DYNAMIC OF DISABILITY RESULTING FROM MENTAL DISORDERS IN THE REPUBLIC OF UZBEKISTAN

Abdurakhim Abduhamitovich Ganikhanov

Ph.D., Tashkent Pediatric Medical Institute *https://doi.org/10.5281/zenodo.10688757*

Abstract. This article presents an analysis of the overall prevalence of mental disorders and disability associated with these disorders. In recent years, the establishment and adoption of the biopsychosocial model in psychiatry as a necessary approach to healthcare delivery has become evident. The findings of this study will aid in the planning and implementation of organizational measures aimed at improving the quality of healthcare services in this field.

The aim of the research was to conduct an analysis of disability due to mental disorders in the Republic of Uzbekistan during the period from 2018 to 2022.

Materials and Methods: The analysis of overall morbidity and disability due to mental disorders was conducted based on retrospective data obtained from the state statistical reports on primary and overall prevalence of mental disorders and disability associated with them during the period from 2018 to 2022.

Results: The conducted research demonstrates a consistent trend of decreasing prevalence rates of overall mental disorders in the Republic of Uzbekistan. In 2018, the rate per 100,000 population was 1036.3, whereas in 2022, it decreased to 752.0.

These findings highlight the success of measures taken in the field of mental health and healthcare provision in the country. The results contribute to the understanding and planning of future strategies to further improve the mental health services and disability management in the Republic of Uzbekistan.

Keywords: epidemiology, prevalence, and morbidity of mental disorders, disability.

INTRODUCTION

The indicators of prevalence of mental disorders should not be considered as exact and immutable, but rather as a guide for conducting epidemiological research. They can be used to identify trends in the spread of diseases, forecast their further development, and plan measures for prevention and treatment.

Furthermore, the prevalence of mental disorders may vary depending on factors such as ethnic background, degree of urbanization and economic development of the country, age and gender of patients, presence or absence of genetic factors and epidemic outbreaks, as well as the methodology of the study. For example, in the United States, the relatively high prevalence of schizophrenia is associated with the widespread use of diagnostic criteria outlined in the Diagnostic and Statistical Manual of Mental Disorders, which allows for early diagnosis of the disease. In contrast, in Europe, where more refined diagnostic criteria from the International Classification of Diseases are applied, the indicators of schizophrenia prevalence are lower.

One of the forms and methods aimed at addressing these challenges is early diagnosis and treatment of mental disorders. According to the majority of experts, the most effective way to prevent disability among patients with these pathologies is early detection and treatment of the initial symptoms of each condition. Early diagnosis enables timely intervention and preventive measures to mitigate the progression of the disorder [1,3,5].

In addition, social adaptation plays a crucial role in preventing disability among individuals with mental disorders. People suffering from mental disorders often encounter difficulties in communicating with others, finding employment, and participating in social life. Therefore, it is important to assist them in adapting to the social environment and becoming as independent as possible [3,7].

Moreover, providing qualified medical care and ensuring accessibility of medications are vital aspects of preventing disability among individuals with mental disorders. Additionally, psychosocial programs and training should be implemented for patients, their family members, and close associates to equip them with the necessary skills to cope with the challenges associated with these conditions [8,9].

The aim of this study was to conduct an analysis of disability resulting from mental disorders in the Republic of Uzbekistan for the period of 2018-2022.

MATERIALS AND METHODS

The analysis of overall morbidity and disability due to mental disorders was conducted using retrospective data from the state statistical reports on primary and overall morbidity of mental disorders and resulting disability for the period 2018-2022 in the Republic of Uzbekistan. To assess the prevalence of mental disorders, data on the total number of reported cases of mental disorders in the population were collected from the state statistical reports. The prevalence rate was calculated per 100,000 population for each year of the study period.

For the assessment of primary morbidity, the number of newly diagnosed cases of mental disorders was obtained from the state statistical reports. The primary morbidity rate was calculated per 100,000 population for each year.

To determine the level of disability resulting from mental disorders, data on the number of disabled individuals due to mental disorders were collected from the state statistical reports. The disability rate was calculated per 100 diagnosed cases of mental disorders for each year.

The obtained data were analyzed using statistical software, and the trends in prevalence, primary morbidity, and disability rates were examined over the study period. The results were presented using figures and diagrams.

The limitations of this study include reliance on retrospective data from the state statistical reports, which may have limitations in accuracy and completeness. Additionally, the study focused on overall morbidity and disability due to mental disorders and did not examine specific types or subcategories of mental disorders.

Further research is needed to explore the factors contributing to the observed trends and to investigate the effectiveness of preventive measures and interventions aimed at reducing disability and improving the quality of life for individuals with mental disorders.

RESULTS

The findings of the study indicate a consistent and significant decrease in the prevalence of mental disorders in the Republic of Uzbekistan. Over the four-year period from 2018 to 2022, there has been a notable decline in the overall rates of mental disorders among the population. Specifically, the prevalence rate per 100,000 individuals decreased from 1036.3 in 2018 to 752.0 in 2022. This downward trend is visually represented in Figure 1.

Moreover, an examination of the primary morbidity rates revealed a parallel decrease in the incidence of new cases of mental disorders. The incidence rate per 100,000 individuals declined from 93.3 in 2018 to 67.6 in 2022. This decline is graphically illustrated in Figure 2.

Regarding the level of disability resulting from mental disorders, the study findings indicate an upward trajectory. The disability rate per 100 diagnosed cases increased from 40.4 in 2018 to 60.7 in 2022. This trend is depicted in Figure 3.

DISCUSSION

The discussion centers on the epidemiological aspects of disability among individuals with mental disorders, including the frequency, trends, and risk factors associated with such conditions. It is imperative to consider these factors, particularly within the working-age population. While some patients exhibit favorable adaptation to various types of mental disorders, it is crucial to recognize that this favorable outcome is primarily associated with a benign disease course. However, other factors influencing the probability of disability should be taken into account [2, 4, 6, 9].

Presently, it is of paramount importance to prioritize the appropriate treatment of individuals with mental disorders utilizing contemporary psychotropic medications that facilitate the preservation of their social functionality. However, equal attention should be devoted to addressing employment and socio-occupational adaptation issues, as neglecting these aspects would be unwise.

In recent years, individuals with mental disorders have frequently been perceived as chronically ill and societal burdens due to socio-economic transformations. Rather than addressing issues related to adaptation, long-term treatment tends to be favored. Nevertheless, it is vital to acknowledge that a supportive family environment, understanding from loved ones, as well as facilitating meaningful employment opportunities and providing adequate modern therapy, can assist in restoring the social status of individuals with mental disorders. It is essential to encourage patient involvement in resolving family and adaptation challenges, drawing on their capabilities and needs.

In terms of preventing disability among patients with mental disorders, one effective measure is extending the duration of temporary incapacity, thereby enabling patients to continue treatment beyond the prescribed four-month period. This practice facilitates the maintenance of social connections, preserves professional skills, prevents psychological distress among patients, and mitigates the loss of valuable human resources for the state. However, it is worth noting that specialized Medical and Labor Expert Commissions seldom resort to this preventive measure due to the absence of specific clinical and social criteria for determining temporary or persistent work incapacity. Furthermore, it is important to acknowledge that extending the duration of temporary incapacity incurs additional costs associated with temporary disability leave.

CONCLUSIONS

The observed increase in disability resulting from mental disorders coincides with a decrease in overall morbidity rates, a phenomenon attributed to the accumulation of cases involving chronic mental disorders within the population.

In conclusion, the prevention of disability among patients with mental disorders necessitates a comprehensive and multidimensional approach, requiring the collaborative efforts of medical, social, and psychological services. By addressing this issue, we can enhance the quality of life for patients and reduce the disability rate among them.

REFERENCES

SCIENCE AND INNOVATION INTERNATIONAL SCIENTIFIC JOURNAL VOLUME 3 ISSUE 2 FEBRUARY 2024 UIF-2022: 8.2 | ISSN: 2181-3337 | SCIENTISTS.UZ

- Kozyrev V.N., Smulevich A.B. Comparative characteristics of mental pathology observed in patients of the therapeutic department of the polyclinic and psychoneurological dispensaries // Zhurnal Nevropatologii i Psikhiatrii im. S.S. Korsakova. – 1982. – No. 8. – pp. 58–63.
- 2. Churkin A.A., Tvorogova N.A. Psychiatric assistance to the population of the Russian Federation in 1993-1996. Moscow, 1998. 55 p.
- American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders. 4th ed. – Washington: American Psychiatric Association, 1994. – 886 p.
- Corrigan P.W. The social perceptual deficits of schizophrenia // Psychiatry. 1997. Vol. 60. – pp. 309–326.
- 5. Fenton W.S., Schooler N.R. Editors introduction: Evidence-based psychosocial treatment for schizophrenia // Schizophrenia Bulletin. 2000. Vol. 26, No. 1. pp. 1–3.
- 6. Haghighat R. A unitary theory of stigmatization: pursuit of self and routes to destigmatization // British Journal of Psychiatry. – 2001. – Vol. 178. – pp. 207–215.
- 7. Haselbeck H., Wieviel T.Y. Theory brought die Sozialpsychiatrie // Sozialpsychiatrische Informationen. 1993. No. 4. pp. 5–9.
- 8. Sh. Sh. Magzumova, A.A. Ganikhanov. Prognosis of disability due to schizophrenia in the Republic of Uzbekistan // Rossiyskiy Psikhiatricheskiy Zhurnal. 2009 No. 3 pp. 13-15.
- A.A. Ganikhanov. The significance of statistical indicators of the prevalence of mental disorders in the Republic of Uzbekistan in addressing the issues of resocialization // International Scientific conference "Modern Challenges and Trends," Warsaw, Poland, 31.05.2020, part 2, ISSUE 5(27), pp. 72-77.
- A.A. Ganikhanov, Sh. Sh. Magzumova. Assessment of the incidence of mental disorders in dynamics in 2018-2021 in Uzbekistan // Samarkand Spring School of Young Psychiatrists and Narcologists, scientific and educational project materials, Samarkand, April 25-28, 2022, p. 48