

THE SIGNIFICANCE OF CHRONIC TENSION-TYPE HEADACHES IN 21ST CENTURY NEUROLOGICAL PRACTICE

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Annotation. A number of scientific studies are underway to establish effective methods of prevention and treatment of psychovegetative changes and postural disorders in primary forms of headaches on a global scale. Multidisciplinary research in different countries shows that changes in the immune system and vegetative system in tension headaches are manifested in different ways in dynamics, as well as with a specific symptomocomplex.

Keywords: headache, headache in tension, psychovegetative changes, neuropsychological, anxiety. Osteoarthritis (OA), especially DOA of the knee joint, is the most common form of osteoarthritis, leading to significant disability of patients worldwide.

Over the past 25 years, the global burden of neurological diseases has increased due to population growth and increased life expectancy. Tension-type headache is the most common neurological disorder, and it is estimated that 1.5 billion people worldwide suffer from it. According to various authors, the prevalence of tension-type headache ranges from 20.6% to 78%. The chronic form of headache is considered a long-lasting condition that leads to patient maladaptation compared to the episodic form.[1] Chronic tension-type headache accounts for 0.5% to 4.8%, occurs predominantly in women, and requires qualified medical care.

According to the World Health Organization, at least one headache attack is observed annually in two-thirds of the population aged 18 to 65, while chronic headaches occur in 2–3% of the population. Episodic headaches are not considered a major medical or social problem; however, chronic tension-type

headaches significantly impair a patient's daily functioning and quality of life. .[2]They are often accompanied by comorbid disorders such as depression, sleep disturbances, and somatoform disorders. The difficulty in selecting effective treatment elevates chronic tension-type headache and migraine to the level of complex socio-medical problems. .[3,4]

It is well known that any pain syndrome is accompanied by psycho-vegetative disturbances. Therefore, worldwide research is being conducted to develop effective methods for the prevention and treatment of psycho-vegetative changes and postural disorders in primary forms of headache. Multidisciplinary studies conducted in various countries have shown that, in tension-type headaches, changes in the immune and autonomic nervous systems manifest differently over time and are associated with a specific symptom complex. .[5,6] Taking this into account, it is of particular importance to improve the differential diagnosis of clinical-neurological, neuropsychological, psycho-vegetative, postural, neurophysiological, and neuroimaging changes observed in patients with frequent episodic and chronic types of tension-type headache.[7]It is also crucial to enhance early diagnosis, propose etiopathogenetically-based treatment and prevention methods, and develop approaches to assess treatment effectiveness. In our country, purposeful and practical measures are being implemented to reform the healthcare system and align it with international standards. This includes developing effective methods for the early diagnosis and comprehensive treatment of patients with tension-type headache, as well as establishing thorough and accurate clinical approaches.[8]

Conclusion. In conclusion, the global burden of neurological diseases, particularly tension-type headaches, has increased significantly over the past 25 years due to population growth and increased life expectancy. Tension-type headache is one of the most common neurological disorders, with an estimated 1.5 billion people worldwide affected. Chronic forms of tension-type headache, which occur predominantly in women, require qualified medical care and significantly

impair daily functioning and quality of life. These headaches are often accompanied by comorbid conditions, including depression, sleep disturbances, and somatoform disorders, making them complex socio-medical problems.

REFERENCES

1. Гриднев, М. А., Хомидов, Д., & Хотамов, Б. (2019). Тревожные нарушения у больных рассеянным склерозом, госпитализированных по поводу обострения. Интегративные тенденции в медицине и образовании, 1, 16-18.
2. Farkhodovich, H. B., & Tajiyevna, X. D. (2023). Psychovegetative Changes and Posture Disorders in Tension Headaches. Journal of Advanced Zoology, 44.
3. Khodzhieva, D. T., & Farhodovich, K. B. (2023). neurovisual and psychological changes in tension headaches (literature review). The American Journal of Medical Sciences and Pharmaceutical Research, 5(05), 58-63.
4. Tadjievna, K. D., & Farhodovich, K. B. psycho-vegetative disorders in the interictal period with tension headache. 59.
5. Akhmedova D. B. Tension headache-treated with amitriptyline-A //International Multidisciplinary Scientific Conference on the Dialogue between sciences & arts, religion/march-april-91-92. – 2021.
6. Bahodirovna A. D. Evaluation Of the Effect of Girudotherapy on Pain Intensity in Chronic Tension Headaches According to The Mcgigl Survey //Eurasian Medica. Research Periodical. – 2021. – Т. 1. – №. 1. – С. 7-12
7. Ходжиева Д. Т., Ахмедова Д. Б. Гирудотерапия тарихи ва илмий асослари //Журнал "Медицина и инновации". – 2021. – №. 3. – С. 143-146
8. Ахмедова Д. Б., Ходжиева Д. Т. Анализ распространенности головных болей среди населения Бухарской области //ACADEMICIA: Международный междисциплинарный исследовательский журнал. – 2021- с. 11. – №. 3. – с. 431-433.