

G.E. Evdokimov, V.N. Egorova, S.P. Vinokurova

MEDICAL AND SOCIAL ASSISTANCE TO HIV-INFECTED PATIENTS

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ABSTRACT

The purpose of research is to study the quality of medical and social care and the attitude of the population towards HIV-infected people in Yakutsk in the Republic of Sakha (Yakutia). The main methods of research are the analysis of normative and legal acts and statistical data, a sociological questioning. A study of the opinion of HIV-positive people about their satisfaction with the quality of medical and social services, living standards and social status showed that 90% of patients receive the necessary medical care and often attend the AIDS Center.

The results of the research showed that the majority of HIV-infected people in Yakutsk, young people aged 19 to 29, contracted sexual intercourse, which in turn indicates that there are still many young people who are poorly informed about the threat HIV infection and other STDs. Survey of HIV-infected and medical workers of the State Bank of the Yakut Republican Center for AIDS Prevention and Control revealed that in our republic a sufficiently effective and qualified medical and social work is carried out, providing crucial help to HIV-infected people, but not enough social assistance is provided.

It has been found that the society is generally benevolent towards HIV - infected patients and is ready to provide some form of support to a person living with HIV, regardless of whether they know him or not. However, the responses also showed that HIV-positive status appears as an extremely strong social label, significantly worsening the attitudes of others around it. It was noted the need to open a sanatorium-type rehabilitation center for HIV-infected people.

Keywords: HIV - infected, medical and social services, medical aid, psychological help.

Introduction. In the modern world, a serious danger to life and health of people is represented by diseases denoted by the term "socially dangerous diseases". In the Russian Federation, diseases approved by Government Decree No. 715 of 1 December 2004 on the approval of the list of socially significant diseases and a list of diseases that pose a danger to others are considered socially dangerous diseases. The resolution lists the following diseases: HIV, viral fever, hepatitis B, hepatitis C, sexually transmitted infections, tuberculosis, cholera, and others [1]. In the Republic of Sakha (Yakutia), the most dangerous and widespread, difficult to cure or completely incurable, are the diseases of the human immunodeficiency virus, tuberculosis and hepatitis B and C.

HIV is a slowly progressing disease caused by the human immunodeficiency virus. The virus affects the cells of the immune system. As a result, the work of the immune system is inhibited, the syndrome of acquired immune deficiency (AIDS) develops, the patient's body loses the ability to protect itself from infections and tumors, secondary opportunistic diseases that are not characteristic of people with normal immune status. AIDS, in turn, is the terminal stage of HIV infection, the period from infection with the human immunodeficiency virus to the development of AIDS lasts an average of 9 to 11 years.

The main normative legal act regulating the provision of medical and social assistance to persons affected by HIV in the Russian Federation is the Federal Law of 30 March 1995 on the prevention

of the spread of the disease caused by the human immunodeficiency virus HIV infection). «In addition to this law, at the present stage, the organization of medical and social care for people with HIV and AIDS is implemented in accordance with the Fundamentals of the Russian Federation legislation on the protection of public health and Federal Law No. 38-FZ of 30 March 1995 "On preventing the spread of the disease in the Russian Federation, caused by the human immunodeficiency virus (HIV infection) ".

Thus, medico-social work with HIV-infected and AIDS patients is based on the legal framework that determines the social status, rights and duties of this contingent. Expansion of the list of normative legal acts and clarification of their content is associated with an increase in the number of the disease, as well as awareness of the need to provide social and medical assistance to HIV-infected and AIDS patients.

According to the statistics of 2016, all HIV cases in the Republic of Sakha (Yakutia) are 1752, of which 1332 Russian citizens, including 833 men and 489 women, the remaining 420 patients are migrants from other countries. In the first place in terms of the number of HIV infected is Mirninsky district - 495, then the city of Yakutsk - 467 and in third place Neryungri district - 207. The greatest proportion of HIV-infected falls on the age of 19-29 years-55.1%. It should be noted that analysis of HIV-positive statistics shows that the number of people infected with this virus is growing rapidly in the Republic of Sakha (Yakutia) and throughout the Russian Federation.

The **purpose** of our study is to study the quality of medical and social care and the attitude of the population towards HIV-infected people in Yakutsk in the Republic of Sakha (Yakutia). The main methods of research are the analysis of normative and legal acts and statistical data, a sociological survey.

A study of the opinion of HIV-positive people about their satisfaction with the quality of medical and social services, living standards and social status showed that 90% of patients receive the necessary medical care and often attend the AIDS Center. Half of the respondents believe that they receive social assistance, 30% of the subjects found it difficult to answer this question, 20% of the patients answered negatively. Patients have a fairly complete picture of the consequences of AIDS and 80% of them believe that it is incurable. Half of the patients do not hide their positive diagnosis of HIV infection from their relatives, friends and close people, receive moral support and discuss with them problems related to the disease.

To the question "What kind of help would you like to receive from the public?" many refrained from answering, some answered: "Understandings" and "Calm attitude towards HIV-positive people". Naturally, people are different, and react differently to the fact that their close person, relative, friend, friend is suffering from HIV and because of insufficient information about the illness, and possibly lack of psychological preparedness, they may get scared and turn away from the latter.

Nevertheless, 70% of the polled pa-

tients noted that they do not feel a sense of discrimination by the society.

Half of the respondents are satisfied with the help provided by the state, the patients additionally suggested that they would like to receive assistance in the form of cash payments. It was also noted the desire of patients to establish a sanatorium-type rehabilitation center for HIV-infected people. Perhaps opening such a facility would help many people living with HIV raise their spirits, help them to intensify their internal forces to prolong their lives.

Based on the results of the study, it can be concluded that a larger number of people suffering from HIV in Yakutsk, namely 80% have sexually transmitted infections, which indicates that there are still a lot of people who do not adhere to safe sex and lead a lascivious lifestyle. Perhaps this is due to the lack of public awareness about the threat of HIV infection and irresponsible treatment of their health by individuals.

As the study showed, in general, people are exposed to HIV at a young age - from 17 to 25 years. This indicator is confirmed by the data of the statistical department of the AIDS Center, according to which 60% of patients are under 30 years old.

The next stage of our study was a survey of medical personnel of the State Budgetary Agency of the Republic of Sakha (Yakutia) "Yakut Republican Center for AIDS Prevention and Control" to identify and assess the quality of medical and social services for HIV-infected people in the Republic of Sakha (Yakutia).

GBU "Yakut Republican Center for AIDS Prevention and Control" as a multidisciplinary medical and prophylactic institution conducts, mainly, medical, diagnostic and medico-preventive work, which was confirmed by the conducted research.

In the survey, 5 doctors from the AIDS center clinic, 4 nurses and 1 psychologist who were directly involved with HIV-infected patients participated.

An analysis of the responses of the survey participants showed that the main activity of the AIDS Center is the provision of medical care (56% of responses) to infected patients, followed by psychological support (25%) and social (13%). Legal assistance is not rendered at all, which, in principle, does not fall under the responsibility of this institution.

AIDS Center's medical professionals, as specialists who most often contact people with HIV-positive status, are sure

that HIV-infected people have a greater sense of rejection and loneliness, which in turn is more likely due to the attitude of society towards their diagnosis. Employees of the AIDS Center, as professionals in their case on HIV in our country, believe that people most affected by HIV are lacking effective social assistance from the state, as well as subsequent rehabilitation work.

According to the medical staff of this institution, HIV-positive people badly need psychological help, which is included in the complex of the concept of "medical and social assistance", and equally need social assistance, intensive treatment and support of the community.

The degree of rendering medical care to HIV-infected people in the Republic of Sakha (Yakutia) "by the AIDS Center staff is not very high - an average of 7.1 points out of 10, and medical and social assistance by 6 points.

The results of the research also revealed personal qualities of employees, such as tolerance, compassion and goodwill. Doctors, nurses and a psychologist of this institution in the process of communicating with their patients gently learn to "live with a diagnosis", "adhere to an optimistic attitude", "observe a healthy lifestyle", "trust doctors" and "do not give up".

Summarizing the above, it can be concluded that HIV-infected patients could learn to live with this status. Overcoming the attendant difficulties, as well as maintaining the old way of life are possible with timely psychological support and comprehensive rehabilitation work.

One of the tasks of our study was to study the attitude of Yakutsk residents to HIV-infected people. A total of 53 women, 47 men, were interviewed with different members of the community: 25 school-children, 25 students, 25 workers and 25 pensioners.

An analysis of the answers of the subjects found that the majority of respondents (66%) feel compassion and pity for HIV-infected people, and also revealed that the society is ready to provide some form of support for a person living with HIV, regardless of whether they are he knows them or not. Many subjects (62%) noted that they would not turn away from a relative or someone with strong connections if the latter were found to have HIV-positive status, but would support them. 74% of respondents are ready to provide moral support and help in the fight against the virus, and 19% could help financially and only 4% did not an-

swer. 96% of the interviewed people noted that they could provide some form of help to HIV-infected people, perhaps such a positive attitude of almost all respondents is due to the fact that there were no such items as "would not help" in the answers. 4% chose the answer "other" without specifying the reason. 47% of respondents would advise intensive treatment, 33% - not to give up and fight for life, 15% - to live a normal life and not "fixate" on the problem, 2% - turn to a psychologist and 2% - refrain from advice. All the advice was benevolent, no one showed a negative attitude, which indicates that there is no discrimination against HIV-infected people.

However, when questions relate to close, contact with HIV-infected individuals, the answers become less comprehensible and compassionate. So, to the question "What would you do if you learned that your child goes to a kindergarten or to a school where a child with HIV is living?", Some gave negative answers until the child was excluded from the institution of an HIV-infected child (10%). Also, there are answers that are close in meaning to the previous one (5%) - they would arrange a scandal. 20% of the subjects would transfer their child to another group or class, 38% would transfer to another institution. 9% refrained from responding, and only 17% did not take any action. These results also indirectly show that there is a label placed on people living with HIV. Respondents' answers indicate that HIV-positive status is an extremely strong social label that makes a person "not desirable" a member of society, thereby significantly worsening the attitude towards him.

Conclusion. HIV infection affects all major aspects of the life of an infected person. The severity of the patient's condition is due not only to physical causes. Feelings, thoughts, experiences of people living with HIV, their changed social status, relationships with others are no less important for their future life than the presence or absence of clinical symptoms of the disease. Adaptation of HIV-infected people to the changed conditions of life depends on many factors, first of all on the timely provided psychological support, which is indicated in their answers by patients and AIDS doctors of the Yakutsk Center.

It is known, although at the moment this disease is not yet curable, the successes of rapidly developing antiretroviral therapy give hope to these patients. Currently, the life expectancy of an HIV-

infected person with active participation of a patient in the treatment process can be equal to the life expectancy of an average healthy person. HIV-infected patients could learn to live with this status [1]. Overcoming the psychological and social difficulties that have arisen, as well as the restoration and preservation of the old way of life are possible with timely psychological support and comprehensive rehabilitation work. That is why the problem of social rehabilitation is relevant.

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The authors

1. Evdokimov Harry Eduardovich, student of the Institute of Psychology, contact information: 677016, Yakutsk, Kulakovskiy street 46/2, room 26 89644299617, ev-alice07@mail.ru;

2. Egorova Valentina Nikiforovna, cand. psychological science, Associate Professor of the Department of Psychology and Social Sciences, Institute of Psychology, NEFU, contact information: 677013, Yakutsk, Kalandarashvili street 21/2, flat 6 8241663788, VE373@mail.ru;

3. Vinokurova Svetlana Petrovna, cand. medical science, Associate Professor of the Department of «Propedeutic and Faculty Therapy with Endocrinologists and LFK», Medical Institute, NEFU, contact information: 677907, Yakutsk, Khatassy village, Severnaya street 4, 89142207804, Xitvsp@mail.ru.

E.Yu. Sizykh, N.A. Solovyova, M.A. Varlamova, A.T. Dyakonova, Kh.A. Kurtanov, N.I. Pavlova

MOLECULAR GENETIC STUDIES AS AN AUXILIARY METHOD FOR DETERMINING RISK FACTORS IN THE CLINICAL EXAMINATION OF THE ADULT POPULATION

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ABSTRACT

Indicators of morbidity of adult population according to out-patient office of Hospital of the Yakut Science Center of Complex Medical Problems (Yakutsk) during 2015-2017 are presented in article. The characteristic of dynamics and structure of cases of the general and primary incidence is given. Decrease in level of the general incidence for all analyzed period is established. In structure of the general incidence of adult population the prevalence of diseases of respiratory organs and the blood circulatory system is revealed. The analysis of dynamics of indicators of primary incidence has shown the stable growth of her level with prevalence a case of diseases of respiratory organs.

The obtained data on the dynamics and distribution patterns of diseases have served as the basis for selecting the directions of molecular genetic research, the search for associations of genetic markers of the system of cytokines responsible for the development and maintenance in the body of chronic systemic inflammation, the genes B2 - adrenoreceptor and genes of cold receptors involved in the hereditary predisposition to hyperreactivity of the respiratory and the cardiovascular system in response to the effects of low temperatures.

Keywords: clinical examination, morbidity general and primary, structure and dynamics of morbidity, genes of cytokines, adrenoreceptor genes, cold receptor genes.

Introduction. Clinical examination is a method of systematic medical observation of the health status of certain groups of the healthy population or patients with chronic diseases with the aim of preventing and early detection of diseases, timely treatment and prevention of exacerbations.

Clinical examination is aimed primarily at the early detection of chronic non-infectious diseases, which include: diseases of the circulatory system and especially ischemic heart disease and cerebrovascular diseases, malignant neoplasms, diabetes, chronic lung diseases, diseases of the musculoskeletal system, gastrointestinal tract and urinary system. These diseases cause more than 75% of all mortality in our country.

In addition, according to the regulatory

documents, a clinical examination is designed to identify and correct the main risk factors for the development of diseases, such as elevated blood pressure, cholesterol and glucose in the blood, smoking, harmful alcohol consumption, overweight or obesity [3]. But, taking into account that even minimal deviations from the norm of laboratory or functional indicators, and even more so the initial clinical manifestations of diseases occur when there are already established pathological processes in the human body, the question arises of the timeliness of clinical examinations regarding the prevention of risk factors.

To improve the effectiveness of measures to identify predisposing risk factors, modern medicine has technologies that are able to calculate the

risk of developing diseases long before the first clinical, laboratory and functional changes appear, in other words using high-tech diagnostic methods, it is possible to carry out not only accurate molecular diagnostics, but also to determine a person's predisposition to a particular disease [2].

The use of the results of molecular genetic testing can significantly facilitate the solution of the task of conducting all citizens with a history of risk factors for brief preventive counseling, as well as for individuals with high and very high total risk of individual in-depth and group (patient's school) preventive counseling in the context of dispensarization. Such active prophylactic interventions make it possible to quickly and significantly reduce the likelihood of the development