



DIFFICULTIES OF DIAGNOSTICS AND SANITARY AND HYGIENIC LITERACY OF PATIENTS WITH DRUG-RESISTANT FORMS PULMONARY TUBERCULOSIS

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Annotation: *Pulmonary tuberculosis is characterized by a wide variety of clinical symptoms, which vary widely in severity and severity. Usually, a direct relationship is noted between the severity of clinical symptoms and changes in the lungs, but their discrepancy is also possible: a severe tuberculous process and mild clinical symptoms or minor changes and a fairly vivid clinical picture. A sociological survey was conducted among 185 patients with drug-resistant forms of pulmonary tuberculosis aged 18–65 years who are being treated in the pulmonary tuberculosis departments of the hospital "Regional Clinical Anti-TB Dispensary" in the city of . Bukhara. According to the survey data, widespread, destructive forms of pulmonary tuberculosis with multidrug resistance of the pathogen prevailed among the examined patients. Most of the patients were rural residents of a young age, with a secondary education, unemployed, legally married, having bad habits, but at the same time well adapted in society and satisfactorily informed about tuberculosis.*

Keywords: *drug resistance of mycobacteria, pulmonary tuberculosis, social questioning, sanitary and hygienic education.*

Introduction. Careful questioning of the patient about the complaints and clinical manifestations of the disease is of great importance for the diagnosis of tuberculosis and determines the course of further research. It is necessary to try to establish the time of onset of the disease to determine its duration, and also to find out whether the patient sought medical help soon after the onset of clinical symptoms or the disease has existed for a long time. When studying the anamnesis, special attention should be paid to the issue of the patient's contacts with patients with tuberculosis at home or at work, the presence of relatives with tuberculosis. At present, hereditary predisposition to tuberculosis can be considered proven. Tuberculosis is a global social and medical problem of our time. Carrying out preventive work among the population is greatly complicated by the poor attention of a large category of residents of cities and villages to their health [1, 7, 9, and 13]. An urgent problem for modern phthisiology in recent years is the increase in the number of tuberculosis patients with drug resistance of *Mycobacterium tuberculosis*. Low level

Sanitary and hygienic literacy among this category of people further exacerbates the course of the tuberculosis process, reduces the effectiveness of chemotherapy and leads to relapses of the disease [2, 4, 8, 9, and 11]. Tuberculosis affects the population of different strata, in connection with this; obtaining information on this disease in an accessible form is very relevant and should occupy one of the leading places among various types of preventive measures. One of the important tasks of a doctor is health education of a patient with tuberculosis and his relatives [3, 6, 15, 17, and 12].

Objective: The level of sanitary and hygienic education on tuberculosis among patients suffering from drug-resistant forms of pulmonary tuberculosis. **Materials and research**



methods . A survey was conducted of 185 patients (50 men and 45 women) aged 18–65 years who are being treated in the pulmonary tuberculosis departments of the hospital "Regional Clinical Anti-Tuberculosis Dispensary" in Bukhara . Bacteriological methods for the study of sputum for the detection of *M. tuberculosis* (MBT), determination of the sensitivity of isolated MBT cultures to anti-tuberculosis drugs ("TB-BIOCHIP" (Russia), BACTEC MGIT 960 (USA)), X-ray methods (fluoroscopy), fibrobronchoscopy , spirometry, ultrasound diagnostics.

Results of the research and their discussion . According to the results of the study, men predominated 52.6% among the respondents, rural residents - 56.5%, the age was 32–41 years. Most of the respondents had a secondary education - 46.7%, 46.3% did not work (men - 42%, women - 58%), among them 18% were found to be disabled due to tuberculosis. 59% of the respondents were married (women - 71.1%, men - 48%), 36.7% of respondents lived in satisfactory living conditions (in separate apartments and in private houses with amenities). 7.3% of respondents admitted that they limit themselves in nutrition. There was a criminal record in 7.4% of patients. Bad habits (smoking, alcohol) were noted by 48.4% of respondents (mainly men - 74%), while 73.9% of patients had a desire to get rid of them ($r = 0.7$, $p < 0.05$) The clinical picture of the disease among the examined showed that 86% of patients had widespread processes (2 or more segments in the lungs) with destruction in the lung tissue. All patients were bacterial excretors , of which 11% of the respondents _____ had MBT monoresistance , 23% of patients had polyresistance , and 66% of patients had multidrug resistance . Obtaining information on the prevention of tuberculosis was considered necessary by 94.7% of patients. Of the proposed types of information, 58.4% of the surveyed noted a conversation with a doctor as the most necessary and accessible, while 21.3% of respondents consider it necessary to combine a conversation with a doctor and television and radio broadcasting, 15% of patients consider a combination of a conversation with a doctor and reading manuals (recommendations), newspapers. When assessing the level of awareness of respondents on tuberculosis issues, it turned out that the majority of respondents answered the question of whether it is possible to become infected with tuberculosis from a coughing and spitting patient -96%. The possibility of contracting tuberculosis during a kiss is noted by 85% of patients, during sexual contact - by 32.5% of respondents, when using a common syringe - by 50.5% of patients. When passing a cigarette while smoking, 86% of respondents are sure that they can become infected with tuberculosis, while using shared utensils - 90.4% of patients. Half of the respondents - 50.5% - are aware of the existence of drug-resistant tuberculosis. Most of the respondents are sure that it is impossible to recover from tuberculosis without the use of anti-tuberculosis drugs (77.9%) and stop taking them on their own if they feel better (97.8%). Almost all patients noted that drug therapy is incompatible with simultaneous use of alcohol and drugs - 96% ($r = 0.7$, $p < 0.05$).

Conclusions:

1. It was revealed that 73.0% of patients were over 50 years old and 15.1% of cases were secondary, who had previously received treatment for susceptible forms of pulmonary tuberculosis.
2. Most of the people who participated in the survey were well adapted in society and satisfactorily informed about TB issues: the duration of treatment, drug-resistant TB, self-interruption of treatment. However, attention is drawn to the low level of education of patients, unemployment in their environment and a high level of bad habits.
3. Patients in the study group who were treated for tuberculosis expressed interest in obtaining additional information about this infectious disease. They believe that information about tuberculosis should be provided by a doctor. In addition, there is an interest in getting



acquainted with methodological manuals and recommendations, obtaining information through the media.

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