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PSYCHO-EMOTIONAL CHANGES IN PATIENTS WITH TUBERCULOUS SPONDYLITIS

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Abstract:
The article discusses psycho-emotional changes occurring in patients with tuberculous spondylitis. Tuberculous spondylitis is an infectious disease affecting the spine, and in addition to physical discomfort, it significantly affects the psychological state of patients. The main focus is on how this disease can cause depression, anxiety and other emotional disorders in patients. Possible mechanisms of these changes are discussed and the importance of an integrated approach to treatment, including psychological support, is emphasized.

Keywords: Tuberculous spondylitis, psycho-emotional changes, depression, psychological support.

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Introduction

Tuberculous spondylitis is a rare but serious disease caused by tuberculosis infection that affects the spine. This disease not only has significant medical consequences, but also affects the psycho-emotional state of patients. In this article, we will consider in more detail how tuberculous spondylitis affects the psycho-emotional state of patients.

1. Psychological aspects of the disease

The onset of tuberculous spondylitis can cause fear and anxiety in the patient. This disease not only limits physical activity, but also leads to a loss of control over one's life. The high risk of disability and long-term treatment contribute to the development of depression and anxiety.

1.1. Depression

Depression is one of the most common mental states in patients with chronic diseases. In patients with tuberculous spondylitis, severe symptoms are usually associated with :

• Chronic pain. Constant pain can lead to decreased quality of life and emotional support.
• Physical limitations: Many patients have difficulty moving, which can limit their participation in social life.
• Medical examinations and stress associated with illness. Patients often gradually lose hope for a full recovery, which worsens depressive moods.

1.2. Anxiety disorders

Anxiety is another common symptom that can manifest itself in different forms:

• General anxiety associated with worries about the future.
• Panic attacks, which may occur in patients when symptoms worsen or while awaiting medical procedures.
• Social anxiety, which can lead to isolation and deterioration in relationships with others.

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2. Emotional reactions to illness

Emotional reactions to diagnosis may vary from patient to patient. It is important to remember that each individual's reaction to the disease is unique:

2.1. Stress

Chronic stress becomes a permanent part of patients' lives. This stress can be caused by:

• Uncertainty about treatment and its effectiveness.

• Anticipation of medical procedures and side effects of therapy.

• Financial difficulties associated with expensive treatment and the need for constant monitoring.

2.2. Anger and irritability

Some patients may experience anger and irritability. These feelings may be directed both at their illness and at loved ones, which may cause conflicts and deterioration of support from the environment. It is important to understand that such a reaction is often a defense mechanism that arose in response to stress and pain.

3. Social aspects

Social isolation and lack of support can significantly worsen the psycho-emotional state of patients. Social aspects play an important role in the treatment of tuberculous spondylitis:

• Relationships with loved ones: Understanding and support from family are important factors in facilitating emotional recovery. Often patients need help and support, but may be ashamed to talk openly about their feelings.

• Support groups: Participating in support groups can help patients realize that they are not alone in their experiences. Talking to others who are going through similar problems can be a source of moral support.

4. Treatment and support

Effective treatment of tuberculous spondylitis requires a comprehensive approach, which includes not only medical, but also psycho-emotional support:

• Psychotherapy: Working with a psychologist can help patients cope with emotional difficulties. Various cognitive behavioral therapies can help change negative thinking patterns.

• Exercise and physical activity: Moderate physical activity, adapted to the patient’s condition, can significantly improve the overall psycho-emotional state and reduce anxiety and depression.

• Pharmacological treatment: Antidepressants and anxiolytics may be included in the treatment regimen, but their use must be justified and monitored by a medical specialist.

5. The problem of stigmatisatcii

Patients with tuberculous spondylitis may face prejudice and stigma in society. Tuberculosis is perceived as an infectious disease, so many may experience stigma and isolation. Education and public awareness play a critical role in combating such prejudices.

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Conclusion

Tuberculous spondylitis is not only a medical problem, but also a significant social and psycho-emotional problem. Given the psychological and emotional aspects of the disease, it is important to carry out comprehensive work with patients, ensuring not only physical but also emotional recovery. Psychological support, medical supervision and active involvement of loved ones in the treatment process will help improve the quality of life of patients and promote their recovery.

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