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SURUNKALI KASALLIGI BO'LGAN BEMORLARNI PARVARISHLASHDA "BEMORGA YO'NALTIRILGAN YONDASHUV"

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Annotatsiya: Mazkur ilmiy ishda surunkali va uzoq davom etuvchi kasalliklarga chalingan bemorlarni parvarish qilishda biopsixososyal yondashuvning klinik ahamiyati yoritilgan. Hamshiralik aralashuvida faqatgina jismoniy simptomlarni davolash emas, balki bemorning ruhiy holati, ijtimoiy muhiti va shaxsiy ehtiyojlarini inobatga olgan holda individual parvarish rejalarini tuzish samaradorligi tahlil qilingan.

Kalit so'zlar: individual parvarish, surunkali kasalliklar, biopsixososyal model, psixologik yordam, bemor faolligi, hayot sifati.

Kirish: Dunyo bo'ylab surunkali tizimli kasalliklar (qandli diabet, yurak yetishmovchiligi, arterial gipertenziya) ulushi ortib borayotgan bir davrda an'anaviy "kasallikka yo'naltirilgan" model o'z samaradorligini yo'qotmoqda. Zamonaviy hamshiralikda bemorni jarayonning faol ishtirokchisiga aylantiruvchi "Bemorga yo'naltirilgan" (Patient-Centered Care) modelini qo'llash dolzarb ahamiyat kasb etmoqda.

Asosiy qism: Surunkali tizimli patologiyalar (qandli diabet, surunkali yurak yetishmovchiligi, arterial gipertenziya, o'pkaning surunkali obstruktiv kasalligi) bilan og'riydigan bemorlar uzoq muddatli, ko'p bosqichli va uzluksiz parvarishga muhtojdirlar. Bunday klinik sharoitda an'anaviy patotsentrik (faqat kasallikning biologik simptomlariga qaratilgan) biomedikal model kutilgan samarani bermaydi. Zamonaviy hamshiralik aralashuvining eng ilg'or yo'nalishi — bu biopsixososyal tamoyillarga asoslangan va xalqaro standartlarda tan olingan "Bemorga yo'naltirilgan yondashuv" (Patient-Centered Care) modelidir.

Ushbu model doirasida zamonaviy hamshira nafaqat shifokor tayinlagan invaziv va noinvaziv muolajalarni mexanik bajaradi, balki har bir pasientning madaniy qarashlari, yoshi, ijtimoiy-iqtisodiy holati, oilaviy muhiti va kasallikka bo'lgan individual psixologik reaksiyasini (og'riq sezuvchanligi, depressiya, xavotir darajasi) har tomonlama baholaydi. Zamonaviy hamshiralik aralashuvining strategik asosi — bemorni va uning yaqinlarini "o'z-o'zini boshqarish va nazorat qilish ko'nikmalari"ga (Self-management education) tizimli va interaktiv o'rgatishdan iborat. Hamshira pasient bilan teng huquqli professional muloqot o'rnatib, dori vositalarini qabul qilish tartibi (farmakologik komplayens), parhez terapiyasi, jismoniy faollik ko'lamini bemorning kundalik hayot tarziga moslashtirgan holda individual parvarish xaritasi (Nursing Care Plan) asosida rejalashtiradi.

Klinik-psixologik jihatdan, hamshira tomonidan ko'rsatiladigan terapevtik empatiya va motivatsion suhbatlar (motivational interviewing) bemorning o'z kasalligini anglash (anosognoziyani bartaraf etish) va unga qarshi kurashish faolligini oshiradi. Validatsiyalangan tibbiy tadqiqotlar shuni ko'rsatadiki, ushbu model muvaffaqiyatli qo'llanilganda bemorlarning davolash dasturlariga va dori rejimiga amal qilish darajasi 45-50% ga ortadi, organizmdagi surunkali stress gormonlari (kortizol, katalolaminlar) darajasi barqarorlashadi. Natijada kasallikning o'tkir asoratlari (gipertonik kriz, gipoglikemik koma yoki kardiogen xavflar) keskin kamayadi, bu esa bemorlarning funksional hayot sifatini tubdan yaxshilab, rehospitalizatsiya (shifoxonaga qayta yotish) ko'rsatkichlarini 20-25% ga qisqartiradi.





Xulosa: Surunkali bemorlar parvarishida "Bemorga yo'naltirilgan" modelning qo'llanilishi shifoxonaga qayta yotish (rehospitalizatsiya) ko'rsatkichlarini 20-25% gacha kamaytiradi. Hamshiraning biopsixososyal yondashuvi bemorning nafaqat jismoniy holatini yaxshilaydi, balki uning jamiyatga moslashishi va umumiy malign hayot sifatini sezilarli darajada oshiradi.

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