SCIENCE AND INNOVATION

INTERNATIONAL SCIENTIFIC JOURNAL VOLUME 2 ISSUE 4 APRIL 2023

UIF-2022: 8.2 | ISSN: 2181-3337 | SCIENTISTS.UZ

HOW DOES OBSESSIVE-COMPULSIVE DISORDER MANIFEST ITSELF?

Khudaiberdieva Dilorom Khaidar qizi

Doctoral student of Gulistan State University

https://doi.org/10.5281/zenodo.7871382

Abstract. This article examines the causes of obsessive-compulsive disorder in people of different ages, and what factors trigger its occurrence. It also shows how it occurs in teenagers and its symptoms.

Keywords: obsessive compulsive disorder, neurosis, triggers, biological factor, social factor, psychological factor, obsession, compulsion.

Obsessive-compulsive disorder is a special form of mental neurosis (a state of neurosis of thoughts fixed in the brain), which is characterized by ideas and actions that are fixed in the brain. Ideas, situations, which have settled in the brain, appear against a person's will, but a person is fully aware of this situation, but cannot control it.

The 76% of patients have a history of disturbing emotions, social phobia, threatening situations, affective disorders (41% recurrent depressive disorder, 23-32% personality disorder) are observed in 63%[1].

In addition, the 29% of patients complain of problems related to tics. Most of these cases concern patients with OCD symptoms at a young age.

About 30 years ago, obsessive-compulsive disorder was considered a rare disease in adolescents and young children. But today this neurotic disorder is under the control of all psychiatrists in the world. Currently, 1-2% of those diagnosed with OCD are teenagers. In real numbers, these percentages may seem small, but considering that 1-2% of these percentages are teenagers, this is a very alarming indicator.

In most cases, this disease is detected in youth or adolescence or in young people under 30 years of age. If we look at the number by gender, the percentage is the same, that is, this disease is equally manifested in women and men.

Among women, this disease manifests itself in old age, and in men in youth. The average age of onset of OCD is 19-20 years. By the age of 14, the disease begins to develop in 25% of cases, when it reaches 35%, this disease appears in rare cases. In 25% of men, the first symptoms of OCD appear before the age of 10, and in women, this indicator is less.

In children under the age of 6, OCD manifests as phobia (fear), in elementary school students as compulsion (repetition of actions), and in teenagers as obsession (ideas, thoughts that settle in the brain)[1].

The state of fixation of thoughts in the brain (obsessive state) is accompanied by fearful, negative emotions in teenagers, and they cannot be consciously controlled. If the patient wants to get rid of this condition, he may become depressed, distance himself from the environment, lose his ability to work, and lose the ability to engage in social communication for an indefinite period of time.

The duration of the disease in adolescents is determined by how long the patient is surrounded by settled thoughts and situations. OCD can occur equally in adults, adolescents and

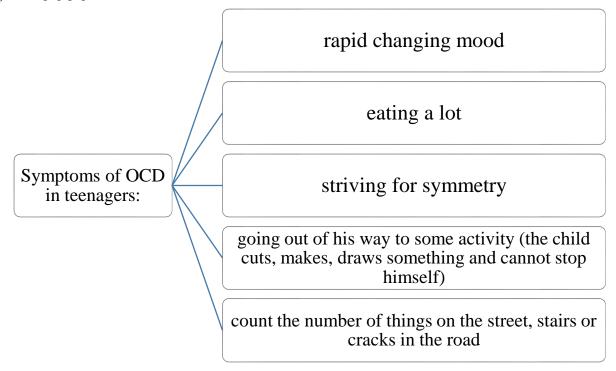
SCIENCE AND INNOVATION

INTERNATIONAL SCIENTIFIC JOURNAL VOLUME 2 ISSUE 4 APRIL 2023 UIF-2022: 8.2 | ISSN: 2181-3337 | SCIENTISTS.UZ

children, this disease is not related to a person's social background and place in society. But in many cases, this disease occurs in the middle and upper strata of the population.

Obsession - impulses - striving for negative actions aimed at others (for example, a person feels a tendency to commit actions that do not correspond to the norms of behavior in society). In many cases, even actions have an asocial criminal character. These obsessive impulses live in the adolescent's mind for a long time, and are perceived as an unrealizable and forbidden dream[2].

Obsessions are thoughts that appear in the form of rituals, and are fixed in the brain, encouraging to repeat actions over and over again. Adolescents may repeat actions that serve as a "protective function" to relieve fear or discomfort. That is, in order for a teenager to feel calm, he needs to repeat a certain behavior - actions. In this case, the child realizes that his actions are meaningless, but he cannot stop himself, the desire to resist gives rise to uncontrollable feelings of fear and helplessness, and it is suppressed only when the actions are repeated a certain number of times[5],[6].



The causes of OCD have not been fully studied. Several options are indicated as the reasons for the manifestation of this phenomenon in adolescents. They are based on: biological, social and psychological factors.

The diagnosis of OCD in adolescents is somewhat more complicated because it is similar to other mental pathological conditions, especially schizophrenia.

Biological factor: dysfunction of the central nervous system, brain damage, staphylococcal infections in mental changes occurring in adolescents. But the main biological cause of OCD in teenagers is heredity. That is, if the parents have symptoms of mental illness, the child also has a high level of development of this mental illness.

Social factor: bad treatment by parents, very strict control, bullying, causes mental disorders in the child. In many cases, it can also be caused by overwork at school [9].

Psychological factor: if the child experiences a negative emotional event that damages his psyche, the level of development of OCD is high. Triggers of the pathological process are a

SCIENCE AND INNOVATION

INTERNATIONAL SCIENTIFIC JOURNAL VOLUME 2 ISSUE 4 APRIL 2023 UIF-2022: 8.2 | ISSN: 2181-3337 | SCIENTISTS.UZ

person's departure from the normal state (desire for constant cleanliness, fear of catching an infection, getting sick) [7],[8].

Thus, after analyzing the data presented above, it is possible to come to the conclusion that OCD does not choose age, gender and social class. Behaviors, which at first seem like habits, are symptoms of a mental illness that can complicate a person's daily life and physically exhaust him. Even if a person understands the illogicality of his actions, he cannot control his actions. When obsessions appear, he tries to "reduce" them with compulsions, and temporarily succeeds in this.

REFERENCES

- 1. Boreu, H. Sharma, M., Hudk, R. (2015). Biological treatment for obsessive-compulsive and related disorders. Journal of Obsessive-Compulsive and Related Disorders. 6.7 26
- 2. Abramovitch Amitai, Abramowitz Jonathan S., Mittelman, Andrew. (2013). The neuropsychology of adult obsessive-compulsive disorder: A meta-analysis. Clinical Psychology Review, 33,1163-1171.
- 3. Obsessivno kompulsivnoe rasstroystvo: Kak poyavlyayutsya ritualy? Dukhareva A.V., Mayorov A.A. Novyy vzglyad. Mejdunarodnyi nauchnyi vestnik.
- 4. Obsessive-compulsive disorder and ego prevention and education. Semchenko L.N., Kostina M.Yu.. Vsetnik soveta molodyx uchyonyx i spetsialistov № 1. T1. 2018
- 5. Razuvaev V.Yu., Manukhin M.M. Take care of yourself. Obsessivno-kompulsivnoe rasstroystvo M.: 1000 Bestsellerov, 2020. 206 p.
- 6. Reschmidt Kh. Psychotherapy detey i podrostkov. Moscow "Mir", 2000
- 7. Yuldashev, U.A., Xudoyberdiev, M.Z., & Axmedov, T.B. (2021). O'quv jarayonining sifatini oshirishda zamonaviy axborot texnologiyalaridan foydalanish. //Academic research in educational sciences, 2(3), 1262-1268.
- 8. Yuldashev Ulmasbek Abdubanatovich, Khakimova Farangis Abdualimovna, Khudayberdieva Dilorom Khaydar kizi, Web of Scientist: International Scientific Research Journal, ISSN-2776-0979 Vol 2, Issue 5, 2021, pp. 693-697
- 9. Abdubanapovich, Y. U., & Qizi, S. M. B. (2022). MASOFALI O 'QITISH JARAYONIDA INFORMATIKANI FANINI O'QITISHDAGI DIDAKTIK TIZIMLAR. Science and innovation, 1(B3), 797-800.