## ARTERIAL GIPERTONIYA KASALLIGINING KELIB CHIQISH OMILLARI VA KLINIK KECHISH XUSUSIYATLARI

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**Abstract:** Worldwide, approximately 1.28 billion adults aged 30–79 years have hypertension, most of whom (two-thirds) live in low- or middle-income countries. About 46% of adults with hypertension do not know they have it. Less than half (42%) of adult patients with hypertension are diagnosed and treated. One in five (21%) adults with hypertension have the disease under control.[3,4]

**Key words:** Arterial hypertension, obesity, rational nutrition.

Relevance of the topic – Currently, hypertension is one of the most important and complex problems facing 21st century medicine. Prevention, early detection and effective treatment of this dangerous disease are among the urgent problems facing modern medicine. Eliminating the complications of the disease, alleviating its course, and thereby achieving the prolongation of life of patients with hypertension are urgent tasks for us, medical workers[1,2].

Excess body weight is one of the risk factors leading to the onset and development of cardiovascular diseases, including arterial hypertension (AH). Unlike other risk factors for AG, excess body weight is among the controllable factors, and its reduction or elimination is one of the non-drug treatment methods of the disease. Therefore, adherence to a healthy lifestyle is important in preventing arterial hypertension and reducing its complications[2].

Approximately 1.28 billion adults aged 30–79 years worldwide have hypertension, with the majority (two-thirds) living in low- and middle-income countries. Approximately 46% of adults with hypertension are unaware that they

have the disease. Less than half (42%) of adults with hypertension are diagnosed and treated. One in five (21%) adults with hypertension have their disease under control.[3,4]

Objectives of the study. The main objective of this study was to determine the prevalence of arterial hypertension in the population and to study its agerelated clinical course.

The study aimed to investigate the main factors influencing the development of arterial hypertension, including harmful habits (smoking, alcohol consumption, sedentary lifestyle), unhealthy and irrational diet, excess body weight, stress, and the impact of social networks and media on human health in the context of modern globalization.

Also, one of the important areas of the study is the study of the lifestyle of patients with arterial hypertension, the stages of development of the disease and its complications.

Based on the results of the study, scientific and practical conclusions are given aimed at early detection of hypertension-related problems and improving preventive measures. At the same time, one of the goals of this work is to develop healthy lifestyle measures aimed at the population to reduce the factors that predispose to arterial hypertension.

Materials and methods of the study. We conducted our study during the winter training period in the Department of Arterial Hypertension and the Department of Cardiac Arrhythmias of the Andijan branch of the R.I.K.I.A.T.M. Our observations were conducted on 80 patients among the population of the region who complained of increased blood pressure. The average age of the patients was  $60\pm5$ , of which 35 (44%) were men and 45 (56%) were women. We recorded the vital and disease-specific anamnesis of our patients, examination results in the observation card during treatment. We statistically analyzed the health indicators and morbidity of the patients.

Results and their analysis. The results showed that the complaints of the patients in our study when they came to the hospital were headache in 75 (94%), dizziness in 20 (25%), tinnitus in 48 (60%), neck pain in 70 (87.5%), and numbness and coldness in the limbs when blood pressure increased in 30 (37.5%). 48 (60%) of the patients regularly take some type of antihypertensive medication, 20 (25%) patients take it only when blood pressure increases, and the remaining 12 (15%) patients do not take such medications. 65 (81.2%) of the patients have a problem with excess weight. When additional somatic diseases of patients were studied, 27 (34%) of them suffered from diabetes mellitus, 32 (40%) had chronic cholecystitis. 68 (85%) of patients had an irrational diet, their daily diet included fatty, spicy and doughy foods.

When we studied the ECG results of the patients under our observation, signs of left ventricular hypertrophy were observed in 45 (56%). When tests were performed with dosed physical loads to determine their individual tolerance to physical exertion, latent coronary insufficiency was detected in 12 (27%) patients, and variable heart rhythm disturbances in 18 (40%).

Conclusions: The conducted studies helped to identify the high incidence of arterial hypertension and the main factors affecting it. The results showed that:

Arterial hypertension is associated with excess body weight in 65% of patients, which is confirmed as a significant risk factor for the development of this disease.

85% of patients have irrational eating habits, and excessive consumption of fatty, spicy and carbohydrate-rich foods contributes to the development of diseases such as hypertension, obesity and diabetes.

56% of the patients participating in the study had signs of chronic heart failure, which confirms the severity of hypertension complications.

Electrocardiographic (ECG) examinations revealed left ventricular hypertrophy in 56% of patients, which is associated with an increase in the load on the cardiovascular system.

Individual tolerance tests to physical exertion revealed latent coronary insufficiency in 27% of patients and cardiac arrhythmias in 40%, which indicates the urgency of preventive and therapeutic measures.

The results once again confirm the need to form a healthy lifestyle, promote the principles of rational nutrition, and regularly monitor patients in order to prevent and alleviate the course of arterial hypertension. These aspects are of great importance in reducing the spread of the disease and improving the quality of life of patients.

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