



THE ROLE OF REHABILITATION IN PRIMARY CARE

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Article history:	Abstract:
Received: March 8 th 2022 Accepted: April 8 th 2022 Published: May 20 th 2022	The article reveals a fact that still worries the population of the whole world and is relevant is the prevention of early and late complications of COVID-19 in those who have experienced it. Taking into account the importance of the activities of the primary division of medicine in ensuring the continuity of the same process, their activities were studied and analyzed, as a result of which rehabilitation measures are carried out in patients with the disease, and at subsequent stages, as a result of integrity violations, patients return to normal life. The autonomy of patients with COVID-19 infection before rehabilitation was also studied, divided into groups, and the role of doctors and medical staff in ensuring that they receive the necessary treatment and undergo rehabilitation is envisaged.

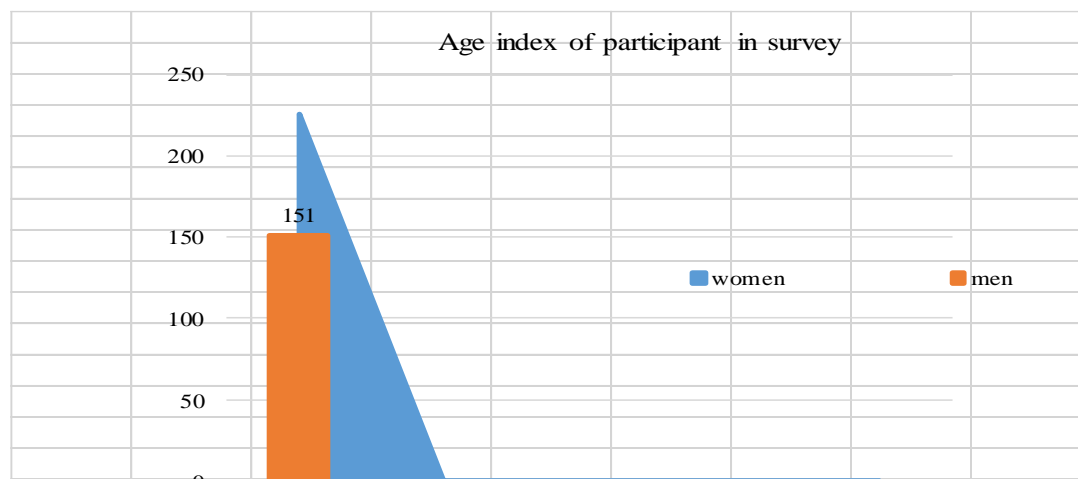
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INTRODUCTION

Objective to develop a rehabilitation program by identifying the most common early complications observed in patients who have not had COVID-19. Methods used: the survey was conducted among the population with 378 COVID-19 infections related to the multidisciplinary central clinic of the Almazar district of Tashkent, autumn-winter 2020 and spring 2021. The survey was conducted electronically with the consent of the population (CQFN - COVID QUESTIONNAIRE FOR NURSES) and in the form of a sheet. The results obtained: a total of 377 citizens took part in the study, of which: 226 (60%) were men and 151 (40%) were women. The study involved patients aged 24 to 90

years (Figure 1). It was found that the majority (302-80%) of those who participated in the survey were in need of rehabilitation. In accordance with the clinical signs of the disease observed in them: 144 (38%) nausea, coughing in 116 (32%), sneezing in 264 (70%), general malaise in 309 (82%), memory impairment in 158 (42%) , loss of appetite in 181 (48%), muscle pain in 94 (25%), palpitations in 215 (57%), increased blood pressure in 178 (47%), 113 (30%) people have experienced hair loss, severe sweating in 76 (20%), changes in the intestinal system in 227 (60%) (fluid outflow and constipation), irritability and depression in 254 (67%)

Table 1



(pic 1)



Complaints

<i>decreasing of memory</i>	<i>158 patients 42%</i>
<i>dyspnea</i>	<i>264 patients 70%</i>
<i>General malaise</i>	<i>294 patients 82%</i>
<i>Neurosis and depression</i>	<i>254 patients 67%</i>
<i>Muscular pain</i>	<i>94 patients 25%</i>
<i>Tachycardia</i>	<i>251 patients 57%</i>
<i>Increasing of blood pressure</i>	<i>178 patients 47%</i>
<i>Hair loss</i>	<i>113 patients 30%</i>
<i>Excessive sweating</i>	<i>76 patients 20%</i>
<i>Changes in digestive system (sometimes diarrhea sometimes constipation)</i>	<i>227 patients 60%</i>

(Table 1)

DISCUSSION

According to the findings of scientists from the UK and the USA:

According to the results of a study that was conducted on 10,000 patients, it was noted that 1 in 10 patients experienced changes in urine and physical changes within 12 weeks [4] (we can combine psycho-emotional changes with mentality).

In them we see that 7.7% of patients with diarrhea, 7.8% of patients with nausea, abdominal pain - 2% of patients with diabetes mellitus (20%), high blood pressure (15%), 92% of patients with cirrhosis livers remain with complications, alternatively resulting in 30% death. (in our case, changes in the intestines were observed in 60% of patients, 8% of Americans believe that the reason for this is the inaccurate use of various types of group antibiotics). Scientists noted that in the process of constant monitoring of a patient after a disease in which at least one symptom is absent, it persists for a long time, that is, 50-80% of patients feel unwell, while studies conducted by Italian scientists noted that in 87% of people experience symptoms such as fatigue and sneezing. We have chronic fatigue in 82% of patients. According to the Lancet, according to a survey of scientists in Wuhan, we see that after six months, out of 1,655 patients treated during the pandemic, 76% have chronic fatigue and malaise. According to German doctors, 78 out of 100 patients found that they have problems with the cardiovascular system, we see an increase in blood pressure in 178 (47%) of our patients [4]. It is noted that changes in body temperature are associated not only with an increase in temperature (37.0 -37.4 °C), but also with a decrease in body temperature to 35.5 °C or 36.0 °C and are observed for a long time. [5].

CONCLUSIONS

In order to return to the pre-pandemic lifestyle.

The rehabilitologist is obliged by the family doctor to correctly distribute the agenda for the patient and draw up a rehabilitation program as a result of laboratory and instrumental examinations of the patient's concomitant diseases, age, and at the same time his condition. It is necessary to ensure and monitor the implementation of the program by the nurse, taking into account the constant contact of the nurse with the patient. Monitoring patients' medication intake, that is, ensuring that they do not take medications that are not prescribed by a doctor, control antibiotic intake, ensure that the nurse takes prescribed medications in a timely and correct manner. It is necessary to regularly monitor, namely: drink the medicines that they take at the right time, and monitor the daily water balance (the amount of fluid drunk per day and the amount of fluid released), diet, timely breathing exercises. If the patient is at home (especially those who are retired), while talking with family members, explain to the patient and relatives that the patient should gradually completely give up his bad habits, for example, reducing them (drinking alcohol, smoking tobacco products), providing parental support to members families. The development of rehabilitation programs for the rehabilitation of COVID-19 provides an opportunity to prevent late complications in patients and reduce the number of deaths as a result of the creation of rehabilitation centers, the activities of rehabilitation nurses.



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