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MEASURESTO COMBAT INFECTIOUS DISEASES IN THE EARLY YEARS OF INDEPENDENCE IN UZBEKISTAN

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Annotation

It is known that, in Uzbekistan, acute infectious diseases had increased due to ecological crisis which occurred during Soviet regime years and deficiencies in the health care system For this reason, in the years of independence in Uzbekistan, the measures of combating acute infectious diseases were carried out. The measures which carried out in this direction in the first years of independence played an important role in this. In this article are analyzed the measures of combating acute infectious diseases in the early years of independence in Uzbekistan and their results.

Keywords: environmental crisis, infectious diseases, nation gene pool, comprehensive program for 1996-1998, medical institutions, vaccination measures.

During the years of the Soviet regime, Uzbekistan was characterized by a high level of infectious diseases. Due to the severe environmental situation in the region in the late 1980s, the spread of acute infectious diseases in the country increased. The environmental crisis caused by the drying up of the Aral Sea was also one of the main factors contributing to the spread of infectious diseases. As a result, the epidemiological situation worsened. In particular, according to 1990 data, there were 7.6 cases of typhoid, 4.8 cases of paratyphoid, 36.5 cases of salmonellosis, 42 cases of poliomyelitis, 19.1 cases of measles, 604.8 cases of acute intestinal infections (OIE), 848.4 cases of hepatitis per 100,000 populations. In addition, there were 950 cases of brucellosis, 12 cases of diphtheria, 13 cases of anthrax and 5,949 cases of tuberculosis [1, p 11].

The high incidence of the above-mentioned infectious diseases was primarily due to the unsatisfactory level of social living conditions of the population of the republic. In particular, about 5 million people were not provided with quality drinking water from the

taps, and had touse water from water reservoirs or transported water.The level of waste disposal in the settlements did not meet the requirements of the norm. Also, sewage networks for wastewatermanagement were not fully provided even in the cities. During this period, along with environmental problems, there was a certain “contribution” of medical institutions in the spread of infectious diseases and pollution of the external environment. In particular, environmental pollution increased as a result of overcrowding of pits for wastewater and sewage from maternity hospitals, surgery, tuberculosis, dermatovener eology and other hospitals. In some places, insufficient attention was paid to the decontamination of waste and its destruction by incineration in special furnaces. The work on protection of the environment in the medical institutions from their waste and sewage was carried out unsatisfactorily.

In addition, in some cases, medical facilities themselves have become a breeding ground for infectious diseases. In particular, cases of infectious toxicoseptic diseases were recorded among pregnant women and their babies in maternity and children's hospitals. The results of laboratory tests conducted in the environment of these hospitals indicated that there was a gross violation of sanitary requirements and disinfection measures. Due to the unsatisfactory and insufficient material and technical conditions of maternity hospitals in the country, the risk of the spread of infectious diseases accompanied by cold and purulence in these institutions increased. Also, the spread of viral hepatitis B, which can be transmitted in the republic's polyclinics and hospitals, was caused by the inadequacy of the centralized sterilization points of these institutions. The lack of medical equipment, especially disposable ones, and the indifference of the staff to their work also played a big role.

At that time, about 8 million people in Uzbekistan sought medical care each year due to illness, and 240,000 of them were infected with contagious diseases. The saddest part is that 70 percent of them were babies. The situation was particularly dire in the autonomous republic of Karakalpakstan. This republic ranked highest in the former USSR in terms of infectious diseases such as tuberculosis, viral hepatitis, allergies, typhoid fever. The situation in this area in the country was more pronounced in comparison with developed foreign countries. If 5 out of every 1,000 babies born under the age of one died in Japan and 7 died in Canada at the same time Uzbekistan recorded 39 infant mortality cases (excluding Karakalpakstan, author's note) and 60 were recorded in Karakalpakstan (1989 figure) [7, p 89]. For this reason, the situation required the government to develop a strategy to combat infectious diseases and implement it consistently.

From the first days of Independence, Uzbekistan has paid great attention to public health. The reason for this is to preserve the nation's gene pool and maintain the health of the younger generation, and thus to bring up an intellectually gifted generation in the country. Infectious disease control measures have played an important role in achieving this goal.

Before Uzbekistan gained independence, most of the drugs preventing infectious diseases were not produced in the country. This situation created major problems in the fight against infectious diseases, which were on the rise in the country. In particular, in connection with the country's independence, the existing agreements were unsatisfactorily implemented. For example, the only company to produce a measles vaccine was the Moscow Bacterial Drugs Company, which closed in December 1988. Since 1989, the production of DTP and BCG vaccines by the Tashkent Vaccine Production Association has been banned for some reasons [1, p 53].

In March 1992, at a meeting of the board of the Ministry of Health the main directions of development of the health care system of the republic and a comprehensive program for 1996-1998 were approved. Prevention and elimination of infectious diseases became one of the important tasks in the work carried out under this program. The Law on State Sanitary Control of July 3, 1992 served to strengthen the legal framework for this work. In particular, the establishment of sanitary control by the state made it possible to organize and implement measures for the prevention and elimination of infectious diseases in a centralized manner. Preventive measures played an important role in the state strategy for the fight against infectious diseases, and vaccination of the population against various infectious diseases was carried out on a large scale.

In 1993, the situation with plague and infectious diseases in the world, which were extremely dangerous for humans, reached a worrying level. It was noted that a new type of plague pathogen, Bengal type 0139, which was difficult to diagnose bacteriologically, spread rapidly in South and East Asia in 1992-1993.In Uzbekistan, the analysis of these diseases over the years has shown that the situation has worsened and plague and other highly contagious diseases may enter the country en masse. In 1993, the Republic of Tajikistan, which was plunged into civil war, and Afghanistan, which is still in turmoil, became infected with the plague. Also, in 1992-1993, the presence of 01 serotype of plague in the open water basins was detected in almost all regions of Uzbekistan [2, p 31].

In the context of economic difficulties, the growth of acute intestinal diseases in the

Republic was observed as a result of poor sanitation in some settlements, lack of clean drinking water and lack of sewage pipes and other problems. In 1994, certain measures were taken in health care organizations to improve the epidemiological situation with the above-mentioned diseases, and to implement the order of the Ministry of Health of the Republic of Uzbekistan on quarantine and sanitary protection against highly dangerous diseases. In particular, the "Comprehensive program of interdepartmental measures for sanitary protection of the territory of the Republic of Uzbekistan on the entry and spread of plague and other highly contagious diseases for 1994-1996" was developed [2, p 33]. and put into practice. In 1994, a working group of the Ministry of Health of the Republic, consisting of leading scientists and practitioners, developed a forecast for the city of Tashkent and all regions .In addition, training and retraining of all medical personnel for the diagnosis, clinical treatment, epidemiology of plague and other highly contagious diseases, as well as measures to prevent of their entry and spread in the region started. Additional sanitary quarantine points were also set up at customs, border crossings between Tajikistan and Turkmenistan, and at Samarkand, Urgench and Nukus airports. At pest control stations, inspections of natural foci in the area and measures to prevent the disease began. The measures taken have played an important role in the prevention of these diseases.

The influx of plague into Uzbekistan was also caused to some extent by citizens who went abroad for commercial purposes. In particular, the introduction of plague through tourism, through Uzbek citizens traveling for commercial purposes in countries endemic to the disease posed an even greater risk. In 1994, a total of 27 cases of plague were brought to Uzbekistan through commercial tourists. Of these, 10 cases were reported in Samarkand region, 8 in Fergana region, 3 in Tashkent and Jizzakh regions, 2 in Tashkent region and 1 in Bukhara region [4, p 151]. As a result of prompt measures taken by medical institutions, they were identified in a timely manner and all anti-epidemic measures were taken to prevent the spread of the disease.

Measures were taken to rehabilitate children who couldn’t be vaccinated due to medical restrictions. In particular, 4729 children were healed in Bukhara region, 9746 in Tashkent region and 3032 in Khorezm region [2, p 51]. In addition, the implementation of the so called "cold system" in all medical institutions was constantly monitored by sanitary-epidemiological stations. Specialists at sanitary-epidemiological stations in many provinces were retrained for laboratory diagnosis of asthma and measles and to determine the level of

immunity. At the same time, the timely delivery of vaccines against poliomyelitis and measles played an important role in the fight against these diseases throughout the country. In particular, since the beginning of 1994, 864,000 doses of polio and 326,000 doses of measles vaccines have been received and distributed to the provinces [2, p 34].

The measures taken by the government against various infectious diseases were also intensified. In particular, over the past years, the country has paid great attention to large-scale measures to protect the health of children, including the reduction of morbidity and mortality. Since 1993, based on the experience of the World Health Organization, a new calendar of vaccinations has been introduced. In this regard, during 1993-1994, great work was done throughout the country. In particular, vaccination against diphtheria was carried out on a large scale. To this end, the Ministry of Health issued a special order on improving the vaccination against infectious diseases, a special program in this area for 1993-1996, a plan of action to prevent the spread of diphtheria, recommendations for diagnosis and treatment, measures to combat the epidemic. At the same time, a draft national vaccination program and other guidelines were developed and their implementation was closely monitored.

In addition, it was important to establish systematic control of vaccination measures. In particular, a council for coordination and control of vaccination was established under the Ministry of Health. The members of this council were attached to the provinces. Fourteen working groups consisting of scientists from universities, research institutes and medical staff working in the field of practice were formed and sent to the regions to provide practical and advisory assistance to medical staff. The work done by these groups was regularly analyzed in the Ministry of Health.

In this regard, the Ministry and the Republican Sanitary Inspection also carried out large-scale organizational, methodological and control work. In particular, the state of vaccination in the country and the issue of its further improvement were considered by the Republican Commission for Combating the Epidemic, the Ministry of Health and the Sanitary-Epidemiological Council. In addition, a special order of the Cabinet of Ministers and an order of the Ministry of Health were issued to hold national polio vaccination days in the country. On the basis of these directives, 14,699 vaccination groups and 13,467 vaccination points were established throughout the country. 11,720 doctors and 40,950 nurses took part in this large-scale event [3, p 81]. At the same time, the implementation of monthly vaccination plans at the regional level, the timely delivery of vaccines to the regions as a humanitarian aid

was strictly controlled. As a result, the deliveryof these vaccines by aircraft within 3-4 hours and their storage in refrigerators before shipment were insured.

Seminar meetings were also held on the implementation of vaccinations for local pediatricians, infection ist s, epidemiologists and nurses. The measures taken have played an important role in combating the spread of communicable diseases across the country. In particular, a number of important indicators were achieved as a result of measures taken to combat and reduce infectious diseases among children. In 1994, 80 percent of children under 1 year of age were vaccinated against polio, 67 percent against pertussis and whooping cough, 71 percent against measles, and 93 percent of newborns against tuberculosis [4, p 206].

In 1995, systematic work was continued to prevent and eliminate the spread of plague and other contagious infections in the country. In this regard, the activities of sanitary checkpoints became important. Until that time, the existing sanitary checkpoints (Tashkent International Airport, Termez River Port, etc.) operated in accordance with the old Charter and sanitary regulations. In particular, in 1995, the Tashkent city airport sanitary checkpoints conducted medical inspections of 1,687 domestic and 317 foreign aircrafts. A total of 3,764 people from countries with an acute epidemiological situation, 3,330 people from countries with plague and 12,018 people from countries with malaria visited the country. A list of them was given to the regional health authorities and no patients were identified among them [5, p 132].

The Termez River Port Sanitary Checkpoint also controlled more than 20,000 vehicles from Afghanistan and 10,000 vehicles from the country. The activities of sanitary checkpoints were carried out in coordination with the border and customs services. During the summer season, sanitary checkpoints also operated on international highways to Afghanistan, Turkmenistan, Tajikistan and Kazakhstan [5, p 133]. At these points, passengers of buses and personal vehicles were regularly checked. These measures played an important role in preventing the entry of such infectious diseases into the country.

Similar measures have been taken in recent years. As a result, by 1996, the outbreak of infectious diseases had been prevented. Despite the difficult epidemiological situation with plague in neighboring countries and around the world, the penetration and spread of plague from abroad was not allowed .Due to the mass vaccination against diphtheria, which was on the rise, an unpleasant epidemic situation was prevented and the disease was significantly

reduced. Measures against poliomyelitis also yielded results. In particular, by 1997, the disease had not been reported. The measures taken in Uzbekistan to eradicate polio before 2000 were positively assessed at an international meeting in October 1996 in Tashkent [6, p 75].

In conclusion, in the first years of independence, the fight against infectious diseases in the country was complicated. Nevertheless, in Uzbekistan, regular measures have been taken to protect the health of the younger generation. As a result of measures taken by the government against infectious diseases throughout the country, the prevention of infectious diseases was achieved in the first years of independence. In addition, the legislative framework for the fight against infectious diseases has been strengthened, as well as advocacy work, and as a result, the population's literacy in this area has increased, leading to an improvement in overall performance. Also, despite the difficult situation with the spread of infectious diseases in neighboring republics, the entry and spread of highly dangerous infectious diseases in the territory of the republic was not allowed.

REFERENCES

1. Central State Archive of Scientific, Technical and Medical Documents of the Republic of Uzbekistan, fund M-372, list 1, volume 82, page 11
2. Central State Archive of Scientific, Technical and Medical Documents of the Republic of Uzbekistan, fund M-372, list 1, volume 239, page 31
3. Central State Archive of Scientific, Technical and Medical Documents of the Republic of Uzbekistan, fund M-372, list 1, volume 314, page 81
4. Central State Archive of Scientific, Technical and Medical Documents of the Republic of Uzbekistan, fund M-372, list 1, volume 315, page 151
5. Central State Archive of Scientific, Technical and Medical Documents of the Republic of Uzbekistan, fund M-372, list 1 (continued), volume 373, page 132
6. Central State Archive of Scientific, Technical and Medical Documents of the Republic of Uzbekistan, fund M-372, list 1 (continued), volume 405, page 75
7. Educational-methodical manual on the study of I. A. Karimov's book Uzbekistan on the threshold of independence, Tashkent, 2012, p. 89