



## THE RELATIONSHIP OF THE EMOTIONAL SPHERE AND THE ORGANISM IN CHRONIC DISEASES

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**Abstract:** The article analyzes the relationship between the emotional sphere and the organism in chronic diseases (hepatitis C), the mechanisms responsible for causing somatic diseases in the organism, the stages of the psychological reaction of patients, and the internal picture of the disease.

**Key words:** emotional sphere, somatopsychics, psychosomatics, physiological and psychological reaction, loss syndrome, depression, isolation.

The World Health Organization considers health to be related to physiological, cognitive and social factors and defines human health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. Currently, psychosomatic and somatopsychic diseases caused by the participation of psychological factors are attracting the attention of the scientific community. This leads to increased investigation of the neuropsychological correlates of a number of chronic diseases.

A chronic disease is a strong stress factor, and its appearance in a person's life forces a person to make flexible changes.

Research in the field of medicine and health psychology proves that there is a correlation between disease and stress - on the one hand, stress is sometimes one of the factors that contribute to the disease, on the other hand, the disease itself causes stressful situations<sup>1</sup>. Therefore, the emotional sphere plays an important role in the formation of the attitude to the disease, the patient's compliance with medical instructions, the course of the disease and the manifestation of its results<sup>2</sup>.

The connection between the emotional sphere and organism is formed by the neurophysiological basis of the activity of the emotional sphere and organism. It is known that the activity of organs is mainly controlled by the vegetative nervous system. In addition to the large hemispheres of the brain, the autonomic nervous system, as well as hormones, mediators are also involved in the regulation of the emotional sphere<sup>3</sup>. This connection affects the expression of physiological reactions to various emotional stimuli. Accordingly, any emotions can contribute to any organic disorder (the concepts of sympathetic and vagotonic constitutions of Eppinger and Hess)<sup>4</sup>.

<sup>1</sup> Leksowska A, Jaworska I, Gorczyca P. Choroba somatyczna jako sząże adaptacyjne dla człowieka. *Folia Cardiol.* 2011;6:244–248. [[Google Scholar](#)]

<sup>2</sup> Drobijev M.Yu. Nosogenez (nozogen reaktsiyalar). Umumiy tibbiy amaliyotda chegara ruhiy patologiyasi. M.: "Rus shifokori", 2000; 89– 99.

<sup>3</sup> З.Ибодуллаев. «Тиббиёт психологияси». Тошкент 2010 йил.122-1236

<sup>4</sup> Frants Aleksandr "Psixosomatik tibbiyot. Printsipal va amaliy qo'llanma" ingliz tilidan S. Mogilevskiy . - M.:EKSMO-Press nashriyoti, 2002 .-- 352 b. ("Chegarasiz psixologiya" seriyasi). ISBN 5-04-009099-4 18 b

An important group of such emotional factors are negative emotions, they play a major role in some diseases. It is now known what mechanisms are responsible for emotions causing somatic diseases. These may be three important mechanisms by which emotions affect 1) the immune system, 2) hormonal balance, and 3) peripheral physiological activation (eg, heart rate and blood pressure).

It is known that when a person is afraid or angry, the amount of adrenaline in the blood increases. As a result of hyperadrenalinemia, glycogen content in liver and muscles is rapidly broken down, and the amount of sugar in the blood also increases. The secretory activity of the hypophysis and thyroid gland also increases during emotional arousal. Therefore, the etiology of diabetes mellitus is a psychosomatic chronic disease with mental factors (in this situation, the effect of emotional factors on the hormonal system is manifested)<sup>5</sup>. Although hepatitis C is a somatopsychic disease, it is a physiological basis for secondary psychological disorders. Several studies have shown that this disease is accompanied by changes in mood, weakness, depression, fatigue, sleep, and cognitive dysfunction. Also, some researches, including P. I. Bull, were active within the framework of the problem of the influence of the emotional sphere on somatic (hepatitis) diseases. The scientist studied the effect of emotions on the function of the gall bladder. In the study, it was found that under the influence of negative emotions, the gall bladder usually spasms for a long time, and bile stagnates. He said that the possibility of such influence of the psyche damages the activity of the gallbladder and its sphincters, which in turn leads to the development of infection. It can be seen that chronic hepatitis C can be studied as a psychosomatic disease<sup>6</sup>.

According to Elisabeth Kübler Ross, a Swiss psychiatrist and psychologist in any chronic illness, the patient's psychological reactions are divided into 5 stages - denial, nervousness, bargaining, depression, acceptance<sup>7</sup>.

The denial stage of the disease is a very common condition. If we analyze the emotional processes of a person with chronic hepatitis C, research shows that in most cases, patients consider themselves healthy, believe that the diagnosis is incorrect, and refuse treatment. encountered

According to the expression of emotional reactions, the manifestation of nervousness in hepatitis C disease occurs in most cases after the exact diagnosis of the disease and the beginning of the combined treatment course. Because patients with this disease have physical symptomological changes, weight loss, rapid fatigue, lack of energy, dissatisfaction, dissatisfaction and similar negative emotions occur in patients. There can also be an unfortunate stigma associated with this disease, especially among people who do not understand this condition, patients with hepatitis C are isolated. occurs. As a result, patients develop a loss syndrome. The main aspects of the loss are the loss of the ability to work properly, including the loss of social activities, which is associated with the inability to fulfill the previous roles in professional and personal life. the patient is often afraid of contracting

<sup>5</sup> З.Ибодуллаев. «Тиббиёт психологияси». Тошкент 2010 йил.122-123б

<sup>6</sup> Платонов К.И “Слово как физиологический и лечебный”. Издание четвертое (скомпонованное из трёх предыдущих, без исправлений и дополнений). Киев: «Издательство Бомбушкара 2.0», 2015. – 602 с. 251-326с

<sup>7</sup> Кюблер- Росс Э.О смерти и умирающую-М Софияб 2001.320с



the disease. Lack of social interaction is a significant risk factor for a wide range of morbidity and mortality, as well as negative health consequences.

At the sales stage, the patient begins to clarify the possibilities of survival through molasses (the main thing is that there is no pain). Also during this period, a patient suffering from hepatitis C appears to have improved slightly with a change in his condition. To share their feelings with others, to talk, to feel that they are getting better, to pay a little attention to others, to show them their feelings, to care, but this the condition appears to be temporary. Some patients find the strength to overcome their illness through gratitude, strong will, and support from others. In most cases, various changes in surrounding patients, negative emotions, depending on the level of received information, pass to the stage of depression. It is at this stage that the patient needs more social support and emotional support. Because during this period, engaging in unhealthy behaviors that lead to faster development of the disease increases. Depression is a mental disorder characterized by loss of interest or pleasure, feelings of guilt, low self-esteem, sleep, decreased appetite, low energy and concentration, and, in some cases, suicide. In turn, it affects the mental and social conditions of patients, prevents them from taking medications systematically, patiently, and maintaining a healthy lifestyle, and can cause secondary somatic and psychological disorders in patients. In the depression stage, the factor of emotional support and social support is especially relevant for the stable implementation of treatment. Most of the patients undergoing long-term treatment develop negative feelings related to forced social isolation due to the repulsive attitude of the surrounding people towards their illness, and as a result, the patient's desire for treatment decreases.

Admission occurs in the last stages of the disease. In this case, the patient is indifferent to internal and external processes. In some patients, on the contrary, there are rational psychological reactions, they begin to act in order to meaningfully spend the rest of their lives, as a result, positive changes begin to occur in the organization and psyche.

It is important to know the ideas of a person about his illness in the research of the emotional sphere and the relationship of the organism in chronic diseases. Therefore, in somatopsychology, much attention is paid to the internal picture of the disease (R. A. Luria 1935). The author offered external and internal pictures of the disease. Under the external image of the disease, R. A. Luria understood the symptoms of the disease, which can be obtained by all objective research methods available to the doctor, i.e. the sum of functional and organic pathological changes related to the development and dynamics of the disease, otherwise in other words, the objective manifestations of this disease. And the internal image of the disease, the "sensitive part" is the sum of all sensations related to the pathology and the "intellectual part" created by the patient's thinking, that is, the patient's experience and ideas about the disease, its causes and possible consequences. 'indisi . The process of disease assessment is studied at 4 levels: sensory, emotional, intellectual, and motivational.

Sensory level-a collection of painful sensations. All these are feelings that arise in connection with functional changes. The emotional level is related to the experience of the disease and its consequences. There are many different emotions associated with this disease. intellectual (cognitive) level of knowledge about the disease and its realistic assessment. In this case, the

patient's experience is important, it determines the processing of the fact of the disease and the prediction of the consequences of the disease motivational (behavioral) level<sup>8</sup>

In conclusion, we can say that the human organism and the emotional sphere are proportional to each other. Also, behind each emotion there is a specific physiological state that causes the body sensation. In our opinion, being aware of these conditions, understanding their functionality in a certain situation, to a certain extent, plays an important role in controlling one's emotions, mood, and possibly health. Because every emotion is in contact with the environment, society, and reflects information about how it changes us. Of course, it is difficult to say whether all diseases have a specific connection with the emotional sphere. An important aspect of our work is that it allows us to better understand the life course of the disease.



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<sup>8</sup> Luria RA Kasalliklar va yatrogen kasalliklarning ichki rasmi. - 4-nashr. - M. Medisine, 1977.-b. 37-52

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