of the body, but if this cannot be achieved, the task is to partially restore or compensate for the impaired or lost function, and in any case, to slow down the progression of the disease. To achieve these goals, a complex of therapeutic restorative agents is used, including:

- Physical exercises,
- Natural factors,
- Various types of massage,
- Exercising on simulators,
- Orthopedic devices,
- Occupational therapy,
- Psychotherapy,
- Autogenic training

These are the most effective rehabilitation tools.





Concept of Physical Rehabilitation

Physical rehabilitation is an integral part of medical, social, and vocational rehabilitation, a system of measures to restore or compensate for a person's physical abilities and intellectual capabilities, increase the functional state of the body, and improve physical qualities with the help of physical education tools and methods, sports elements, massage, physiotherapy, and natural factors. Physical rehabilitation is a component of medical and social-labor rehabilitation that uses physical education tools and methods, massage, and physical factors.

Principles of Medical and Physical Rehabilitation

- Early initiation of rehabilitation measures (RM);
- Comprehensive use of necessary RMs;
- Individualization of the rehabilitation program;
- Phased implementation of rehabilitation;
- Consistent and continuous implementation of rehabilitation at all stages;
- Social orientation of RMs;
- Use of methods to control the effectiveness of rehabilitation.

4 Stages of Physical Rehabilitation:

1. Recovery stage.
2. Repair stage.
3. Strength stage.
4. Function restoration stage.
5. Recovery stage. This is the most important stage. Depending on the type of illness or injury, the recovery period may be shorter or longer. The purpose of this stage is to recover the body after illness or injury. To do this, it is necessary to spare the damaged organ and avoid physical exertion.
6. Repair stage. This is the process after the injuries have healed, and now it is necessary to restore the body's movements to the state before the illness or injury. If this is not possible, teach the patient the skills necessary for self-care (prosthesis, hearing aid, wheelchair). These activities help the person return to the state before the injury.
7. Body strength restoration stage. Muscle weakness or atrophy may be observed during the rest period after injury. A person may become weak and unable to withstand physical exertion. Therefore, the purpose of this stage is to restore muscle strength.
8. Function restoration stage. The purpose of this stage is to restore the lost function of the body and is the final stage of rehabilitation. To do this, it is necessary to ensure that the person does not get re-injured. The patient is taught to maintain balance, change direction, agility, and control speed.

Stages of Determining the Rehabilitation Program

Determining a rehabilitation measure is the selection of rehabilitation measures and technical means for the patient to restore the lost function or to perform self-care, social, and professional tasks. For this, it is necessary to conduct rehabilitation-expert diagnostics: a complete examination of the patient or disabled person will be the basis for how to create a rehabilitation program.

The examination includes: collecting complaints and anamnesis, conducting clinical and instrumental examinations. The purpose of these examinations is not only to determine the damage to organs and systems but also to find out how physical disabilities affect the patient's life activity





and functional capabilities.

To recommend restorative treatment, it is necessary to correctly assess a number of indicators of the patient's condition. For this purpose, special diagnostics are used. They are divided into the following types:

- Medical diagnostics are carried out by a doctor and consist of a survey, analysis, examination, palpation, percussion, auscultation, as well as clinical methods and the results of laboratory tests.
- Functional diagnostics - testing the functional state of systems and organs is carried out with instrumental methods (ECG, phonocardiography, spirometry, electromyography, etc.), with various functional tests.
- Motodiagnostics - of great importance in rehabilitation, i.e., the patient's movement abilities are determined, and various tests and muscle testing are used to determine their ability to perform domestic and work activities.
- Psychodiagnostics - the patient's clinical study is reinforced by experimental-mental examinations conducted by a psychologist. The psychologist determines the degree and structure of changes in mental function, changes in memory, attention, and thinking.

Types of Rehabilitation Programs and Conditions of Implementation

- Inpatient program - is carried out in special rehabilitation departments. This program is carried out for patients who need constant supervision by medical staff.
- Day hospital program - in which the patient lives at home and comes to the clinic for treatment and rehabilitation measures.
- Outpatient program - is carried out in restorative therapy departments of polyclinics. The patient is only in the polyclinic during rehabilitation procedures, such as therapeutic massage or physical exercises, and is under the supervision of a rehabilitation doctor and instructor.
- Home program - in which all treatment and rehabilitation procedures are performed at home. This program has many advantages.
- Rehabilitation center program - where patients participate in rehabilitation programs and receive the necessary treatment. Rehabilitation specialists provide patients and their family members with the necessary information and advice on choosing a rehabilitation program and conducting it in various conditions. Usually, restorative treatment begins in the hospital and then continues at home. Such treatment should be started while the patient is bedridden. Correct positioning, turning the body in bed, performing 1-2 passive movements of the joints, breathing exercises - serve to prevent complications such as muscle atrophy, bedsores, and pneumonia in the patient. The patient should always have physical activity, as this strengthens their health. During restorative treatment, attention should be paid not only to the patient's physical condition but also to their mental state, because patients with impaired or lost physical activity may experience fear, panic, and depression. Therefore, it is necessary to create a psychologically comfortable atmosphere around the patient. The rehabilitation program includes the following three areas:
- Therapeutic-protective program
- Functional-hardening measures
- Active function restoration measures





Rehabilitation Principles

- Based on and carried out in conjunction with etiopathogenetic and syndromal treatment;
- Individual approach to each patient;
- Conducting rehabilitation measures in courses at different stages;
- Increasing the intensity of treatment measures at each stage of medical rehabilitation;
- Matching pharmacological preparations with therapeutic physical factors;
- Dynamically conducting the stages of medical rehabilitation, regardless of pathology;
- Comprehensive and sequential use of various means and methods in the medical rehabilitation program.

It is necessary to monitor the effectiveness of the rehabilitation program in dynamics, in this regard, the degree of recovery can be assessed using a four-point scale: complete recovery; partial recovery; unchanged compared to the initial state; deterioration.

The International Labor Office offers the following scale:

1. Restoration of functional ability to one degree or another.
 1. Full recovery.
 2. Partial recovery.
 3. Lack of compensation and recovery in limited restoration of function.
 4. Replacement in the absence of recovery (orthopedic or surgical).
2. Restoring adaptation to daily and professional life.
 1. Educating readiness for labor and domestic activities.
 2. Treatment with labor.
 3. Involving in the labor process - determining work capacity, retraining.
 4. Conducting dispensary service for those undergoing rehabilitation.

Studying the near and long-term results of rehabilitation measures allows for planning and effectively conducting the rehabilitation process, clarifying the main tasks for each stage, and selecting a complex of appropriate and effective tools to achieve a positive result.

Difference between a Sanatorium and a Rehabilitation Center

Medical rehabilitation is aimed at restoring a person's lost physical condition as a result of illness or injury and preventing disability. Sanatoriums and resorts, on the other hand, are aimed at improving health using natural resources (mineral water, mud, air, etc.) to prevent diseases.

Difference between Treatment and Rehabilitation

Treatment - treating a disease, preventing its complications.

Rehabilitation, on the other hand, means restoring or improving a person's lost physical activity and work activity.

There are the following types of rehabilitation:

- Drug treatment
- Physiotherapy
- Rehabilitation physical education and massage
- Speech exercises
- Psychotherapy

A family doctor or a narrow specialist sends a patient for rehabilitation procedures. After rehabilitation procedures, the patient's condition and the effectiveness of rehabilitation are





assessed.

What diseases require rehabilitation?

- Stroke
- Parkinson's disease
- Alzheimer's disease
- Polyneuropathies
- Multiple sclerosis
- Muscle dystonia
- Post-traumatic encephalopathy
- Headaches
- After spinal cord and spinal cord injuries
- After injuries to the legs, arms, spine, and internal organs
- After surgical operations, endoprostheses
- In the acute phase of joint diseases
- After severe infectious diseases.

What interferes with conducting rehabilitation procedures?

Lack of funds, the problem of finding permanent employment.

Contraindications for conducting rehabilitation procedures:

- Frequent recurring bleeding;
- Febrile and subfebrile fever of unknown etiology;
- Acute infectious diseases;
- Acute osteomyelitis;
- Acute thrombosis;
- Unstable angina;
- Mental illness;
- Oncological diseases;
- HIV infection;
- Period of exacerbation of chronic diseases;
- Decompensation stage of chronic diseases;
- Infectious diseases of the skin;
- Tuberculosis;
- Epilepsy;
- Arterial hypertension;
- Ventricular fibrillation;

Home-based rehabilitation

The main and only goal of rehabilitation is to restore the lost or partially lost capabilities of the body, as well as to prevent the progression of the disease and improve the quality of life when restoration is not possible.

Home-based rehabilitation helps a person feel at home and restore movements in a normal home environment.

Patients should return home after intensive treatment in a rehabilitation center and continue their lives. The rehabilitation center has all the amenities for the patient to receive treatment. At home,





however, a person with physical limitations must continue to live in their home. In this case, the home environment has not changed, but the person's physical condition has changed.

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