



CLINICAL AND EPIDEMIOLOGICAL CHARACTERISTICS OF ENDEMIC GOITER AND AUTOIMMUNE THYROIDITIS IN MILITARY PERSONNEL.

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Abstract. This article describes the clinical signs of endemic goiter, a disease characterized by rapid enlargement of the thyroid gland, which is often associated with iodine deficiency in the environment, and is more common in areas far from the oceans and seas. There are diffuse, nodular and mixed types of endemic goiter. In the early stages of goiter, even the slightest signs are not noticeable. But later the front part of the neck bulges out. As a result, the enlarged thyroid gland crushes nerves and blood vessels. Due to this, negative conditions such as shortness of breath, sudden changes in voice and hoarseness, suffocation, profuse sweating, difficulty in swallowing, and dizziness are observed in the patient.

Keywords. Diffuse toxic goiter, remission, autoimmune thyroiditis, UTT test method, osteoporosis, hypertension, atherosclerosis.

According to the World Health Organization, more than 665 million people worldwide suffer from endemic goiter and other thyroid diseases. 1.5 billion people are at risk of developing iodine deficiency disorders. Among these diseases, goiter has become a pressing issue in most countries of the world, including Uzbekistan, in recent years[1,3].

In recent years, the incidence of metabolic diseases among the population has been increasing, which causes medical, social, and economic problems. In particular, the development of these pathologies with endemic goiter and autoimmune thyroiditis is of particular importance, as it creates difficulties in their diagnosis and treatment. Endemic goiter and autoimmune thyroiditis are distinguished by their multifaceted effect on the body. Endemic goiter and autoimmune thyroiditis occupy a special place due to their widespread distribution and difficulties in diagnosis and treatment [2,4].

Particular attention is paid to scientific research aimed at improving the treatment of endocrine diseases that arise as a result of an unhealthy lifestyle among the world's population. In this regard, it is important to identify the clinical and functional characteristics of the specific course of diseases associated with endocrine diseases, developing as a result of endemic goiter and autoimmune thyroiditis in modern medicine; to develop a comprehensive step-by-step approach plan that takes into account the somatic condition of patients. Of particular importance is the proposal of treatment and prevention methods based on the dysfunction of organs that arise as a result of endemic goiter and autoimmune thyroiditis; to improve the development of methods for assessing the effectiveness of treatment [1,5].

The thyroid gland, which is shaped like a butterfly and located at the front of the human neck, plays an important role in the functioning of the nervous system, digestion, bone tissue, and metabolism. The thyroid gland secretes 3 types of hormones that ensure normal growth, maturation, and development of the body, and help organs such as the stomach and intestines function normally. If there are problems in the synthesis of any of them, this can lead to serious diseases in the human body[2,3].

Goitre is an enlargement of this gland (in normal condition, the weight of the thyroid gland is 20-30 grams), the disease occurs mainly due to lack of iodine. Iodine deficiency can be caused by a person's lifestyle, diet, stress, environmental conditions and several other factors. When there is a deficiency of iodine in the human body, the thyroid gland sends a small amount of iodine to the cells. As a result of this, the synthesis of hormones decreases,

and the body acts through the hypophysis of the brain to regulate this process. As a result, the thyroid gland enlarges and goiter develops[3].

A person suffering from iodine deficiency mainly has nervousness, depressed mood, sleep disorders, weakness, memory loss, headaches and dizziness, unwarranted anxiety, eye pain, tremors, tremors, suicidal thoughts, and aggressiveness.

In the cardiovascular system, heart pain, increased blood pressure, rapid heartbeat, and various cramps appear. In severe forms of anemia that do not respond to medication, a violation of the ratio of blood formed elements may also be observed. In addition, various pains in the bones and muscles, swelling of the skin, frequent respiratory tract infections, menstrual disorders in women, infertility, hair loss, the appearance of spots on the skin, and constant dryness are observed.

Shortness of breath, shortness of breath, blue lips, and coughing are observed. As a result of impaired digestion in the digestive organs, metabolism is disrupted, and pain appears in the abdominal area. The endocrine and endocrine glands produce biologically active substances - hormones directly into the blood. The endocrine glands include the pituitary gland, pineal gland, thyroid gland, parathyroid gland, adrenal gland, and gonads. Changes in their activity cause a number of unpleasant symptoms, including headaches. Diffuse toxic goiter - occurs when the thyroid gland becomes overactive. It is manifested by protrusion of the eyeballs, rapid heartbeat, enlargement of the thyroid gland, irritability, and tearfulness[2].

Addison's disease (adrenal insufficiency) causes headaches, skin rashes, and agitation. Such patients may experience loss of memory, loss of attention, tingling in the hands and feet, and ringing in the ears. Pain that occurs when endocrine glands are disturbed should be treated by an endocrinologist. Because it is necessary not to pay attention to this disease.

First of all, it is recommended to strictly adhere to the diet, work, rest and sleep regimen. When arterial pressure increases, it is necessary to use antihypertensive, blood-thinning, and diuretic drugs. Treatment is carried out according to the degree of gout. When treating it, concomitant diseases, congenital defects, anatomical and physiological characteristics of the body and, of course, the degree of the disease should be taken into account. Only then can this serious disease be overcome[1,4].

In folk medicine, the following treatment is recommended for goiter. The kernel of the walnut fruit is removed, grated, and placed in a 1-liter jar, and 70 percent medical alcohol is poured over it until the kernel is completely covered. One teaspoon is consumed 2 times a day. The daily requirement for iodine for an adult is 150-200 micrograms, and for pregnant women, 200-250 micrograms.

Chronic iodine deficiency and thyroid dysfunction can cause mental decline, depression, dry skin, hair loss, constipation, diarrhea, infertility, decreased sexual function, changes in bone development, short stature and osteoporosis, hypertension, and atherosclerosis.

In medicine, there are mainly endemic and sporadic types of goiter. In particular, endemic goiter is characterized by a rapid enlargement of the thyroid gland, and this disease is often found in areas with iodine deficiency in the environment, remote from the oceans and seas (including Uzbekistan). There are diffuse, nodular and mixed types of endemic goiter.

In the early stages of goiter, even the slightest signs are not noticeable. However, later the front of the neck swells. As a result, the enlarged thyroid gland compresses nerves and blood vessels. This causes the patient to experience such negative symptoms as shortness of breath, sudden changes in voice and hoarseness, choking, excessive sweating, difficulty swallowing, and dizziness[3].

At the same time, disorders occur in the nervous system, mood swings occur frequently, all processes in the body slow down, especially the gastrointestinal tract. Unfortunately, many people do not pay serious attention to the fact that this disease is developing in them.

However, as a specialist, I can say that ignoring this disease does not lead to good consequences.

A direct correlation between concomitant diseases in endemic goiter and autoimmune thyroiditis in military personnel has been proven: chronic gastritis (A, B) is found to be 2.5 times more common, and chronic pancreatitis is found to be 3.2 times more common. When studying the UTT screening method in military personnel with endemic goiter and autoimmune thyroiditis, it is important to determine the high clinical effectiveness of this method by assessing risk factors leading to other diseases[1,2].

For the first time, the development of additional diagnostic and prognostic criteria for the development of endemic goiter and autoimmune thyroiditis in the military has been confirmed. Compliance with the developed preventive measures in the military with endemic goiter and autoimmune thyroiditis resulted in 88.9% of patients diagnosed with this disease 2 years ago maintaining a remission period of 24 months, and 62.4% of patients diagnosed more than 2 years ago maintaining a remission period of 12 months.

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