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Alcoholism is a Problem of the Age

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Annotation: The article examines a person's alcohol dependence, the reasons for taking alcohol, the reasons leading to alcoholism. Alcoholism is a violation of control over alcohol intake, addiction to alcohol, as well as alcohol consumption, despite the negative consequences. The article presents the stages of development of alcoholic illness, its consequences for fetal health, the course of alcoholism in women and harmful social consequences.

Keywords: alcoholism, patients, anti-alcohol treatment, alcoholic beverages, pathology, fetus.

MATERIAL AND METHODS

The search for literary sources was carried out using the bibliographic databases Web of Science, Scopus, DBLP, Medline. When selecting sources, they paid attention to experimental articles, literary reviews, the number of their citations over the past year.

Alcoholism is a disease in which patients develop a painful irresistible craving for alcohol, mental and somatic disorders of varying intensity appear, which are initially reversible (functional in nature) and then irreversible (organic disorders). Already in the 19th century, it was believed that with an increase in the well-being of the population, alcoholism began to grow [1]. The World Health Organization believes that the trend in the incidence of alcoholism in the world is constantly growing: if in 2000 there were about 140 million alcoholics in the world, then in 2010 it was already about 208 million: with such a trend, by 2050 the number of alcoholics in the world could exceed 500 million people out of 9.5 billion population that is 1 out of 19 [2].

Recent studies have shown a certain role in the pathogenesis of alcoholism of certain types of metabolic disorders, in particular biogenic amines.

According to the WHO, "alcoholics are those alcohol abusers whose addiction to alcohol has led to severe mental disorders or caused both mental and somatic disorders, changed relationships with the team and caused damage to the social and material interests of these individuals".

As mentioned above, the main symptom of alcoholism is a pathological craving for alcohol. The condition that the patients experience is compared to the feeling of hunger, thirst. This condition is formed at different times: in men of mature age - after 3-10 years from the onset of alcohol abuse,

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in women, boys and adolescents - in terms of up to 3 years. The emergence of a pathological craving for alcohol is similar to the process of addiction to other drugs (morphine, hashish, etc.)

Unlike addiction to drugs, the process of pathological craving for alcohol occurs after a longer period from the onset of alcohol abuse. The formation of a morbid craving for alcohol is influenced by a number of factors: the dose and strength of alcoholic beverages, the frequency of consumption, the individual's susceptibility to alcohol, personality traits, and the social environment. The microsocial environment is of particular importance, the immediate environment in which the person is. In the initial stages of the disease, with timely initiation of treatment, it is often possible to overcome the pathological addiction to alcohol. The worst prognosis is observed in case of overwork, fatigue, traumatic situations, and an unhealthy environment.

In patients suffering from alcoholism, binges often occur. In all patients, ultimately (at different times), there is a decrease in tolerance (tolerance) to alcohol, they become very drunk from a small amount of alcohol. With alcoholism of the second stage, an abstinence syndrome is formed ("hangover syndrome"). The withdrawal syndrome is characterized by the manifestation of mental disorders (melancholy, apathy), a sharp tremor of the limbs and tongue, palpitations, sweating, cold snap, hands and feet, etc. Patients experience an irresistible urge to drink alcohol. After taking alcohol, these phenomena temporarily disappear. Withdrawal symptoms do not appear immediately, but is formed over 3-5 years or more, but this period may be reduced to a year. In persons who began to systematically consume alcoholic beverages at a young age, withdrawal symptoms occur faster and are more severe.

There are the following stages of alcoholism: the first (initial), the second (middle) and the third (initial).

Initial stage: develops and imperceptibly forms from domestic drunkenness (frequent drinking with friends after work, systematic alcohol consumption on Saturday and Sunday, after receiving a salary, etc.). Sometimes it is difficult to draw the line between the onset of the disease and domestic drunkenness. In the first stage, the so-called mental dependence on alcohol arises, which is expressed in a painful addiction to alcohol, the search for reasons for drinking. The second important sign is the loss of a sense of proportion and control over the amount of alcohol consumed. The craving for alcohol during drinking is not weakened, but rather intensifies, and the patient continues to drink until the alcoholic "thirst" is quenched. The drunkard during this period does not consider himself a sick person and takes offense at the requests of sick and loved ones to see a doctor. In the initial stage of alcoholism, increased irritability, irascibility, and fatigue are noted. Characterological shifts develop, previously uncharacteristic features are revealed: impatience, rudeness, petty pickiness. Treatment at this stage usually gives positive results, and the earlier it is started, the more successful it is. With the transition of the initial stage of alcoholism to the middle stage, patients become emotionally unstable, even more irritable, the mood ranges from carefree cheerful to gloomy. Any trouble becomes a reason for heavy drinking. The second stage of alcoholism is characterized not only by a greater severity of symptoms characteristic of the initial stage, but also by the appearance of new neuropsychiatric disorders. Functional changes in internal organs turn into mild organic ones, endocrine shifts and changes in metabolism are noted. In the second stage of the disease, withdrawal symptoms are finally formed, and physical dependence on alcohol is formed. Drunkenness becomes drunken, the mood during sober hours is usually depressed, working capacity is noticeably impaired. The insurmountably of attraction and the growing degradation of the personality lead to the use of surrogates. Volitional qualities sharply decrease, the patient becomes weak-willed and deceitful. Giving a solemn promise or a written commitment to the administration at work, in the family, in public organizations to improve and

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stop drunkenness, patients very soon break them. Mental disorders are aggravated: suspiciousness, anxiety, jealousy of his wife, sometimes taking on a delusional character, often alcoholic psychoses appear. In the third stage of alcoholism, tolerance to alcohol decreases sharply, the patient gets drunk from small doses of alcohol. In a state of alcoholic intoxication, the patient becomes spiteful, conflicting aggressive, subsequently develops a decrease in memory and intelligence. Almost 30% of patients have seizures that occur directly during a binge or a hangover period. When you stop drinking alcohol, seizures occur less often or disappear altogether. At this stage of alcoholism, psychosis also often occurs. The ability to work of patients is severely impaired, and they most often become disabled.

Many women with alcoholism have their husbands systematically drunk. There are a number of factors contributing to the onset of the systematic use of alcoholic beverages by women: drunkenness of the husband, the conditions of upbringing in the family, loneliness, traumatic situations. It should be noted that alcoholism in women progresses faster, and psychopathological symptoms develop in a shorter time than in men. In women suffering from alcoholism, the menstrual cycle is disrupted (menstruation stops by the age of 35-40), fertility (more often premature and stillborn babies are born). They almost always have a disrupted course and outcome of pregnancy. Miscarriages and premature births often occur, children of less weight are born, etc. [4].

In recent years, attention has been paid to specific deformities in children whose mothers abused alcohol during pregnancy. This special type of combination of birth defects with impaired physical and mental development of children is described as "fetal alcohol syndrome", "alcoholic embryopathy" or in other words, "alcoholic fetal disease". The leading manifestations of fetal alcohol syndrome are the discrepancy between the height, development and body weight of children and their intrauterine age, the presence of craniofacial anomalies, and often other parts of the body and organs - limbs, heart, external genital organs, intestines [3]. Approximately every second or third child with alcohol embryopathy has heart and genital defects. The work of the heart is severely impeded. They receive less oxygen and other essential substances, which negatively affects their function and development. Sick children with such a defect are lagging behind in development. The most severe manifestation of fetal alcohol syndrome is impaired mental development. Even in the absence of any significant developmental defects in children born to families of alcoholics, epilepsy, mental retardation, visual and hearing impairments, speech disorders, and neuroses are often observed. They are characterized by aggressiveness, poor adaptability to the new environment, a tendency to vagrancy and delinquency. Malformations in the offspring of women who abuse alcohol are a consequence of the effect of ethyl alcohol on the embryo during the period of organ laying [3]. Prevention of fetal alcohol syndrome consists in a complete rejection of alcoholic beverages during pregnancy.

Often, alcoholism in women is combined with sexual promiscuity. They lose their sense of duty to family and community. The circle of interests is sharply reduced, there is a swagger in manners and behavior. Even the instinct of motherhood weakens significantly, the woman ceases to take care of the children. Often such mothers are deprived of motherhood. Binge drinking in women is observed less often than in men, more often they drink alcohol sporadically. Their personality degradation occurs faster, alcoholic psychoses are more common [1].

Patients with chronic alcohol intoxication develop lesions of the peripheral nervous system (polyneuritis, neuralgia) and internal organs (cirrhosis of the liver, tuberculosis, etc.). With alcoholism, industrial and domestic injuries, burns, and electrical injuries occur more often [2].

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According to the American Institute for the Study of Alcoholism, there is strong evidence of alcoholism as a cause of cancer [3]. Chronic alcoholics are more likely to have cancers of the oral cavity, pharynx, larynx, esophagus, and liver [4].

It is necessary to treat patients in the early stages in the conditions of a neuropsychiatric or narcological dispensary. In the identification of persons suffering from alcoholism, not only the specialized service takes an active part, but also all medical institutions and, subsequently, are directed to active anti-alcohol treatment. When treating patients with alcoholism, the reasons contributing to the development of the disease are identified. It should be noted that the first condition for starting treatment is the immediate cessation of alcohol consumption. Success in treatment can be achieved only by conducting it in courses, and then dynamically observing the patient for a long time. In this case, family and collective psychotherapy is important.

Along with drug interventions, all anti-alcohol treatments should be accompanied by extensive explanatory work on the harmful effects of alcohol. The patient should be instilled with the idea of the need to completely abandon the use of alcoholic beverages.

In the system of systematic fight against alcoholism, compulsory treatment of alcoholics plays an important role. It is well known that many alcoholics categorically refuse to carry out medical treatment, while others (under pressure from the family and the public) carry out treatment formally. In some patients, after treatment, after a certain (sometimes long) period of time, relapses of the disease occur. Reasons for relapses can be: delay in treatment, insufficient (interrupted) treatment, negative attitude in the family and comrades to the fact of treatment for alcoholism, lack of dispensary observation of the patient, the habit of drinking alcohol in the family and close friends [5,6]. Correct, reasonable behavior of others and, above all, relatives and friends of a person who has been treated for alcoholism, is an essential factor in the prevention of relapse of the disease.

CONCLUSION

It is necessary to create an uncompromising atmosphere around people who drink alcohol, to effectively use various forms of anti-alcohol work. In anti-alcohol propaganda, a special place should be taken by lectures and conversations at enterprises, clarifying the negative side of the issue, showing films on the topic, conversations with relatives and the patient himself.

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