International Journal of Health Systems and Medical Science

ISSN: 2833-7433 Volume 2 | No 6 | June - 2023



SELF-CONTROL INVOLVED IN PHYSICAL EXERCISES AND SPORTS

Shokirov Kamol Fazlievich

Bukhara state medical Institute named after Abu Ali Ibn Sino.

Abstract: The forcing of physical activity without observing the methodological methods in its build-up can lead to the disruption of adaptive systems and disruption of a number of organs, in particular the cardiovascular system. To avoid such unpleasant consequences, each practitioner must conduct self-control.

Key words: physical activity, self-control , muscle strength, endurance, speed , flexibility , agility.

Introduction

Self control - these are independent regular observations of those involved with the help of simple accessible techniques for the state of their health, physical development, and the effect on the body of physical exercises.

In the process of self-control, students register subjective and objective indicators of the functional state of their body.

Subjective indicators include well-being, sleep, appetite, performance assessment, attitude to physical exercises, as well as the presence of any pain or discomfort.

Well-being is an important indicator of the impact of exercise and athletic training. Feeling is excellent, good, satisfactory or poor.

The diary notes the duration and depth of sleep, its disturbances (difficulty falling asleep, restless sleep, insomnia).

Appetite is noted good, satisfactory, lowered, bad. Various deviations in the state of health quickly affect appetite, so its deterioration is usually the result of overwork or illness.

A great desire to train is a sure evidence of the full restoration of the body's functional capabilities after exercise. A constant desire to train for several months indicates the correct course of training.

A slight desire to train usually only happens the day after a hard workout or intense competition. On such a day, light training or rest is given.

Pain can be a sign of injury, disease, or overexertion. At the beginning of classes and when they resume after a break, muscle pain often appears. They usually go away on their own. Pain is relieved by warm baths or baths. If the pain persists for a long time, it is necessary to temporarily reduce the load. With convulsive contractions, the muscles relax, do self-massage, warm.

To prevent seizures, take vitamins C and P.

In the diary of self-control, it is necessary to note during which exercises (or after which exercises) pains appear, their strength, duration, etc. The appearance of discomfort or pain in the heart area



should be taken especially seriously, then a doctor's consultation is required.

Of the objective indicators, the pulse rate, body weight, hand dynamometry, sweating and other signs are recorded.

The pulse is an important, simple and informative indicator of the state of the body. The pulse rate is an intensive indicator of shifts in the body, it quite accurately determines the level of physical activity. In order to identify the body's response to physical activity, the pulse is measured after the exercise and its recovery time for 5 minutes. The assessment of Ps recovery to the initial level is carried out according to the following criteria: up to 60 seconds - excellent, from 61–90 seconds - good, from 91 to 120 seconds - satisfactory, from 121 to 180 seconds - bad, from 181 seconds and above - very bad. There are several ways to count the pulse: on the radial artery, on the temporal artery, on the carotid artery, in the area of the cardiac impulse. Ps is calculated in 10 seconds and multiplied by 6, the value of the number of beats in minute.

An important indicator characterizing the function of the cardiovascular system is blood pressure. Blood pressure (BP) is determined using a membrane or mercury tonometer.

BP fluctuates with the phases of the cardiac cycle. During systole (SD) it increases, during diastole (DD) it decreases. The difference between SD and DD is pulse pressure (PP).

The physiological norm for students is 105–130 mm Hg. Art. for systolic and 55–80 mm Hg. Art. for diastolic pressure. When pressure increases, it is necessary to reduce, first of all, the intensity of training. And when the systolic pressure exceeds 150 mm Hg. Art. and diastolic 110 mm Hg. Art. required to be examined by a doctor.

respiratory rate depends on age, health status, fitness level, and the amount of physical activity performed. An adult makes 14-18 breaths per minute. In a regular exerciser, the resting respiratory rate decreases. So, for athletes, it ranges from 10-16 per minute. During exercise, the respiratory rate increases the more, the higher its power, and can reach 60 or more per minute. To count the respiratory rate, you need to put your palm so that it captures the lower part of the chest and the upper part of the abdomen, breathe evenly.

Vital capacity (VC) is the amount of air that can be exhaled after taking the deepest breath possible. In men, on average, it is 3.5-5.0 liters, in women - 2.5-4.0 liters. VC can only be measured with a spirometer, therefore, for self-control, breath-holding tests are recommended to assess the functional state of the respiratory system.

The Stange test is as follows: in a sitting position, take a deep breath and exhale, then inhale again (about 80% of the maximum), close your mouth and at the same time pinch your nose with your fingers, hold your breath. Healthy untrained people are able to hold their breath for 40–55 seconds, athletes for 60–90 seconds or more. The better prepared a person is, the longer he can hold his breath. With fatigue, overtraining, breath holding decreases.

Genche test consists in holding the breath after exhalation. If it is carried out after the Stange test, then a rest of 5–7 minutes is necessary. Healthy untrained people are able to hold their breath for 25-30 seconds, athletes - 40-60 seconds and longer [27].

Growth (body length) is an essential indicator of physical development. It is known that growth continues until the age of 17–19 in girls and up to 19–22 in boys. Growth depends primarily on heredity.

Growth is sufficient to measure once every six months. The greatest body length is recorded in the morning, in the evening the height may be less by 1–2 cm, after long and intensive physical exercises, the height may decrease by 2 cm or more, and after classes with kettlebells, barbell - by 3 cm or more. This is due to the flattening of the intervertebral discs.

Weight, or body weight, is a good indicator of the adequacy of the training load. In the process of training, body weight always decreases by 0.5–1 kg or more. If the next morning after training, the



weight has not recovered, then it is necessary to reduce the load.

Body weight can change during the day, so it is necessary to determine it at the same time, in the same clothes, preferably in the morning, on an empty stomach, after bowel and bladder emptying.

Significant deviations from the "ideal" weight, both in the direction of decrease and increase, indicate deficiencies in physical development. In both cases, you can adjust your development through regular exercise. At low weight, you mainly need to do weight training to increase muscle mass, at high weight - aerobic endurance exercises (walking, running, cycling, swimming) to reduce body fat. body.

Self-control data help the teacher, trainer, instructor and the students themselves to control and regulate the correct selection of means and methods for conducting physical education and training sessions, that is, to manage these processes in a certain way.

In order to ensure control over the level of physical fitness, it is necessary to periodically monitor the state of one's general physical qualities: muscle strength, endurance, speed of movement, flexibility and dexterity.

muscle strength characterized by the ability to overcome external resistance or counteract it. The method of studying muscle strength is called dynamometry. It is measured using a dynamometer (electronic or mechanical).

Dynamometry allows you to objectively assess the level of your strength training. The most widely used hand dynamometry. It is desirable to carry out measurements at the same time: in the morning, before start and upon completion classes. Force right brushes in untrained men, it ranges from 35–50 kg, in the left - 32–46 kg, in women, respectively, 25–33 kg and 25–30 kg. When evaluating the results of dynamometry, one should take into account both the absolute value of the force and and related to body weight. The relative value of muscle strength will be a more objective indicator, because the increase in strength during training is largely associated with an increase in body weight and muscle mass. Self-control over the development of strength can be carried out with the help of the following exercises:

- pulling up on the crossbar, bending the arms in the lying position to assess the strength of the muscles of the arms and shoulder belts;
- lifting the torso from a supine position to assess the strength of the abdominal muscles press;
- squatting on one leg (pistol) to assess muscle strength legs.

Endurance evaluated using a variety of tests.

For self-monitoring of general endurance, a 12- minute running test, developed American doctor Cooper. During the test, you need to cover as much distance as possible. In this case, overexertion is not allowed. It is advisable to carry out the test on a stadium treadmill, where it is easy to calculate the distance traveled. Table 1 can be used to calculate the degree of readiness of men and women under 30 depending on the distance in kilometers traveled in 12 minutes.

Table 1

The degree of preparedness of men and women under 30 years of age

V for v and s y m o s t and about t s t o u n i o n in kilometers traveled in 1 2 min ______

Degree readiness	Men	Women
Very bad	Less than 1.6	Less than 1.5
bad	1.6–1.9	1.5–1.84

Satisfactory	2.0–2.4	1.85–2.15
Good	2.5–2.7	2.16–2.64
Excellent	Over 2.8	Over 2.64

Rapidity. Physical exercises, sports contribute to the development of speed (speed abilities), determined by the speed of movements, their frequency and the time of the motor reaction. The speed depends on the functional state of the nervous system, on strength, flexibility, possession of the technique of movement.

To determine the maximum frequency of hand movements, paper, pencil and stopwatch. On command within 10 seconds, apply with your hand (the hand that is stronger) with a pencil dots on paper with maximum frequency. Counting points, lead with a pencil a continuous line so as not to stray. In students with a good functional state of the motor sphere, the maximum frequency of hand movements is 60 - 70 points for 10 sec.

Flexibility. The ability to perform movements with a large amplitude in various joints. Flexibility depends on many factors: the elasticity of muscles and ligaments, external temperature, time of day. The flexibility test is carried out after an appropriate warm-up.

One of the most important indicators of flexibility is the mobility of the spine. To do this, you need to stand on a stool and lean forward to the limit, without bending your knees and lowering your arms. The distance from the end of the middle finger to the platform is measured. If, when tilting, the fingers are below the zero mark, then the mobility is assessed as satisfactory; if the fingers do not reach the horizontal plane, then the mobility of the spine is assessed as insufficient.

Agility. This quality is characterized by good coordination and high accuracy of movements. Dexterity depends on the activity of the analyzers (motor), as well as on the plasticity of the central nervous system.

For the development of dexterity, game exercises are used that require such movements as turns, tilts, jumps, rotations, running with sudden stops, running with your back, side steps.

The simplest tests allow each trainee to independently control the dynamics of the development of one or another motor quality.

Conclusion. Self-control helps to better know yourself, teaches you to monitor your own health, stimulates the development of sustainable personal hygiene skills and compliance with sanitary norms and rules. Self-control instills in the student a competent and meaningful attitude towards their health and physical culture and sports, and is of great educational importance.

References:

- 1. Akhrorova, PhD Shakhlo, and Nodira Akhmatova. "Features of psycho-emotional disorders in idiopathic neuropathy of the facial nerve in men and women." (2018).
- **2.** Akhrorova, P. S., & Akhmatova, N. (2018). Electroneuromyographic analysis of acute neuropathy of the facial nerve in the aspect of sexual dimorphism.
- 3. Mukhsinova L. A. et al. Cytokine Profile in Patients with Congenital Cleft Upper Lip and Palate //European Journal of Research Development and Sustainability. − T. 2. − № 4. − C. 91-93.
- 4. Anvarovna M. L. Early Diagnosis of Pathologies at the Exit of Teeth in a Young Child and its Peculiarities //Central Asian Journal of Medical and Natural Science. − 2022. − T. 3. − №. 5. − C. 286-289.
- 5. Рахматова С. Н., Саломова Н. К. Қайта Такрорланувчи Ишемик Ва Геморрагик Инсультли Беморларни Эрта Реабилитация Қилишни Оптималлаштириш //Журнал Неврологии И Нейрохирургических Исследований. 2021. Т. 2. №. 4.

- **6.** Urinov M. B. Axrorova Sh. B. Ideopaticheskaya nevropatiya lisevogo nerva u mujchin I jenshin //Nevrologiya". Tashkent. 2008. T. 186. C. 3-4.
- 7. Tailakova D. I., Khabibova N. N. Determination of the immunological status of the oral cavity of the child population with congenital lip and palate in the studied areas //European Journal of Molecular & Clinical Medicine. − 2020. − T. 7. − №. 3. − C. 3023-3026.
- 8. Taylakova D. I., Kambarova S. A. Analysis of medical anamnesis data and secondary prevention of systemic hypoplasia of dental hard tssues in children //Central Asian Journal of Medicine. − 2020. − T. 2020. − № 2. − C. 81-98.
- **9.** Kurbanovna S. I. Functioning of the Immune System in Children, After Surgical Correction of Congenital Heart Defects //European Journal of Life Safety and Stability (2660-9630). 2021. T. 12. C. 439-446.
- **10.** Isroilovich A. E. et al. The Role And Importance Of Gliah Neurotrophical Factors In Early Diagnosis Of Parkinson Disease //Texas Journal of Medical Science. 2022. T. 5. C. 1-6.
- **11.** Fayzullayevich, S. S., Hikmatovna, K. S., Khasanovna, M. M., & Ul'yanovna, S. G. (2018). Immune status in patients with duodenal ulcer and influence on her immunomodulatory therapy. *European science review*, (9-10-2), 161-163.
- **12.** Fayzullayevich S. S. Disorders Of The Immune System And Their Immunological Rehabilitation In Patients With Chronic Pancreatitis //European Journal of Molecular & Clinical Medicine. − 2020. − T. 7. − № 3. − C. 5178-5187.
- **13.** Abdukodirov E. I., Khalimova K. M., Matmurodov R. J. Hereditary-Genealogical Features of Parkinson's Disease and Their Early Detection of the Disease //International Journal of Health Sciences. № I. C. 4138-4144.
- **14.** Шокиров К.Ф. Физическое воспитание студентов в медицинском вузе «Тиббиётда янги кун» Научно-реферативный духовно-просветительский журнал 1(33)2021.

