



## **IMPROVING PATRONAGE SERVICES FOR EXPECTANT MOTHERS AND CHILDREN, PRIMARY PREVENTION OF CONGENITAL ANOMALIES**

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### **A B S T R A C T**

The prevalence of congenital anomalies among children, the study of risk factors and the development of a scientifically based system of measures to improve the patronage of future mothers and children to eliminate them.

### **K E Y W O R D S**

### **Introduction**

#### **Research objectives:**

Dynamic study of the prevalence of congenital anomalies among children of young and gender groups in Tashkent.

To study the living conditions and lifestyle that cause congenital anomalies and to identify leading risk factors.

To study the role of the medical (community) nurse in monitoring congenital malformations in children, carrying out preventive measures.

To develop and implement a set of measures to further improve the system of patronage among expectant mothers and children in the prevention of birth defects, to improve its quality and effectiveness.

#### **Object of research:**

1. Territories of the Republic of Uzbekistan and prevalent congenital anomalies

2.600 community nurses working in family clinics in 4 districts of Tashkent.

3.300 children with congenital anomalies (incident group) and 300 healthy children (control group) in Tashkent;

**Subject of research:** Prevalence, structure, risk factors of congenital anomalies in children, living conditions and lifestyle of sick children and their families. The structure, scope, quality and effectiveness of the work of a community health nurse in the prevention of congenital anomalies.

**Research methods.** Modern methods of medicine based on epidemiological, socio-hygienic, sociological, statistical, logistic regression and other evidence are widely used.

**The scientific novelty** of the research is:

- For the first time, a systematic approach to the prevention and treatment of congenital anomalies in primary health care (PHC) is based on medical and organizational proposals for the comprehensive rehabilitation of mothers and children;
- Leading risk factors affecting the prevalence and origin and development of birth defects in children living in Tashkent for the first time in the country: mother's age, education, family relationship, poor family environment, maternal complications during pregnancy and childbirth, maternal extragenetic diseases when detected.
- A table has been developed to help develop a set of systematic, individual and group measures for the prevention, early detection, early diagnosis and treatment of children's anomalies.

Deficiencies that negatively affect the quality of care provided to expectant mothers and children in primary health care: nurses monitor the health of expectant mothers and children.

Due to modern requirements, great attention is paid to the early diagnosis of congenital anomalies in the primary care, prevention of congenital anomalies and prevention of complications. It is impossible to do this without the use of the skills and knowledge of the patient and his relatives to train nurses, their services to pregnant women, the implementation of technology and manipulations, simple manipulations, competent medical care to the doctor. In this regard, it is important to develop clear evaluation criteria for the quality of medical care, its evaluation and management, to exclude different interpretations.

The large-scale measures implemented on the basis of the concept of "healthy mother - healthy child" serve as an important factor in strengthening reproductive health, forming a healthy family, prevention of hereditary diseases. A healthy child is the fruit of a healthy family. Therefore, it is important to pay serious attention to the health and psyche of women of childbearing age during pregnancy, to raise the medical culture in the family. Now, at the beginning of the third millennium, there is a tendency to increase social demand for a healthy lifestyle in all developed countries. One aspect of the work of every midwife is the work of hygienic education and training of the population.

The main task of the patronage nurse is to conduct regular patronage work among the population, primarily women of childbearing age and pregnant women, children, as well as lonely elderly people, people with disabilities, patients with chronic diseases in need of assistance and social protection.

Nursing is an independent profession that has the potential to be as important as medical work, providing growth and independent decision-making within its profession.

In many respects, the patronage nurse should meet the needs of the population rather than the requirements of the health system. He should become a well-educated professional, an equal partner, work independently with the population, contributing to the strengthening of public health.

Nowadays, leading nurses have to deal with many issues related to the processing of large amounts of different information. In this sense, not all managers are equipped with modern tools for collecting, processing and transmitting information, they almost do not receive the latest normative documents on the organization of the work of nursing staff.

The purpose of the study is to study in depth the role of community nurses in the formation of a healthy lifestyle among the contingent of the population served and the prevention of congenital anomalies.

Globally, congenital anomalies prevalent among the population are an important medical and social problem. They have doubled in the last decade of the twentieth century and have played a significant

role in the pathology and mortality of infancy, perinatal and childhood. Today, 1,800 out of 10,000 children worldwide are born with congenital anomalies.

Despite the progress made in further deepening health care reform, strengthening and protecting the health of the population in our country, congenital anomalies (developmental defects) play a leading role in the structure of morbidity, disability and death of children. According to medical statistics in Uzbekistan, this figure is as follows: Infant (under 1 year) mortality rate in 2019 was 10,7 per 1,000 live births, of which the main cause of death - deaths from perinatal events - 5,94, respiratory diseases of the organs - 2,44, congenital anomalies - 1,11, infectious and parasitic diseases - 0,35, other diseases - 0,84.

The results of a study conducted by the Ministry of Health of the Republic of Uzbekistan in collaboration with the World Health Organization in 2015-2019 among the population aged 18-45 years showed:

- ✓  Two-thirds of the population (67%) consume insufficient amounts of vegetables and fruits every day (less than 400 grams);
- ✓  Half of the population has bad habits (drinking alcohol, smoking, etc.);
- ✓  One in five citizens was diagnosed with co-morbidities (anemia, thyroid disease and other diseases);
- ✓  46% of the population has high cholesterol levels;
- ✓  42% of men and 1,5% of women smoke;
- ✓  One third of the population had high blood pressure ( $\geq 140 / 90$  mm Hg);
- ✓  9% of the population has high fasting glucose levels (16,1 mol / l);
- ✓  One-fifth of the population aged 40-64 years is at risk of developing cardiovascular disease over a decade;
- ✓  The average salt intake of the population is 14,6 grams per day, which is 3 times higher than the level recommended by the World Health Organization (maximum 5 grams per day).
- ✓  According to the World Health Organization, the economic damage caused by non-communicable diseases in 2016 amounted to 9,3 trillion soums, which is 4,7% of the country's GDP.

According to experts, 31% of births with congenital anomalies in Uzbekistan can be prevented or delayed by improving the system of organization and provision of care for the prevention of risk factors and early detection of congenital anomalies.

Currently, there are the following shortcomings in ensuring the health of the fetus among the population of the republic:

- ❖  Not planning a pregnancy and getting pregnant without preparing for pregnancy;
- ❖  Failure to follow the interval between children;
- ❖  Failure to undergo timely medical examinations and under the supervision of a doctor close to the birth of the fetus;
- ❖  Low levels of vitamins and minerals in food;
- Do not give up harmful habits during pregnancy;

The system of early detection of patients prone to congenital anomalies in primary health care facilities is insufficiently developed, advice on preparation of women of reproductive age for pregnancy, healthy nutrition in early pregnancy, physical activity, proper intake of drugs and vitamins, smoking and alcohol withdrawal not at the level of demand.

Taking into account the positive results obtained, the experts of the World Health Organization justified the expediency of introducing this practice in the practice of all primary health care facilities of the country. At present, the promotion of citizens to lead a healthy lifestyle is not carried out at the level of demand. The measures taken in this direction have only quantitative and statistical significance. The duration of information and educational campaigns is short-term and irregular. International experience shows that such measures are combined with other measures such as improving the legal framework for creating a healthy environment, applying incentives for the production and sale of healthy food, changing the lifestyle of the population or motivating employers to create a healthy environment for employees. can only be effective when visited. Prevention of congenital anomalies There is a lack of training and retraining of specialists in the field of maintaining a healthy lifestyle and increasing physical activity among pregnant women.

Numerous epidemiological studies have shown that the detection of many early congenital anomalies can prevent premature risk factors with the help of effective prophylactic programs performed on a regular basis. Rehabilitation programs for at-risk pregnant women have been actively introduced in primary prevention education, and the number of cases of congenital anomalies has decreased in countries where educational technologies are implemented (Canada, UK, USA, Finland). The main components of rehabilitation programs are physical exercise, preventive training (teaching pregnant women a healthy lifestyle) and psychological support.

Most congenital anomalies cannot be completely cured at present, but it is possible to monitor the course of many anomalies and ensure that their consequences are prevented, prolonging patients 'lives and improving their quality of life. However, no matter how wide the possibilities of modern medicine, it is impossible to successfully control congenital anomalies without the active participation of patients. Educating pregnant women means explaining to them the causes of the illness of the unborn child, implementing a healthy lifestyle, helping them understand how to take proper care.

The results of a medical-social study showed that the majority of children under control (82,5%) were in a state of excessive psycho-emotional nervousness.

Studies have shown that patients' illnesses and their inadequate response to intervention, indifference to the recommendations given on the formation of a healthy lifestyle are conditioned by their low level of education and socio-economic status and low medical activity.

In children with congenital anomalies Congenital anomalies of the circulatory system (32,0%) Congenital anomalies of the nervous system (24,0%), Congenital anomalies of the eyes, ears, face and neck (23,0%) Congenital anomalies of the labia and palate (12,0%) The musculoskeletal system is associated with congenital anomalies (5%) and unclassified chromosomal abnormalities (4%) in other reguns. According to our data, 62,0% of patients had low levels of physical activity, of which 12,0% had limited mobility due to the disease.

Studies show that 70,0% of men and women in all age groups have below the minimum level of physical activity that can have a positive effect on health.

The level of harmful habits among respondents is high: 31,9% of patients smoke. Smoking contributes 35,7% of the population's attributive risk of congenital anomalies, which is a major cause of congenital malformations in the fetus, along with dyslipidemia and chronic stress.

Observational studies have shown a strong correlation between the prevalence of smoking and general congenital anomalies and birth rates. In repeated interviews and psychological support, this figure

increases by another 15%. The impact of conversations on the proportion of smokers seems to be low, but a 2% reduction in smoking alone would be statistically significant for public health per year.

### **The practical results of the study are as follows:**

At the first level of the health care system, a comprehensive, systematic approach to primary, secondary and tertiary prevention of the disease has been developed;

On the basis of this program, an algorithm of measures for early detection and prevention of congenital anomalies, as well as practical recommendations for the formation of healthy lifestyle skills among the population, improving the care of expectant mothers and children.

Identification of risk groups of the population as a result of the use of a prognostic table that allows a comprehensive assessment of the level of risk factors influencing the formation of congenital anomalies in the activities of family nurses in family clinics, differentiated according to their risk level, development of individual plan measures.

**The reliability of the** ienic, sociological, chronometric, sanitary-statistical, expert assessments used in **research results** is confirmed by modern complementary epidemiological, socio-hygscientific research and the adequacy of the volume and number of primary materials, improved analytical and prognostic indicators, reasonable selection of statistical analysis methods. , the correct application, the fact that the research materials have been discussed at national and international conferences, as well as published in authoritative scientific publications show the reliability and validity of the conclusions and research results.

### **Scientific and practical significance of research results.**

The scientific significance of the results of the study is explained by the fact that the conclusions and recommendations received play an important role in the development of patronage services and contribute to the optimization and improvement of medical nursing care for expectant mothers and children.

The practical significance of the results of the study is that a number of recommendations have been developed and implemented in health care to improve the care of expectant mothers and children. increase the level of satisfaction with the service. The prevention of congenital anomalies is explained by the creation of a prognostic table that allows them to be divided into leading risk groups, to conduct targeted dispensary control.

### **References**

1. Mamatqulov B.M. et al. Risk Factors for Congenital Anomalies in Children and the Role of the Patronage Nurse //Annals of the Romanian Society for Cell Biology. – 2021. – C. 8803-8815.
2. Касимова Д.А. Медико-социальные аспекты детской инвалидности и пути её снижения (по материалам г. Ташкента). – 2012.
3. Касимова Д.А., Маматкулов Б.М. Комплексное изучение состояние здоровья, прогнозирование факторов риска и разработка многоуровневой программы профилактики детской инвалидности //Молодой ученый. – 2015. – №. 15. – С. 283-287.