

MULTI-YEAR DYNAMICS AND INFECTION RATE OF SCHIZOPHRENIA IN THE POPULATION AGED 18-90 IN THE ANDIJAN REGION OF THE FERGANA VALLEY

Islamov Shavkatjon Khabibullayevich

Andijan State Medical Institute, Associate Professor of the Department of Psychiatry, Narcology, Medical Psychology and Psychotherapy, PhD.

Mamasoliyev Zokhidjon Nematovich

Doctor of Medical Sciences, Associate Professor of the Department of Ophthalmology, Andijan State Medical Institute

Kurbanova Ranoxon Rustamovna

Andijan State Medical Institute, Faculty of Advanced Training and Retraining of Physicians, Associate Professor of the Department of Internal Diseases, Cardiology and Emergency Medical Care, (PhD)

Isakov Mash'albek Urmonbekovich

Assistant of the Department of Psychiatry, Narcology, Medical Psychology and Psychotherapy, Andijan State Medical Institute

Abstract

This article is devoted to the analysis of the incidence of schizophrenia among the population of the Andijan region aged 18 to 90 years and its long-term dynamics. During a 40-year retrospective epidemiological study, significant changes in the indicators of primary morbidity of schizophrenia over the years were revealed. Despite annual variability, there was a steady trend towards a decrease in the overall incidence of schizophrenia among the region's population. The obtained data indicate the influence of various exogenous and social factors, as well as the effectiveness of preventive and diagnostic measures carried out in the healthcare system of the Andijan region. These results can be useful for improving strategies for early detection, prediction, and prevention of schizophrenia at the regional level.

Keywords: Schizophrenia, epidemiology, retrospective research, prevention, Andijan region.

Introduction

Purpose of the study: Development of scientific foundations for the prediction, prevention, and prevention of schizophrenia in the conditions of the Fergana Valley in a long-term prospective study.



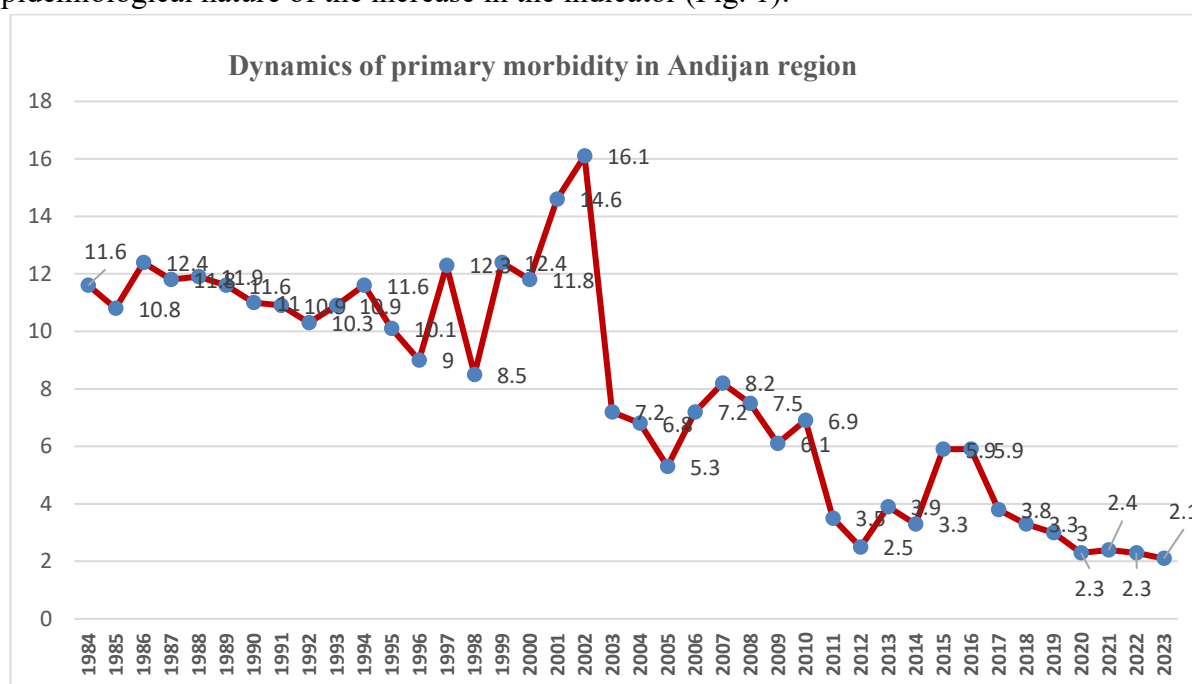
Object of research: Statistical reports on primary morbidity and general morbidity in the Andijan region for 1984-2023 (40 years).

Research methods: epidemiological and statistical methods were used in the study.

Main Part

Based on prospective epidemiological results in Andijan region The dynamics of the incidence of schizophrenia among the population aged 18-90 and its long-term analysis were studied.

Analysis of the dynamics of primary morbidity in the Andijan region confirmed the epidemiological nature of the increase in the indicator (Fig. 1):



From 1985 to 1986 from 10.80 to 12.40, from 1987 to 1988 from 11.80 to 11.90, from 1992 to 1994 from 10.30 to 11.60, from 1996 to 1997 from 9.00 to 12.30, from 1998 to 1999 from 8.50 to 12.40, from 2000 to 2002 from 11.80 to 16.10, from 2005 to 2007 from 5.3 to 8.20, from 2009 to 2010 from 6.10 to 6.90, from 2012 to 2013 from 2.50 to 3.90, from 2014 to 2015 from 3.30 to 5.90, from 2020 to 2021 from 2.30 to 2.40, respectively.

A decrease in the indicator is noted in the following periods: from 1984 to 1985 from 11.60 to 10.80, from 1986 to 1987 from 12.40 to 11.80, from 1988 to 1992 from 11.90 to 10.30, from 1994 to 1996 from 11.60 to 9.00, from 1997 to 1998 from 12.30 to 8.50, from 1999 to 2000 from 12.40 to 11.80, from 2002 to 2005 from 16.10 to 5.30, from 2007 to 2009 from 8.20 to 6.10, from 2010 to 2012, from 6.90 to 2.50, from 2013 to 2014 from 3.90 to 3.30, from 2016 to 2020 from 5.90 to 2.30, from 2021 to 2023, respectively.

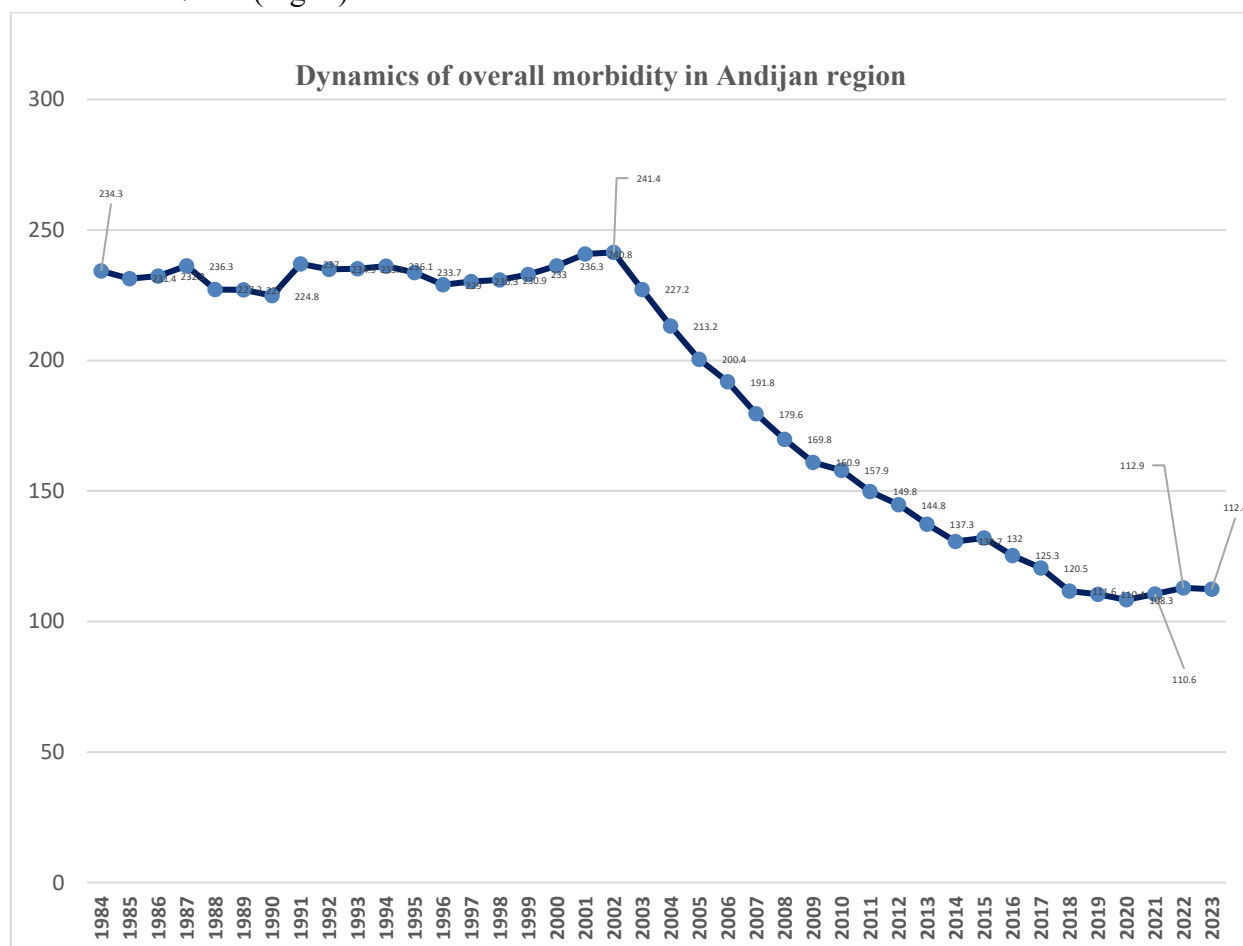
A decrease in the primary incidence of schizophrenia over a 40-year observation period indicates a certain appropriateness of preventive measures. The identification and monitoring of factors influencing the dynamics of periodic elevations (secondary prevention of schizophrenia) is of great importance.

Frequency of detection and dynamics of 40-year changes in the general morbidity of schizophrenia (GMI) in the Andijan population.(Fig. 2).

When analyzing the dynamics of the overall morbidity of the Andijan region, an increase in the indicator from 1985 to 1987 - from 231.40 to 236.30, from 1990 to 1991 - from 224.80 to 237.00, from 1992 to 1994 - from 234.90 to 236.10, from 1996 to 2002 - from 229.00 to 241.40, from 2014 to 2015 - from 130.70 to 132.00, from 2020 to 2022 - from 108.30 to 112.90 was observed.

A decrease in the indicator was observed from 234.30 to 231.40 from 1984 to 1985, from 236.30 to 224.80 from 1987 to 1990, from 237.00 to 234.90 from 1991 to 1992, from 236.10 to 229.00 from 1994 to 1996, from 241.40 to 130.70 from 2002 to 2014, from 132.00 to 108.30 from 2015 to 2020, from 112.90 to 112.40 from 2022 to 2023.

In the Andijan region, the maximum total morbidity rate was recorded in 2002 and amounted to 241.40. The lowest incidence rate in the Andijan region was recorded in 2020 and amounted to 108.30. The highest absolute growth was observed in 1991, when it was 12.20. The highest decrease in absolute value was recorded in 2003, when it was 14.20. The highest growth rate was observed in 1991 and amounted to 5.4%. The highest decrease rate was observed in 2018 and amounted to 7.4% (Fig. 2).



The trend of a continuous and constant decrease in the overall incidence of schizophrenia in the Andijan population is confirmed. Over the years of the study, i.e., 39 years, the overall morbidity in the population aged 18-90 decreased by 2.1 times ($P < 0.01$).



There are periods of "growth" and "decline" of the disease, the accounting of which is important, firstly, in the creation of prognostic scales and, secondly, in the improvement of programs for the prevention of schizophrenia.

The expression of the epidemiological class of general morbidity with schizophrenia in the Andijan population indicates directions.

These fluctuations and changes, based on our analysis, may be related to either epidemiological factors (1984-1991) or factors caused by the COVID-19 pandemic (2020-2022).

Conclusion:

Based on the analysis of the levels and dynamics of primary morbidity with schizophrenia in the Andijan region, the epidemiological indicators of schizophrenia are noted with significant fluctuations over different years. During periods of economic instability and social hardship, an increase in the PPC is observed. According to our analysis, the occurrence of such an epidemiologically unfavorable situation is associated with an increase in psychological shock factors and an improvement in the quality of diagnosis of schizophrenia. Or it may also be related to changes in the methodology for accounting for periods of decline, accessibility of medical care, and changes in the demographic composition of the population.

The trend of a continuous and steady decrease in the overall incidence of schizophrenia in the population of the Andijan region is confirmed by a 40-year retro-prospective epidemiological study. In the population aged 18-90 years, there are waves of "growth" and "decrease" of schizophrenia, which decreased by 2.1 times during the observation period, and their consideration in forecasting and prevention is important in the development of new improved preventive programs of the disease.

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