



## Diseases of the musculoskeletal system and approaches to their treatment

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**Abstract:** The incidence of musculoskeletal and connective tissue diseases (MSCTD) was studied in 2 categories of individuals: adults of working age and adults older than working age. A comparative analysis of the primary incidence of MCTD diseases was conducted. The dependence of the nosology on the age group was established. A number of preventive measures were proposed to reduce the overall incidence among the adult population.

**Key words:** Musculoskeletal and connective tissue diseases, disability due to MCTD diseases, arthropathies, deforming dorsopathies, osteopathies and chondropathies, prevention

The number of people suffering from musculoskeletal pathology is growing rapidly from year to year. Pain in the spine and joints forces up to 98% of the adult population to change their usual rhythm of life. The development of musculoskeletal diseases can be provoked by a variety of factors: a sedentary lifestyle, physical overload, work with heavy loads, obesity, sports injuries, degenerative changes in bone tissue, as well as systemic autoimmune lesions

Diseases of the musculoskeletal system and connective tissue include more than 150 diseases (from acute pain to chronic disorders accompanied by a constant decrease in functional and work capabilities and disability). These include diseases affecting:



- muscles;
- joints (rheumatoid arthritis, gout, osteoarthritis, psoriatic arthritis, etc.);
- bone tissue (osteoporosis, fractures due to bone fragility or injuries);
- spine (cervicalgia, lumbago, etc.);
- local pain syndromes and inflammatory diseases characterized by symptoms from the musculoskeletal system.

#### Symptoms of bone and muscle diseases

Patients present the following complaints with diseases of the musculoskeletal system:

- Pain along the muscles or bones. It can bother in a certain position, at rest or after exercise. Starting pain is typical for osteoarthritis, morning stiffness is for rheumatoid arthritis.
- Deformation of the legs, arms, chest, flat feet, changes in the shape of small and large joints. Curvature of the spine is possible in the lateral direction - scoliosis, anterior-posterior - kyphosis, lordosis.
- With muscle hypotrophy, the limb looks thinner, its strength is reduced.
- Increased muscle fatigue, reduced range of motion.
- Swelling in the area of the muscles, joints, at the site of injury.
- If the nerve controlling the muscle is damaged, the limb "does not obey" the commands of the brain, the person cannot perform the necessary movements or does it with difficulty. Sensory disturbances are also possible - "tingling", "numbness", "astringency".

To exclude oncological diseases, X-ray examination, CT of bones and joints, MRI of soft tissues are carried out. This allows differentiating diseases with similar clinical



manifestations, determining the true size of the pathological focus. Electromyography helps to distinguish nerve disease from muscle pathology. Sometimes, to clarify the diagnosis, doctors need to conduct a histological analysis of a piece of muscle tissue. After the diagnosis is established, an individual treatment plan is drawn up.

For the treatment of the musculoskeletal system, orthopedic devices for fixation and traction are used. The rest period is provided by specialized spokes, plaster splints, bandages, orthoses. To restore the full range of motion after the acute symptoms subside or the fracture heals, massage techniques, exercise therapy, physiotherapy, laser exposure, and exercises in water are used. After complex treatment, the musculoskeletal system becomes more trained, strong muscles protect the bone apparatus from injury.

In the structure of morbidity of diseases of the first group of the CMS and ST, diseases of the synovial membranes and tendons predominate 57%, the second place is occupied by deforming dorsopathies 21%, the third place is arthropathies 18% (of which all cases with arthrosis), the fourth place is osteopathies and chondropathy 4%. Among systemic lesions of connective tissue, spondylopathies, new cases of the disease were not registered (Fig. 1). In the structure of morbidity of diseases of the second group of the CMS and ST, lesions of the synovial membranes and tendons predominate 59%, the second place is occupied by arthropathies 31%, the third is deforming dorsopathies 10%. Among systemic lesions of connective tissue, spondylopathies, osteopathies and chondropathies, new cases of the disease were not registered (Fig. 1). The structure is similar to the morbidity of the first group of people. However, the number of patients seeking help for arthropathies increases with age, which is primarily due to age-related changes in the joints. It is also necessary to take into account the influence of such factors as excessive physical activity, poor nutrition and frequent colds, which contribute to premature "wear and tear" of the joints.



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