

ISSUES OF MEDICAL AND PREVENTIVE CARE FOR STUDENTS OF MEDICAL
UNIVERSITIES**Eshmurotov S.G.***Assistant of Tashkent State Dental Institute**Phone: +998 93 687 94 99**sunnat.eshmurotov0330@gmail.com*

Abstract: *The article is devoted to the state of health of medical university students, the necessity of their selection for dispensary registration and then monitoring of their health. The results of the study conducted among students on the basis of questionnaires about their health status, commitment to a healthy lifestyle and satisfaction with the provision of medical care at the place of study are presented.*

Keywords: *students, health, illness, healthy lifestyle, bad habits, medical examination, medical care*

Protection and development of youth and students' health becomes one of the most important goals of state policy in the modern world, which largely determines the health and economic potential of our country in future development. In modern Uzbekistan, the age group from birth to 30 years makes up 60 per cent of the population, so one of the goals of the New Uzbekistan development strategy for 2022-2026 is defined as the protection of human life. and life, strengthening the health of young people and the level and quality of medical and preventive care provided to them, improving their medical literacy, increasing the medical activity of students on the basis of the promotion of a healthy lifestyle among young people.

Purpose of the study: to describe the health status of students of medical universities (on the example of Bukhara State Medical Institute (BSMI) and Tashkent State Dental Institute (TDSI)) and to explore the possibilities of organising dynamic monitoring of their health. during their studies.

Material and methods of research: In order to determine the level of students' health and the quality of medical care in family polyclinics, a questionnaire survey of students studying at BDMI and TDSI was conducted to determine their satisfaction with medical services.

The anonymous survey was conducted among 1st-3rd and final year students of both universities. The data were analysed taking into account the course and place of study as well as the gender of the students. The object of the study was 840 students studying at the above-mentioned universities.

Results of the study: In general, 28.6% of students of both universities belong to the I dispensary group - healthy, 23.1% of students belong to the II group - functionally healthy (healthy, but have risk factors for the development of chronic diseases) and to

the III group - 48.3% of students with chronic diseases of varying severity were registered.

Among the students of group III there were no patients in the stage of decompensation of the process, but there were patients in the stage of compensation and subcompensation. If by the end of the academic year there were 119 (42.5%) students with one or another chronic disease among the first-year students of both universities, then by the third year their number increased to 48.2%, and during the last year the former increased 1,3 times compared to the exchange rate and reached 54.3%. Using a questionnaire we obtained information on student illnesses in the last year, which, although very approximate, allowed us to obtain information on primary and general student illnesses. Primary morbidity per 1000 students surveyed increased from 307,1 in the first year to 410,7 in the final year. The general morbidity also increased from 507,1 in the first year to 721,4 per 1000 respondents in the last year, an increase of 1,4 times.

Thus, it can be noted that the majority of students at both universities have healthy physical development, but the number of students with a body mass index (BMI) above the norm prevails over the number of students with a BMI below the norm, and the higher the norm, the higher the number. Of course, this correlation seems so obvious. In addition, the number of students suffering from various forms of chronic diseases increases from course to course. Almost every fifth student suffers from anaemia, every tenth - one or another disease of the digestive organs, every second - diseases of vision and respiratory organs. Boys get sick 1,1 times more often than girls.

The deterioration of health of university students is associated not only with age and gender characteristics, but to a greater extent with risk factors affecting them in the process of education. These factors are both objective (educational process, domestic problems, ecology, etc.) and subjective, related to the personal lifestyle of each student. At the same time, lifestyle (adherence to a healthy lifestyle, bad habits, eating habits, sleeping habits, etc.) is of primary importance in changing the student's health.

When assessing the medical care seeking behaviour of students from both universities, it was found that the most frequent reasons for seeking medical care are acute respiratory diseases and acute respiratory viral infections. In terms of the number of visits to a doctor for acute diseases, the difference between institutions was insignificant - almost every fifth student indicated that he or she had visited a doctor for one or another acute disease during the last year.

When asked which doctor the student had visited during the last year, the following answers were received: dentist 42,4; family doctor 35,5%, ophthalmologist 17,3%; gynaecologist 13,0%; surgeon 12,0%; gastroenterologist and ent 11,5% each; neurologist 8,1%; cardiologist 7,6%; endocrinologist 5,4%; 14,4% for other specialities. A total of 2 health or disease specialists were visited by one student during the year.

38,3% of students gave a good assessment to the question about student satisfaction with the quality of primary medical and preventive care in family

polyclinics; 49,4% of students gave a satisfactory assessment; 12,3% were dissatisfied with the quality of treatment and prevention.

The main complaint about the quality of medical care is long queues at family polyclinics (30,5% of answers); delay in receiving care due to remoteness of the polyclinic (20,8%) or lack of time to visit it (18,0%); inattentiveness of the staff was reported by 17,7%, other complaints - by 22,0% of students.

Thus, one of the reasons for the deterioration of students' health is the lack of a unified methodological approach to preventive work among students and the absence of medical and health control taking into account their academic activities. It should be noted that there are no specific rules for the provision of medical care to students of higher education institutions. Often students are served in city polyclinics or at the place of temporary residence.

The lack of medical and preventive facilities for students in educational institutions is the main reason for the decline in the quality of medical services, preventive measures and medical examination.

As can be seen from the above, the ideal option for dynamic monitoring of students' health is the creation of student polyclinics or sanatoria in higher education institutions.

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