



Iatrogenic Pathology in the Practice of a Gynecologist

1. Kalandarov Jakhongir Kalandarovich
2. Ruziev Sherzod Ibodullaevich

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^{1,2} Urgench Branch of the Tashkent
Medical Academy, Tashkent Pediatric
Medical Institute

Abstract: The problem of iatrogenic pathology has become increasingly important in recent years. This is largely due to the increased demands of patients and the increased attention of human rights lawyers to the quality of medical care and the so-called adverse effects of treatment. Unfortunately, the very term "iatrogenic" in society is perceived a priori as something negative, if not criminal.

Establishing and, most importantly, documenting the presence of a particular iatrogenic pathology in a patient will allow, when analyzing specific cases, to look for and find possible ways to prevent it in the future. Voluntary or involuntary disguise of iatrogenics, writing it off for subjective or objective reasons - this is a dead end path. Following them, we will be able to justify the occurrence of a particular pathology in a particular patient, but we will not be able to change the situation as a whole. Recognition of the fact of iatrogenics will make it possible to establish its causes and, consequently, to find ways to prevent them. Thus, in society, mainly among patients and lawyers, a more tolerant, calm attitude towards iatrogenic diseases will be formed, and the term itself will not shock the layman so much.

Key words: nosological forms, syndromes, pathological processes.

Introduction. So, iatrogenics is a group concept that unites all the variety of adverse consequences of any medical effects on the patient, regardless of the correctness of their execution [4]. Pay attention to the last phrase of the definition - "regardless of the correctness of their execution", in our opinion, this is a very important point.

In modern medical literature, when assessing the quality of medical care, the term "medical error" is widely used. To consider the appropriateness of using this term, let us first of all turn to its definition. It is customary to refer to medical errors as incorrect actions or inaction of medical personnel that caused deterioration or death of the patient. At the same time, a medical error as a legal category is understood as a conscientious error of a medical worker without signs of criminal negligence, criminal negligence, criminal arrogance or criminal ignorance [6]. At the same time, one of the reasons for the

emergence of criminal cases against doctors and medical workers is a variety of omissions and errors associated with a low level of professional training or a lack of technical ability to provide the necessary, up-to-date medical care.

The subjective side of the provision of medical care (OMP), i.e. directly the medical staff providing WMD is the most important factor in the occurrence of iatrogenic. It can be characterized by the following parameters: medical specialty, length of service, the presence of a qualification category and academic degree, the frequency of training in the specialty. The result of the analysis of the occurrence of iatrogeny in doctors of various medical specialties did not come as a surprise. Thus, 50% of iatrogenies are performed by operating doctors: obstetricians-gynecologists, surgeons, and anesthesiologists-resuscitators [3].

Material and Methods Thus, the use of the term “medical error” in expert opinions, by its very presence, pushes lawyers to think about the incorrectness or inadequacy of the medical care provided. The presence of the definition “iatrogenic pathology” (“iatrogenic”) will only indicate the fact that these are the consequences of the provision of medical care, and according to the above classification of iatrogenic V.V. Nekachalov, iatrogenic pathology can also occur with technically correct and justified actions of the doctor. The development of iatrogenic pathology is possible not only as a result of violations in the actions of the doctor, but also as a result of technically correct and justified medical manipulations. Identification of the causes of iatrogenic development will expand the range of measures to prevent them [2].

The concept of iatrogenic diseases includes those conditions and diseases that have been provoked by medical intervention or influence. These can be both physical and psychological problems. The study of cultural monuments reflecting the development of ethical norms and rules of behavior of a doctor allows us to conclude that health disorders resulting from ill-conceived words and actions of a doctor were already known to physicians of antiquity. However, the term “iatrogenic” became widespread only after 1925 the publication of the work of the German psychiatrist Bumke (OS E. Witke) “The Doctor as the Cause of Mental Disorders.” Since that time, the concept of iatrogeny has been actively studied by specialists of various clinical profiles. Among domestic scientists, R. A. Luria made a significant contribution to its development [2,14].

Some clinicians (for example, I. A. Kassirsky) used the concept of “iatrogenic diseases” in a broader sense, referring to it any pathology resulting from the actions of a doctor from complications of an incorrectly performed manipulation or procedure to the occurrence of a so-called drug disease, that is, those negative consequences of medical interventions, which a number of researchers designate, in contrast to iatrogenies, as iatropathies or somatic iatrogenies. The expansion of the content of the concept of “iatrogenic diseases” is not justified since, on the one hand, some negative consequences of medical interventions are still inevitable (for example, trauma caused by surgery), and on the other hand, complications caused by improper examination or treatment of the patient belong to the category of medical errors or even medical offenses and constitute a very special etiological group. Therefore, the use of the concept of “iatrogenic diseases” in its traditional sense remains generally accepted, that is, to refer to health disorders caused by the psycho-traumatic effect of rash, deontologically incorrect statements or actions of health workers [4,5].

MS Lebedinsky and VN Myasishchev (1966) pointed out that both the doctor's behavior and the characteristics of the patient's personality (the degree of emotionality, suspiciousness, etc.) are important for the development of iatrogenic diseases. Many of the sick suffer not only from the disease, but also from the anxiety and fears generated by it. This explains the patient's special attention to the words of the doctor, and to his behavior, intonations and facial expressions. At the same time, depending on the type of nervous activity, personality type and mental characteristics, different patients react differently, sometimes oppositely, to certain words and behaviors of a health worker.

Not only ill-conceived remarks (“Your heart attack is the first call”; “... the main vessel of the heart passes blood by 30%”, etc.) or the incomprehensible meaning of certain words and expressions (“hook-shaped stomach” , “myocardial dystrophy”, etc.), but sometimes even interjections or a prolonged silence of the doctor, which can be interpreted by the patient as signs of a particular difficulty in diagnosing or treating his illness, its particular severity, hopelessness of the prognosis [2,4].

The risk of iatrogenic diseases, other things being equal, is not the same in people of different ages, sexes, and educations. Women are more likely to be iatrogenic than men. Age groups with an increased risk of developing iatrogenic diseases are people of the so-called transitional ages - adolescents and people in the menopause period (especially women with pathological menopause), as well as the elderly, among whom there are many involutive changes accentuated on the inevitability and an increased likelihood of a lethal outcome arising diseases [6].

The etiology and structure of foreign bodies depend on the type of surgical intervention: intrauterine devices that have entered the abdominal cavity due to perforation of the uterine wall during their introduction (- 31%); gauze wipes -(38%), medical instruments - (19%), suture material in the uterine cavity -(6%).[11,27]. The clinical picture of IT is represented by complaints of abdominal pain of varying intensity; a picture of an "acute abdomen", an increase in body temperature to febrile numbers, general malaise, nausea, and constipation. The presence of FB in the abdominal cavity can cause complications such as peritonitis, abdominal abscess, bleeding, postoperative fistula, adhesive disease, and also simulate carcinogenesis. The duration of FB stay in the abdominal cavity and the nature of the complications that arise depend on the location, size, infection of FB. Cases of finding IT in the abdominal cavity up to 20 years or more are described. According to a review of specialized literature, the diagnosis of inhalation trauma is based on a carefully collected history, as well as the results of ultrasound, X-ray, CT, MRI, endoscopic methods [11,19, 44].

Often in the literature there is a broader description of the term "iatrogenic", which refers to any mistake by the doctor, resulting in a violation of the functions of the body, disability or even death of the patient. Despite this, more often this concept is interpreted as a disease that has arisen as a result of the doctor's influence on the patient's psyche [3,9,17].

Iatrogenicity occurs due to unskilled, incorrect words or actions on the part of health workers. It happens that any careless word of a doctor leads to a depressed emotional state of the patient. Therefore, it is extremely important for a doctor or any other representative of the healthcare organization to choose words carefully in communication with a patient in order to prevent the development of iatrogenic.

In medicine, there are two definitions of this concept:

In the role of iatrogenic are various side diseases that are associated with:

- Wrong treatment.
- Diagnostic studies.
- Incorrect behavior of medical personnel.

Iatrogenic diseases include diseases that manifested themselves as complications of the underlying disease, they were caused by incorrect or erroneous actions of the doctor and nurses. Interestingly, iatrogenic includes all diseases and injuries that can occur not only in patients, but also in medical personnel during the provision of medical care. Speaking of iatrogenics, you immediately recall the saying that a word can kill a person, so doctors should feel on a subconscious level which patient can tell the whole truth about his disease, and in what situation it is better to discuss this with relatives. But, unfortunately, not all doctors in our medicine are good psychologists and think about the

consequences of their words or actions. Despite the fact that many argue that there is no problem as such - a medical error, iatrogenic diseases indicate the opposite. In some impressionable patients, even the simple inattention of the doctor, his indifferent look and coldness already cause mental anxiety. In today's society, especially often, one has to deal with the callousness and impudence of our doctors [35,41].

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Conclusion. An analysis of the literature data shows that iatrogenic are crimes against human life or health committed by doctors as a result of improper provision or failure to provide medical care to citizens. The right to health and medical care is guaranteed by the Constitution of the Republic of Uzbekistan. In recent years, problems with the quality of medical care have become increasingly important, especially with unfavorable outcomes in the provision of medical services. This is due to the activity of citizens, the media and judicial and investigative bodies, especially in the event of complications and the development of undesirable results. In cases of complaints from patients or their relatives to law enforcement agencies or based on the results of verification work, a number of medical and legal issues are resolved by appointing forensic medical examiners. A special place is occupied by expertise in relation to obstetricians, gynecologists and neonatologists. When doctors are held legally liable for the improper performance of their professional duties, the investigation and the court face a number of special issues. The main ones are the correct diagnosis and treatment of patients and the presence of a causal relationship of severe outcomes from medical omissions.

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