

ASSESSMENT OF THE QUALITY OF LIFE OF PATIENTS WITH RHEUMATOID ARTHRITIS

*Tursunova M.A, Sattarov O. Kh.
Assistant of the Department of Propaedeutics of
Internal Diseases
Andijan State Medical Institute
Andijan, Uzbekistan.*

ABSTRACT

This article evaluates the quality of life of patients with rheumatoid arthritis. As a result of the study, it was revealed that with rheumatoid arthritis, the quality of life of patients is significantly reduced, the development of the disease is most susceptible to women over 50 years of age. Rheumatoid arthritis has a negative impact not only on the somatic, but also on the psychological component of health. Often this disease acquires a chronic course. Assessment of the quality of life of patients with rheumatoid arthritis will allow for targeted preventive measures to improve their physical and psycho-emotional state.

Keywords: rheumatoid arthritis, quality of life, a patient.

Introduction

Quality of life is a multidimensional and subjective concept that includes psychological, social, physical and spiritual well-being. Quality of life reflects the impact of the disease and treatment on the patient's condition. It is especially important to assess the quality of life in chronic diseases requiring long-term or lifelong therapy [1, p. 121].

Rheumatoid arthritis is a systemic immune-mediated chronic inflammatory disease of the connective tissue, affecting not only the musculoskeletal region, but also characterized by a high risk of developing comorbid conditions, which, in

turn, lead to a more active and severe course of rheumatoid arthritis and severe functional impairment [2 , With. 609].

Relevance. Rheumatoid arthritis is the most common among all types of arthritis, and it is also the most common disease in the group of rheumatic diseases. In 2018, 312,631 patients with rheumatoid arthritis were registered in Russia (212.8 per 100,000 people). According to a number of expert estimates, the number of patients with rheumatoid arthritis may be significantly higher than official statistics and reach 671 thousand people. Rheumatoid arthritis leads to severe disability in 16% of patients within 5 years of the disease, despite treatment with "basic" drugs, after 20 years from the onset of the disease, approximately 90% of patients become more or less disabled, and a third become completely disabled [2 , With. 609].

The methodology for assessing the quality of life of patients should take into account various areas of health, such as physical activity, communication, daily activities, and others. Therefore, it is necessary to use questionnaires that are quite simple and effective. The study of the quality of life of patients with rheumatoid arthritis will provide information not only about the physical condition of the patient, but also to determine his psychological and social status. A number of studies have already shown that rheumatoid arthritis significantly impairs the quality of life of patients [3, p. 37].

The purpose of this study is to study the impact of rheumatoid arthritis on the quality of life of patients and to determine the factors influencing the development of rheumatoid arthritis.

Materials and methods. The study included 50 patients treated in the rheumatology department of the ASMI aged 36 to 73 years with a diagnosis of rheumatoid arthritis with a disease duration of 1 to 14 years and 50 healthy people aged 20 to 60 years. This group of patients was surveyed using the Medical Quality

of Life Questionnaire . Outcomes Study Short Form 36 (MOS-SF-36). The SF-36 questionnaire is one of the commonly used quality of life questionnaires . 36 items of the questionnaire are grouped into 8 scales, which, in turn, are combined into two indicators "physical component of health" and "psychological component of health". The physical component of health (Physical health - PH) make up the scales: physical functioning, role functioning due to physical condition, pain intensity, general health. The psychological component of health (Mental Health - MH) make up the following scales: mental health, role functioning due to emotional state, social functioning, vitality. Then the responses were recoded, and to obtain the values of each scale, the recoded answers were summarized according to the methodology proposed by the authors of the questionnaire [4, p. 2].

After the survey, a comparative analysis was carried out according to the following indicators: age, duration of the disease and gender.

Results and discussion . The average age of patients in the rheumatology department was 51 years. The average duration of the disease is 9 years. Men - 18, women - 32.

This study showed significant and statistically significant differences in all parameters of quality of life in patients with rheumatoid arthritis compared with the control group. The mean PH value in patients with rheumatoid arthritis was 33.33 (± 12.3), while in healthy people this figure was 67.6 (± 6.33). The mean value of MH in patients with rheumatoid arthritis was 36.65 (± 13.15), in healthy people it was 71.65 (± 6.8).

Depending on the duration of the course of rheumatoid arthritis, quality of life indicators such as physical functioning, pain intensity during daily activities and general health were significantly lower than in the control group. When assessing mental health, vitality and social activity were most significantly reduced. The

lowest level of quality of life was observed in patients with rheumatoid arthritis with a longer course of the disease, both in terms of physical and psychological components of health. With increasing age of patients, indicators of physical health scales decreased, while indicators of the mental component improved. This may be due to the fact that at the beginning of the disease, tension, decreased mood, and increased sensitivity to stress factors predominate, but over time, patients adapt to the disease and the level of anxiety decreases, therefore, QoL indicators increase.

Conclusion

As a result of the study, it was found that women over 50 years of age are more likely to suffer from rheumatoid arthritis. Rheumatoid arthritis leads not only to physical discomfort due to chronic pain and impaired joint mobility, but also significantly affects the psychological state of the patient. In patients with rheumatoid arthritis, social functioning also suffers. The longer the duration of the disease, the more significantly the quality of life of the patient decreases.

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