



Sexual Dysfunction of Men in Bukhara Region

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Abstract: in this article, we show the research data on the spread of erectile dysfunction in the Republic of Uzbekistan (in Bukhara region). Various chronic diseases increase the risk of erectile dysfunction, including depression, diabetes, cardiovascular and neurological diseases. These disorders are more common among the elderly, which may partially explain the high prevalence of erectile dysfunction in men over the age of 50 years. Repeated epidemiological studies of sexual disorders among men will be able to reflect the effectiveness of ways to improve and stimulate new approaches and tactics for treating these pathologies.

Keywords: erectile dysfunction, diabetes mellitus, epidemiology, sexual disorders.

According to the data of studies on the spread of sexual disorders among men published in the last decade, not only the comparison of various methods of treatment of sexual problems, but, first of all, a deeper understanding of the epidemiology and pathophysiology of these pathological conditions does not lose its relevance [5, c. 197].

The results of these studies show that the effect of erectile dysfunction is significant on mood, interpersonal relationships and overall quality of life. Erectile dysfunction is closely related to both physical and psychological health. The main risk factors are diabetes mellitus, heart disease, hypertension and dyslipidemia. As indicated in many studies, drugs for the treatment of diabetes mellitus, arterial hypertension, cardiovascular diseases and depressive disorders can also cause problems with erection [4, c. 17] Lifestyle factors, including smoking, alcohol consumption and sedentary lifestyle are additional risk factors. Despite the widespread use among older men, erectile dysfunction is not considered a normal or unavoidable part of the aging process. The impact of erection problems on a person's general well-being, self-esteem and interpersonal relationships is significant.

In addition to the factors described above, the following pathological conditions can cause problems with erection: renal insufficiency (endocrinological shifts (hypogonadism, hyperprolactinemia), neurological changes (diabetic nephropathy) and vascular changes). The relationship between the development of erectile dysfunction and kidney transplantation is described in some works. In some cases, transplantation improves kidney function, and in others, especially in those people who have had two transplants, the erection may worsen even more. Erectile dysfunction can be caused as a result of neurological disorders such as stroke, brain and spinal cord tumors, Alzheimer's disease, epilepsy and multiple sclerosis [6, c. 570].

The above-described studies were conducted in the USA, the EU, and some Asian countries, but we attempted to search for studies conducted on the territory of the Republic of Uzbekistan (in the Bukhara region). As a result of scanning Internet resources for the purpose of search According to the publications of Uzbekistan authors studying the problem of sexual disorders, we found 2 major studies on this issue: according to the chief urologist of the Ministry of Health of the Republic of Uzbekistan, According to the statistics department of the multidisciplinary regional hospital located in the Bukhara region, "out of 350 men in all districts of Bukhara, 35% of Bukhara men suffer from

erectile dysfunction at different stages" [1, c. 16]; the second similar study was conducted by an initiative group (Doctor of Medical Sciences Khamzin A.A., prof. Zeltser M.E., Frolov R.A.).

The second epidemiological study was expanded and, as a result of which the spread of sexual disorders in various groups of men was revealed. According to the data published by Dr. Khamzin A.A. and Frolov R.A., it follows that erectile dysfunction and symptoms of androgen deficiency are widespread among urban residents aged 21 to 79 years: the general spread of erection problems among all age groups – 52,3% (1,3%) (784/1550); in the younger age group – 42.5% [2, p. 91]. In rural areas, as the authors reflect, the general prevalence of erectile dysfunction was 56.7%, among young people (21-30 years old) - 47.4%, and 9.3% of men in this group had a combination of symptoms of erection problems and androgen deficiency [3, p. 20]. In the group consisting of men with inflammatory prostate diseases, the general prevalence of this pathology was 70.2% [4, p. 18]. Thus, we have compiled a table reflecting the prevalence of sexual dysfunction among residents of Bukhara region (Table 1).

Table 1. Distribution of sexual dysfunctions in the Bukhara region

№	Regions	Erectile dysfunction	Premature ejaculation
1	City of Bukhara	46%	55,6%
2	Peshku	26,8%	14,8%
3	Gizhduvan	34,6%	22,5%
4	Shafirkan	23,4%	11%
5	Vobkent	37,5%	28%
6	Alat	29%	8,7%
7	Karakul	23,6%	25,8%
8	Karaulbazar	36,7%	26,1%

Such studies reveal the relevance of these problems, as well as the need to improve andrological care for the male population. Currently, intensive work is being carried out in this direction by the Scientific Center of Urology, in particular, on the creation of men's health centers, therefore, repeated epidemiological studies of sexual disorders among men will be able to reflect the effectiveness of these ways of improvement and stimulate new approaches and tactics for the treatment of these pathologies.

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