

INVESTIGATION OF NEUROCIRCULATORY DYSTONIA ON THE BASED ON MODERN METHODS

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Abstract: Neurocirculatory dystonia, also known as vegetative-vascular dystonia, is a complex disorder that affects the autonomic nervous system, leading to a range of symptoms involving different organ systems. This article aims to analyze the condition of neurocirculatory dystonia using modern methods, shedding light on its underlying mechanisms, diagnostic approaches, and potential treatment options.

Keywords: Process, dystonia, methods, functions, structure, medical side.

Introduction: There have been awesome steps in the pathophysiology of dystonia over the latest twenty years. Three typical irregularities appear to underlie the physiological substrate of dystonia. Every one of the three are influential and might also join with one another. One anomaly is loss of restraint. The absence of restraint looks right wondering about that it very properly would possibly be answerable for the abundance of improvement and for the flood peculiarities considered in dystonia.

A subsequent irregularity is tactile brokenness. There are mild tactile discoveries in patients and the tangible framework can force the engine framework. Third, there is a madness of versatility in dystonia. Specifically, effective proof from trial and scientific work upholds the hypothesis that dystonia may be considered as a trouble related to the interruption of homeostatic pliancy, with a frequent assist of synaptic potentiation, alongside with the deficiency of synaptic inhibitory cycles.

In any case, regardless of these discoveries, a tremendous gap stays in the interpretation of these bits of expertise into a comprehension of the vital modifications in higher-request engine manage that underlie dystonic facet consequences mainly at a business enterprise and framework level.

A trademark scientific thing of dystonia is the overabundance of development. This has been exhibited with electromyographic (EMG) debts that have proven surprisingly prolonged eruptions of EMG movement, co constriction of terrible man muscles, and a flood of motion into muscle tissues no longer engaged with the errand. Changes of inhibitory circuits have been accounted for at the spinal string, brainstem, and cortex.

Transcranial pleasing feeling (TMS) approves the investigation of a number of inhibitory circuits at the cortical level. Many of these are disabled in dystonia and the uncommon intracortical difficulty may be determined in the two facets of the equator regardless of one-sided facet results and, surprisingly, in asymptomatic physique parts. The adjustments are indistinct in that they have likewise been considered in distinct different neurological instances and, surprisingly, in psychogenic dystonia.

Hence, there would not seem, with the aid of all accounts, to be an on the spot connection between diminished intracortical restraint and dystonia. It is moreover realistic to take observe of that physiological anomalies in asymptomatic physique components ought to exhibit that they are compensatory modifications to stop dystonia; in any case, this seems to be unbelievable when you consider that the irregularities are by using and massive equal to these in the suggestive physique components and are toward the course to immediate engine brokenness.

How may an indistinct scarcity of inhibitory intracortical circuits convert into the frequent dystonic unfocussed sturdy enactment? All matters considered, when a specific willful improvement is created,

the thinking wishes to stifle different possible developments. Along these lines, the engine cortex can create a greater particular development, in a similar fashion as embody restraint in tangible frameworks lets in an extra exact discernment. There is notable proof for embody hindrance, internal tangible engine cortex, in human development.

Despite the truth that it cannot be proven in every usual subject. Encompass problem is diminished in central hand dystonia and this may add to the bother in centering engine order and to spill over peculiarities. An adjustment of embody difficulty can likewise be proven when dystonic sufferers envision snatching of the forefinger.

The deficiency of limitation has been usually deciphered with regards to assumed basal ganglia brokenness. One hypothesis about basal ganglia affiliation is that the immediately pathway helps order the perfect development, whilst the circuitous pathway hinders undesirable developments.

Various examiners have felt that there is an awkwardness in the immediately and aberrant pathways so the instantaneous pathway is quite overactive (or that the backhanded pathway is usually underactive). The proposed irregularity ought to instantaneous pointless improvement and, specifically, a deficiency of embody hindrance. The cerebellum would possibly anticipate a section given it have an impact on on cortical volatility.

Transcranial eye-catching feeling of the cerebellum diminishes cortical edginess in regular people, and have an effect on that is misplaced in sufferers with dystonia, alternatively it does not appear to anticipate a phase in embody hindrance. At existing there is no undeniable proof connecting the deficiency of restraint to a unique brokenness interior basal ganglia or cerebellar organization.

The disappointment of SICI in central hand dystonia recommends that there possibly should be a cortical irregularity of intracortical inhibitory neurons. There was once a thinking of a deficiency of GABA in the sensorimotor cortex exhibited with beautiful reverberation spectroscopy, but this was once now not affirmed later in an ensuing study. Another study, be that as it may, confirmed a deficiency of flumazenil proscribing in the sensorimotor cortex, preserving the notion conceivable.

One extra huge subject matter in the pathophysiology of dystonia is a deformity in tangible or perceptual functionality or in "sensorimotor combination". In spite of the truth that dystonia is by means of and giant considered as an unadulterated engine problem, it is generally long past earlier than with the aid of tactile aspect effects.

Not properly characterized significantly sentiments (distress, torment, or kinesthetic sensations) are many times special weeks or months earlier than dystonia creates and torment can be a phase of cervical dystonia. There are moreover mild tactile shortfalls. Patients with central dystonia journey problems in keeping apart tactile improvements in each spatial and fleeting areas. Significantly, these irregularities are reachable in unaffected physique parts, for example, the unaffected hand in sufferers with central hand dystonia.

For instance, it has been accounted for that somatosensory worldly separation restriction (STDT) is extraordinary in each and every one of a range of kinds of critical central dystonia's in every of the three physique areas (eye, hand and neck), no remember what the dispersion and seriousness of engine aspect effects. These tangible anomalies, specially of fleeting segregation, have moreover been suggested in sure household contributors of sufferers with obtained summed up dystonia. These adjustments may be linked with a disturbed somatotopic portrayal in the tactile cortex as uncovered with the aid of neurophysiological and neuroimaging studies.

Conclusion: Neurocirculatory dystonia is a complex disorder that requires a comprehensive understanding and approach. Through modern diagnostic methods, such as thorough medical history assessment, physical examinations, and laboratory tests, an accurate diagnosis can be made.

Understanding the underlying mechanisms is crucial for devising appropriate and effective treatment approaches. By incorporating lifestyle modifications, pharmacological interventions, and psychotherapy, patients can experience improved symptom management and a better quality of life. With ongoing research, further advancements in the understanding and treatment of neurocirculatory dystonia are expected to emerge, providing hope for those affected by this condition.

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