



ANALYSIS OF CLINICAL SIGNS OF A PATIENT'S OSTEOARTHRITIS

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Article history:	Abstract:
Received: September 13 th 2022 Accepted: October 14 th 2022 Published: November 20 th 2022	This article describes the clinical characteristics of female and male patients aged 35 to 65 with a diagnosis of osteoarthritis.
Keywords: Knee joint, chondroitin sulfate, rehabilitation, osteophyte, synovitis, disability, osteoarthritis, quality of life, physical stress, goniometry, therapeutic exercises	

RELEVANCE. Osteoarthritis is one of the most common joint diseases and in most cases leads to disability. Pharmacotherapy of osteoarthritis requires large funds. Therefore, the choice of optimal pharmacotherapy for this disease remains one of the urgent problems. This is accompanied by a pathological lesion of the articular surfaces, which ultimately leads to lameness in the movement of the patient [3, 6, 7, 11].

Treatment of patients with osteoarthritis should be systematic, long-term and comprehensive. Before drawing up a treatment plan for such a disease, it is necessary to take into account the factors that caused the pathological condition, its clinical stage, course features, and the degree of impaired motor function in the joints [8, 9, 11].

One of the best methods of treating osteoarthritis is physical rehabilitation (limitation of physical activity, use of additional support devices, weight loss, increased muscle strength in the affected joints, use of orthopedic devices), and the combined use of drugs is more effective [Hoving J.L., 2014].

Currently, a comprehensive approach is required in the process of studying the course of diseases and clinical symptoms. Because although the diseases are the same, they can manifest differently in each person. This requires a comprehensive approach to the treatment of diseases and, most importantly, helps to prevent the disease [4, 8, 9, 11].

In patients with osteoarthritis, the quality of life is significantly lower, which is associated with the

chronic course of the disease. Taking into account the age of patients, progressive joint damage, we can say that the disease has a negative impact on the most important functions of the patient - physical, psychological, social activities. Studying the quality of life allows monitoring the condition of patients, evaluating the dynamics and effectiveness of treatment. Measurement scales, in particular, the WOMAC index and the Leken index, are used to assess specific signs and limitations of joint function [8, 10, 13].

OBJECTIVE. Clinical symptoms and quality of life in patients with arthrosis were analyzed by sex, age, place of residence and duration of the disease.

MATERIALS AND METHODS. 133 female and male patients (103 in group 1; 30 in group 2) aged between 35 and 65 were divided into two groups and were diagnosed with osteoarthritis in the physiotherapy and traumatology departments of the Bukhara Regional Multidisciplinary Medical Center. Among them, 89 (66.9%) patients were diagnosed with arthrosis of the knee joint (gonarthrosis), and 44 (33.1%) were diagnosed with arthrosis of the hip joint (coxarthrosis).

Patients who participated in the survey were divided into 2 groups in a representative manner according to gender, age, place of residence, duration of the disease. The patients are divided into 2 groups, and their data on sex, age, address, duration of the disease are presented in table 2.1.



Table 2.1
Clinical description of patients

Indicators	General		I (main group)		II (comparison group)	
	N	%	N	%	N	%
Total	133	100	103	100	30	100
City	33	24,8	24	23,3	9	30
Village	100	75,2	79	76,7	21	70
Female	98	73,7	79	76,7	19	63,3
Male	35	26,3	24	23,3	11	36,7

Note: n is the absolute number of patients, % is the percentage of patients.

When analyzing patients with osteoarthritis by gender, age, place of residence, course of the disease, the following results were revealed in the groups: in all groups, patients with osteoarthritis were more common among rural residents than urban residents (75.2%)

Table 2.2
Classification of patients by age and disease duration

Indicators	Group I (main), n=103				Group II (comparison), n=30							
	Total		Female	Male	Total		Female	Male				
Up to 40 years old	11	10,7	8,9	16,67	5	16,7	10,5	27,3				
41-50 years old	17	16,5	16,4	16,67	5	16,7	15,8	18,2				
51-60 years old	45	43,7	45,6	37,50	12	40,0	42,1	36,3				
60 years and older	30	29,1	29,1	29,17	8	26,6	31,6	18,2				
1-5 years	80	77,7	77,2	79,2	19	63,3	68,4	54,5				
6-10 years	17	16,5	17,7	12,5	10	33,3	31,6	36,4				
11 years and over	6	5,8	5,1	8,3	1	3,4	-	9,1				
Body mass index	30,5±0,44		30,8±0,53		29,4±0,68		30,5±0,63		30,4±0,82		30,7±1,03	

When comparing the total number of patients by gender, the percentage of women was 98 (73.7%). When analyzing the disease according to age, the disease showed a high rate (43.7%) among 51-60-year-olds in all groups. According to the duration of the disease in both groups, 80; 19 people up to 1-5 years

(77.7%; 63.4%), 17; 10 people up to 6-10 years (16.5%; 33.3%), 11 the number of patients who lasted more than a year was 6.1 (5.8%; 3.3%) (Table 2.2). It can be seen that the duration of the disease in the main and comparison groups is 1-5 years.

Table 2.3
Description of the severity of the disease in patients with osteoarthritis

Group	Gender	Osteoarthritis severity			All (%)
		I	II	III	



Group I (main)	Female	22 (27,8%)	35 (44,4%)	22 (27,8%)	79 (76,7%)
	Male	7 (29,2%)	12 (50,0%)	5 (20,8%)	24 (23,3%)
	Total	29 (28,1%)	47 (45,6%)	27 (26,2%)	103 (100%)
Group II (comparison)	Female	3 (15,8%)	9 (47,4%)	7 (38,8%)	19 (63,3%)
	Male	1 (9,1%)	4 (36,4%)	6 (54,5%)	11 (36,7%)
	Total	4 (13,4%)	13 (43,3%)	13 (43,3%)	30 (100%)

In the analysis of the severity of the disease in the examined patients (Table 2.3), it can be seen that in the main group, II degree of disease severity is

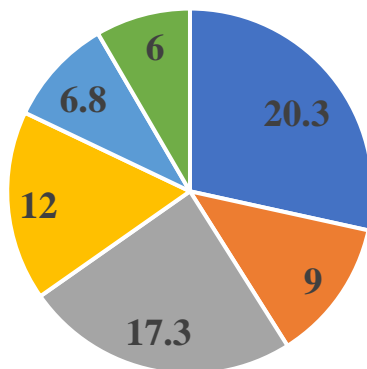
relatively higher, and in the comparison group, II-III degree of disease is higher than in I group.

Table 2.4
The presence of comorbidities in patients with osteoarthritis

Accompanying illnesses	Osteoarthritis, n=133			
	Female, n=98		Male, n=35	
	Group I	Group II	Group I	Group II
	%	%	%	%
Osteochondrosis	17,7±0,18	26,3±0,10	37,5±0,38	27,3±0,14
Arterial hypertension	31,6±0,32	21,0±0,10	8,3±0,08	9,1±0,09
Diabetes	7,6±0,08	10,5±0,7	25,0±0,25	9,1±0,09
Chronic gastritis	15,1±0,15	10,5±0,7	16,7±0,17	18,1±0,12
Stomach ulcer disease	7,6±0,08	10,5±0,7	8,3±0,08	9,1±0,09
Chronic pancreatitis	3,8±0,04	10,5±0,7	12,5±0,13	-



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CONCLUSION. Thus, the studies helped to analyze the results obtained from the evaluations of controlled patients in terms of disease nosology, severity levels, patients' age, gender and time of disease onset in a representative and different approach.

When analyzing the social situation of patients with osteoarthritis, it is widespread among the rural population, and one of the risk factors of this disease is the effect of excessive physical stress on their joints.

When we analyzed the duration of the disease in patients with osteoarthritis, it was found that the duration of the disease in the main and comparison groups was 1-5 years in a high percentage.

In the analysis of comorbidities in patients with osteoarthritis by gender, arterial hypertension is higher in female and male patients in the main group (31,6%; 21,0), while osteochondrosis, gastric ulcer diseases have higher rates in men than in women, chronic gastritis and chronic and indicators of pancreatitis diseases do not have a big difference between both sexes.

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