



HISTORY OF MEDICAL AVIATION IN THE UZBEKISTAN SSR

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ABSTRACT	KEYWORDS
This article describes the history of the emergence and development of medical aviation in the Uzbek SSR. It provides detailed information about medical assistance in aviation since the 30s of the 20th century in the history of our country, the mission of medical aviation, the activities of medical aviation, the aircraft used, the established aviation stations, and the reforms carried out in the field.	<i>air transport, G. Sedov expedition, medical aviation, medical aircraft, medical aviation stations, evacuation, medical aid, "air ambulance".</i>

For the first time from sanitary aviation in Russia in 1914 G. During the search for the Sedov expedition and the delivery of medicines to the victims, a number of flights were made to rescue people. Later, during the civil war, i.e. in 1918-1919, cases of transporting the wounded and delivering them to the desired destination happened several times. During the fight against oppressors in the 20s of the 20th century, medical aviation was used to evacuate the wounded from the Central Asian republics, especially remote mountainous regions.

LITERATURE ANALYSIS AND METHODOLOGY

Researcher in this field F. Narzullaev in his book "Wings of Uzbekistan", S. I. Umarov and I. I. In the manual entitled "Sanitarnaya aviatsiya na slujbe zdrovokhraneniya Uzbekistana" by the Ilinskys and the researcher A. Yu. Gazinazarov provided information on the history and development processes of medical aviation in Uzbekistan in his scientific pamphlet "Civil Aviation and Economic Uzbekistan".

RESULTS

In the conditions of Central Asia, in particular, in Uzbekistan, the medical plane was used to bring the sick and wounded from remote areas with no transport infrastructure. Because it was usually possible to go on mountain roads only with horses or small carts. In such conditions, the patient being evacuated may be only slightly injured. It was also used not only between settlements, but also during the evacuation of the sick and wounded, the provision of medical aid to separate parts of the troops and garrisons, emergency surgery and other types of medical services.

In 1924, 5 doctors and 64 kg of medicine were delivered from Tashkent to Khorezm, in 1925, 3 patients were evacuated from remote villages to Termiz and Tashkent. In 1926, a doctor was taken from Koko to Kolob, Tajikistan, and 3 wounded people were taken from the villages to Khiva in order to provide urgent care to the patient and to evacuate him. These works created the foundation for the organization and development of medical aviation in Uzbekistan for providing medical assistance.

In Uzbekistan in 1928-1929, several flights were carried out that confirmed the wide possibilities of using medical aviation for urgent evacuation of victims in specialized medical institutions. At that time, special medical planes did not exist, and ordinary passenger planes were used to transport the sick and wounded. The first sanitary plane that appeared in our country was the plane "K-3" (carrying 2 patients on a stretcher and 1 seat), the plane "K-5" (carrying 4 patients on a stretcher and 1 seat), the hydroplane "Sh-2" - amphibious aircraft were used.

In 1933, the first sanitary aviation stations (SATs) were established in the USSR. Initially, SATs units were established in Moscow, Leningrad, Kharkiv, Gorky, Novosibirsk, Khabarovsk and Donetsk, and in 1935 in 20 other regions. The first sanitary aviation station in Central Asia was opened in Tashkent in 1934 under the Institute of Emergency Aid. Initially, flights from SATs were used only for the purpose of providing emergency medical care, evacuation of patients, delivery of medicines, and from 1937, scheduled medical care. In the middle of 1934, Uzbek pilots took part in transporting doctors and specialists to the villages of Khanka and Hazorasp, where cholera was spreading. These specialists quickly delivered the necessary means for the fight against cholera from Kogon to Khorezm by plane, as a result of which this disease was quickly eradicated [5. B.4] .

Within the Ministry of Health, air stations are established in all regions. Special sanitary planes piloted by the best pilots were on duty at the airfields.

Until 1938, sanitary planes were operated by the International Red Cross Society in cooperation with the People's Commissariat of Health of the former Union, then the aircraft fleet and property belonging to the SATs was transferred to the Civil Air Fleet Administration. The newly established stations are tasked with serving patients requiring urgent surgical care and patients with acute illnesses requiring emergency medical care or air evacuation.

By 1940, sanitary aviation served 43 regions and republics under the former Union; there were 76 air "ambulance" stations in the country; During 1934-1940, more than 23,000 specialists performed 8,553 operations, 1,447 blood transfusions, took about 100,000 ambulatory patients, and evacuated 11,749 inpatients.

With the development of sanitary aviation in the country, the number of its units has also increased in Uzbekistan. The republican sanitary aviation station established in Tashkent in 1934 initially had two "U-2" airplanes and one "P-5" airplane. The station's planes made 9 flights to different regions of the republic in 1935, 104 in 1936, 50 in 1938, and 85 in 1939 [6. B. 8] .

In the Uzbek SSR, not a single republican station was able to fulfill all the tasks assigned to it, therefore, independent aviation stations were established on the basis of regional hospitals to provide medical assistance to remote areas. The first regional station was opened in 1948 in Samarkand. Later, such stations were established in other regional centers of the Uzbek SSR, and their branches were established in Tomdi district of Bukhara region, Jizzakh and Moynok cities of Karakalpakstan ASSR. Air transport has improved and increased the provision of aviation and medical services to the population of Uzbekistan. There is an air ambulance station in each region of the republic, where applications are received for the urgent delivery of a doctor to a seriously ill person or the

transportation of a patient in need of urgent medical assistance. Air "ambulance" was particularly active in the mountainous and desert regions of Uzbekistan. For example, in 1965, Uzbek air ambulances made about 8,000 flights and evacuated 4,000 patients [4. B. 43] .

DISCUSSION

It should be noted that the impact of several factors should be taken into account when evaluating various types of sanitary transport work. For example, the population of the Uzbek SSR is extremely unevenly distributed across the territory of the republic. Therefore, the use of air transport has great prospects in large areas of the republic, which are characterized by relatively impassable roads, if there is a sufficient number of landing places. In a number of foothills, the use of helicopters is most promising during snow drifts, muddy roads, and floods. However, the availability of quality highways, the use of surface transport, especially ambulances, even at night or in bad weather is an indispensable factor . Finally, economic factors affect the frequency of use of airplanes and helicopters. For example, according to data from 1973, an hourly flight of An-2 aircraft, not adapted for medical purposes, was 90 rubles, and a helicopter was 200 rubles. Meanwhile, relatively little funds were allocated for these purposes. This led to a downward trend in the share of sanitary tasks performed by air transport in the country since the 1970s.

CONCLUSION

In conclusion, the organization of medical aviation in the Uzbek SSR greatly helped the population of areas that are difficult to reach by transport. Air transport can be seen to have played a role in bringing many patients to central and medically advanced areas.

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