

TACTICS OF PHYSIOTHERAPEUTIC MANAGEMENT OF PATIENTS WITH EPILEPSY, BASED ON CARDIGRAPHY INDICATIONS**Tuygunoy Raxmonberdievna Xodjanova**

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Annotation. A child suffering from a severe form of epilepsy according to its characteristics, he should receive the following types of rehabilitation: medical, pedagogical and social. Medical rehabilitation in the treatment of mild forms of epilepsy in children plays a leading role. The purpose of the study. For medical rehabilitation of children with epilepsy determining the necessary measures.

. On the rehabilitation of children with epilepsy

Keywords: degenerative pineal stenosis, clinical manifestations, conservative therapy

Introduction. Medical rehabilitation of children with epilepsy, first of all, EEG of the brain in order to correctly diagnose epilepsy and performing MRI examinations to adequately choose anticonvulsant therapy and that's it along with drug control of convulsions - that is, convulsions stop attacks. Against the background of effective antiepileptic therapy carried out in the appropriate dosage regimen, continued for 3 months after reaching a remission, gradually expanding the scope of rehabilitation

Possible. Such is the regular dynamic analysis of encephalographic data allows regulating the intensity of rehabilitation loads in patients. Tactics of physiotherapeutic treatment of patients with epilepsy [Batysheva T.T. and others. 2015]:

1. At the time of epileptic attacks during the current period and for less than 6 months during clinical remission of epileptic seizures, physiotherapy is not performed.
2. All types of physiotherapy in remission of attacks from 6 months to 2 years used, skin electrical stimulation of muscles and peripheral nerves projections, hydromassage and mud therapy, as well as any effect on the head with the exception of
3. All types in the pool while maintaining epileptiform activity in the EEG It is

recommended to avoid electrophysiotherapy and group exercises.

4. In seizure remission for more than 2 years (epileptiform activity in EEG (if not) physiotherapy can be carried out in full.

5. According to the type of BEPD (good-quality epileptiform forms of childhood) in the EEG if there is regional epileptic activity, the whole spectrum of physiotherapeutic treatment can be done.

6. If multi-regional epileptiform activity is detected in the EEG according to the type of BEPD (good-quality epileptiform forms of childhood), transcranial electrical stimulation and The issue of conducting amplipulse therapy is resolved after repeated EEG after 4-6 months will be done. Individual exercises with a student in the pool are not considered a contraindication.

Materials and methods. Measures to prevent epileptic seizures.

1. Avoid overeating and excessive work
2. Avoid provocations with flashing lights (on a train, at a disco, etc.).
3. Avoid sugary, carbonated drinks (Coco-Cola, Pepsi-Cola).
4. Avoid physical activity that causes hyperventilation.
5. Preventing body temperature rise.

Thus, in the medical rehabilitation of children with epilepsy diagnosis, adequate anticonvulsant therapy, medication and physical rehabilitation, prevention of epileptic attacks should be followed.

Conclusion. as a result of the examination, 209 (60%) men and 139 (40%) of women aged 25–84 years with cerebral stroke, gender differences were identified Peculiarities in the frequency of risk factors and causes of cerebral stroke in various age groups. Ischemic strokes are more common in working age (54.5%), and hemorrhagic - after 60 years (53.2%). Ischemic strokes in women are predominantly observed at age over 60 years of age, and among men of working age – 58.2%. Hemorrhagic strokes in women and men were more common after 60

years. In both men and women, hypertension is more often cause of cerebral strokes up to 60 years of age, and atherosclerosis and its combination with hypertension is more common in patients of both sexes observed after 60 years, cerebral strokes have gender characteristics in

different age groups, which must be taken into account in clinical practice.

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