



THE IMPACT OF DISEASES ON THE HUMAN PSYCHOLOGY

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Abstract

Today, maintaining human health is one of the most important tasks. Finding the most effective ways to treat patients with oncological diseases and using them in practice is one of the main ideas of modern humanists.

Keywords: Oncology, prevention, treatment, lifestyle, patient, attitude.

Introduction

Today, we can see in the oldest historical sources, rock paintings, that since the beginning of human life on earth until today, i.e., in its phylogenesis, there has been a constant struggle with various diseases. However, until recently, when the human body was sick, it was said that treating the body was 100% sufficient for a person to recover. However, scientific attention has not been paid to the impact of the disease on human psychology. Today, even for the positive transformation of oncological and other serious diseases that concern humanity the most, faith in recovery, hope, will, patience, and dreams for the future are of great importance.

In our country, work aimed at solving this problem is being considered at the level of state policy. It is observed that the Head of our state, President Mirziyoyev, has set out efforts to find modern solutions to the problem. Resolution PQ-183 dated 21.05.2024. "On approval of the procedure for organizing medical rehabilitation of children with oncological, hematological and immunological diseases" has streamlined rehabilitation [2].



LITERATURE ANALYSIS AND METHODS

Today, the struggle between man and diseases and their causes has entered a new phase than ever before. The paradigm of “health” in modern medical science is gradually shifting from treating the disease to preventing it, that is, to arming it with concepts of prevention, health maintenance, and psychophysiology of health strengthening. It should be recognized that the culture of maintaining one’s own health, the nature of the phenomenon of “health” as a complex structure, and modern theories of psychology in our country have not been sufficiently developed. Rehabilitation work also requires a comprehensive approach, unfortunately, we observe that the comprehensive approach is at a stage and that very little attention is paid to the psychological aspects of treatment. The fact that the great Imam Bukhari’s work “Al-Jame’ as-Sahih” begins with the hadith “All good deeds depend on intentions, and each person will be given only what he intended” certainly has a very deep meaning [1.b-6].

In this direction, the approaches of scientists are based on the theory of "personality" and "health" that a person continues throughout his life. Quality of life is one of the important criteria determining the effectiveness of treatment and rehabilitation of oncological diseases (Semiglazova T.Yu., Kondrateva K.O, Chulkova V.A, Kotova Z.S, Demin E.V, Bernatsky A.S, Semiglazova V.V, Donsky R.B, Karitsky A.P, Sherbakov A.M, Belyaev A.M). The history of psycho-oncology development in the world (Karavayeva T.A., Vasilyeva A. V., Lukoshkina E.P) was studied. Chulkova V.A conducted research on the ethical aspects of conducting psychological research with oncological patients. Pesterova E.V conducted research on psychological research in patients with gastrointestinal cancer. Chulkova V.A. conducted research on female patients with breast cancer [4].

It is necessary to dwell on the factors that cause oncological diseases. In the research conducted by scientists, the environmental factor is cited as the main factor. The fact that this factor is the main factor is clearly seen in comparative analyses of the population living in mountainous areas and in areas with a large number of factories and a large number of harmful chemicals released into the atmosphere during production. We can include the genetic factor as the next factor. Each generation lives and acts under the influence of the characteristics inherited from its ancestors. Worldview also leads to the appearance of various diseases in the human body. For example, patients suffering from anorexia are cruel to their own bodies.



In women with breast cancer, the oncological disease does not begin unexpectedly. Initially, changes occur in the lymph nodes. Many people are unaware that this period is the most normal period of treatment. This period of time in women is recorded in medicine under the term "mastopathy".

Carl and Stephanie Simonton are directors of the Dallas Center for Cancer Research and Consultation. Carl is a radiation oncologist, a physician who treats cancer patients. Stephanie is a psychologist. Carl became interested when he was still a student at the University of Oregon Medical School. That's when he turned his attention. He noticed that sometimes clients wanted to live and behaved as if life was hard. He noticed that patients with lung disease did not quit smoking, and some people with liver cancer continued to drink[7].

Many people imagine the treatment of patients with oncological diseases only as medical practice and medical therapy. From the research of the Simonton brothers, it can be observed that human behavior and lifestyle appear as determinants of the occurrence of diseases. The issue of treatment, that is, rehabilitation, should be carried out in parallel with medical procedures, psychological rehabilitation work. In the rehabilitation of patients with oncological diseases, the issue of restoring the physical capabilities of the body is at stake. In this regard, attention should be paid to the quality of the products consumed.

The main rehabilitation of oncological diseases, according to M.M. Kabanov, forty years ago, is: establishing partner relations between the attending physician and the patient; developing various measures of solidarity, the patient's life and activity, analyzing the impact of biological and psychosocial methods, and gradually implementing the dynamics of the patient's functional and psycho-emotional state [4.p-10].

The medical interpretation of the concept of "quality of life" was first introduced in the USA by Professor Kornovsky D.A. of Columbia University in his article "Clinical evaluation of chemotherapy in cancer" published in 1947, which defines the quality of life as the subject of the study of the effect of chemotherapy on the body and recovery in the physical aspect. The concept of quality of life was emphasized in the studies of American scientists in the 1980s, which emphasized that the biopsychological model in medicine is aimed at the psychosocial aspect of the disease. The concept of quality of life is quite clearly a key factor in the doctor-patient



relationship, as the ancient Hippocratic definition “it is necessary to treat not the disease, but the patient” [4.b-12].

Abu Ali Ibn Sina also recommends studying the lifestyle of the sick person, not just the study and treatment of the disease. He studies the lifestyle of a healthy person and the lifestyle of a sick person, studying each of them separately[3].

CONCLUSION

Initially, information about one's illness is likely to have a serious impact on any person. Based on research conducted by scientists, as a result of studying the opinions expressed, the patient's attitude towards his illness is the question of whether the patient will win the fight against the disease or be defeated by the disease. Positive thinking plays a significant role in increasing human immunity. The patient's belief in his recovery, the desire to continue the fight until he finds a solution to the unresolved problems, the driving force for victory over the disease, has a positive effect on motivation. A person suffering from oncological disease develops a fear of the disease. Methods for overcoming this fear are implemented in psychological correctional practice with the help of a psychologist. Attention to the psychological side of the problem appears at the last stage. Also, the passage of time leads to a decrease in willpower. Some people become more susceptible to illness and fall into a state of panic when left alone.

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