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THEORETICAL FOUNDATIONS AND METHODOLOGICAL PRINCIPLES PHYSICAL REHABILITATION

Resume: Physical rehabilitation is a non—drug, natural biological method, an integral part of medical rehabilitation. The goal and the tasks to be solved are determined by the doctor and the teacher, taking into account the indications and contraindications to therapeutic physical culture (exercise therapy).

therapeutic **Keywords**: rehabilitation, physical culture, indications and contraindications to physical therapy, patients.

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реабилитация Актуальность. Физическая немедикаментозный, естественно-биологический метод, составная часть медицинской реабилитации. Цель и решаемые задачи определяют врач и педагог с учетом показаний и противопоказаний к лечебной физической культуре (ЛФК).

Ключевые слова: реабилитация, лечебная физическая культура, показания и противопоказания к ЛФК, больные.

The purpose and objectives of physical rehabilitation. The main purpose of using means, forms and methods of physical culture in the complex treatment, rehabilitation of sick and weakened people after diseases, injuries, operations, especially after strokes, heart attacks — to help them get out of these states as effectively as possible with accessible, natural movements and exercises, to return to school, work, sports, and a full life.

Solved tasks in physical therapy: 1. Restoration of lost or impaired functions; 2. Correction (pathomorphosis) in deformations of the musculoskeletal system (ODA); 3. Increased joint mobility in arthritis, contractures; 4. Prevention of adhesive processes after surgical interventions; 5. Restoration of muscle tone and motor activity after strokes, with Cerebral palsy (cerebral palsy), paresis, paralysis; 6. Development of compensations for heart defects, after myocardial infarction; 7. Improvement of the function of external respiration, gastrointestinal tract after surgical interventions, dyskinesia; 8. Prolongation of remission periods during chronic diseases of the respiratory and cardiovascular systems; 9. Maximum recovery of physical and mental health, social adaptation to changed living conditions due to the disease; 10. Training of orthostatic mechanisms of regulation of the circulatory and respiratory system, increasing the endurance coefficient of the cardiorespiratory system; 11. Training of mechanisms of compensation and adaptation to physical, mental, social and industrial loads; 12. Increasing the effectiveness of the use of medicines (insulin, nitrates).

To achieve the goal and solve the tasks of physical rehabilitation, coordinated work of a doctor and a teacher at school, a physical therapy instructor in a medical institution, systematic medical and pedagogical control (MIC) in hospitals, polyclinics, sanatoriums, dispensaries, rest homes, boarding houses, rehabilitation centers, special internates, schools, technical schools, universities and at work is necessary.

Indications and contraindications to the appointment of physical therapy Physical therapy is a naturally biological method is always shown, there is no absolute rest, there is a dosage — from microdoses (elementary personal and everyday movements when washing, combing, eating) to medium and large physical loads: applied sports movements, exercises, games, swimming, walking, hiking, competitions. Temporary contraindications to the appointment of physical therapy are grouped by us as follows:1 Acute periods of diseases with high temperatures, fevers, chills, unstable mental and physical condition,

general exhaustion, weakening of the body, 2 Exacerbation of chronic diseases frequently recurring pain, dyskinetic, spastic attacks, crises, suffocation, muscle weakness, sharp headaches, 3 Tendency to thrombosis thrombophlebitis, endarteritis, 4 Neoplasms of a different nature, but before surgery, then you need physical therapy, 5 Intoxication of various types, both acute and chronic — flu, sore throats, sepsis, 6 Bleeding, 7 Advanced sclerosis vascular fragility

The means, forms and methods of physical culture used as rehabilitation, in relation to a sick or weakened organism, must be strictly dosed taking into account gender, age, diagnosis, physical fitness of the patient and the severity of the disease. To prescribe movements and exercises as a therapeutic agent, it is necessary to familiarize yourself with the history of the disease, the etiology of this disease, the pathogenesis of the disease, the form of its course, biochemical analyses and instrumental research data, to know possible complications. Due to the specifics of the therapeutic agent, it is necessary to conduct a functional test, identify the body's reaction to physical exertion, determine the recovery time by heart rate, respiration: conduct a survey on well-being and visual control of sweating, skin color and mucous membranes. Then, if there are no contraindications, the doctor determines the form of physical therapy and the forms of application; organizational and methodological principles; dosage and venue - intensive care unit, ward, physical therapy room, outdoor area; purpose and tasks to be solved. When composing a complex and choosing exercises, purposeful movements are necessarily turned off for: etiology of the disease (etiological complexes); symptoms (symptomatic complexes); prevention of complications; respiratory and articular gymnastics; training of orthostatic mechanisms, coordination, attention; prevention of gastrointestinal tract dysfunctions. By frequent colds are necessary recommend hardening in the form of rubdowns, air baths, dousing, rubbing, self-massage, contrast showers, walking barefoot, swimming. It is necessary to use the natural forces of nature for this — the whole spectrum of sunlight, water, air. The natural forces of nature contribute to increasing the range of adaptive reactions of cold and heat receptors, thermoregulation processes.

In acute myocardial infarctions, strokes, after cardiogenic shock states, surgical interventions, physical therapy is prescribed and carried out, starting with intensive care units. Temporary contraindications to the appointment. Physical therapy are:

- high fever, fever;
- unstable mental state;
- frequent bouts of pain, suffocation.

We have also developed and tested a test questionnaire for differentiating the diagnosis of the etiology of the disease, choosing the form of exercise therapy, and the dosage of physical exercises.

The problem of diagnosing the disease in the work of a practitioner is most relevant, the further course of the examination and the success of the prescribed treatment depend on its solution. The widespread use of a variety of laboratory and instrumental research methods cannot replace the diagnostic significance of anamnesis in identifying the primacy of etiological factors and, especially, in psychosomatic diseases; its psychotherapeutic role in the disposition of the patient and his confidence.

With the primacy of psychosomatic classes Physical therapy should be carried out in the gym, in open areas in groups of different ages, professional, different social adaptations. The emphasis in the exercises should be on attention, coordination, use outdoor games and elements of competitions, elements of choreography and dancing, do not make any critical remarks, but only express encouragement, emphasize their importance in overcoming the barriers of fear.

Prescribes exercise therapy by the attending physician with a note in the list of appointments of the medical history or in the polyclinic card. The physical therapy doctor starts the card according to form No. 042/Y — the card of the patient in the office of therapeutic physical culture. In preschool, school institutions, educational institutions there is an individual diagnostic card, a medical health sheet of a class or groups.

Physical therapy in the system of restorative treatment, unlike other methods of treatment, should gradually be promoted to the leading place to stabilize the therapeutic

and preventive effect. As the patient recovers, the drug dosage it decreases and reaches the minimum maintenance doses or is completely canceled. In physical therapy, on the contrary, they expand the motor the regime ranges from gentle to training and then systematically supportive. Supportive physical activity must be continued after recovery, since clinical and functional recovery, as a rule, do not coincide in terms of timing. After a stationary course of physical therapy, polyclinic, sanatorium-resort, educational institutions, industrial enterprises, dispensaries, rest homes and independent classes at home or in wellness centers, gyms, swimming pools under the supervision of a doctor join.

Conclusion. Physical rehabilitation is an integral part of medical rehabilitation using a wide arsenal of means, forms and methods of physical culture. The main goal of complex treatment is to restore the lost functions as effectively as possible by natural movements and exercises, to develop compensations, to socially and professionally adapt the patient to working conditions, everyday life.

The problem of diagnosing the disease by etiological factor in the work of a practical doctor is most relevant. The further selection of means and forms of physical rehabilitation, intensity and volume of movements and exercises depends on the primary component in the development of the disease, etiology. A variety of research methods cannot replace the diagnostic significance of anamnesis in identifying psychosomatic symptom complexes and determining treatment using physical rehabilitation tools.

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