

Patients with Epilepsy and Seizure Syndromes Psychology

Jurayeva Dildora Nasirdinovna

*Scientific leader Department: Pedagogy and Psychology, Tashkent Medical Academy,
Uzbekistan, Tashkent*

Zakirjonova Madinabonu Rustamjon qizi

2nd year student, Faculty of Medicine, Tashkent Medical Academy, Uzbekistan, Tashkent

Annotation: Epilepsy is a chronic brain disease characterized by seizures, which are manifested by motor, sensory, vegetative and mental disorders. The prevalence of epilepsy among the population is 7-10 per 1000 people. Since the disease has many etiologies, it can occur at different ages, but 75% of epilepsy begins before the age of 20. The incidence is almost the same in men and women. According to experts, at least 30% of patients with epilepsy have mental disorders.

According to Uzbek statistics: The number of patients with epilepsy among the population of Uzbekistan is more than 200,000. Of these, 120,000 are children and adolescents. According to the World Health Organization (WHO), in 2020, 820 patients died from epilepsy in Uzbekistan, which is 0.51% of total deaths.

Keywords: epilepsy, psychological characteristics of epilepsy, medical perspective on epilepsy, relationship between epilepsy and psychological state.

Epilepsy (Greek. epilepsio – I seize) Epilepsy is a chronic brain disease characterized by seizures, which are manifested by motor, sensory, autonomic, and mental disorders. It is a common brain disease in which the patient has repeated seizures. A seizure or epileptic seizure is a short-term change in normal brain activity, the main symptom of the disease. When two or more seizures occur, the patient is diagnosed with epilepsy. This disease usually develops as a result of chronic disorders in the nervous system, making the patient prone to repeated seizures. In addition to seizures, most patients with epilepsy also have cognitive (cognitive) and psychological problems - such as anxiety and depression - which negatively affect their quality of life. Some seizures may take the form of prolonged staring at one point. Other seizures cause the person to fall, shake, and lose awareness of what is happening around them. Attacks can last from a few seconds to a few minutes.

As with other neurological diseases, the hereditary factor also plays a role in epilepsy. Until the 1950s, the importance of the hereditary factor in epilepsy was greatly exaggerated in most countries, but later scientific advances dispelled this suspicion. According to current statistics, if one of the parents suffers from epilepsy, the risk of having a sick child from them does not exceed 10%.[1]

EPILEPSY—CAUSES OF DEVELOPMENT, TREATMENT OF THE DISEASE

There are many classifications of epilepsy, and in medical practice, epilepsy is most often divided into 3 types:

- **symptomatic epilepsy**- development due to some brain disease
- **idiopathic epilepsy** –development in cases where a hereditary factor has been identified and brain diseases have not been identified
- **cryptogenic epilepsy** –develop in cases where no cause is identified

Focal (partial, focal, local) seizures are also distinguished. Focal seizures are caused by excitation of the structures of the brain, especially the cortical centers. Depending on which centers are excited, they are manifested by attacks of movement and sensation in the face, arms and legs. Focal seizures are also

observed in the form of visual, auditory, olfactory and gustatory hallucinations, as well as phenomena of “seen before” or “never seen before”, sudden fear and attacks of pain in the abdomen.

The type of epilepsy with tonic-clonic seizures is slightly less severe. Because these seizures occur in an unconscious patient. In this case, mental disorders are also often observed and they are accompanied by auras.

Auras are the harbingers of epilepsy. A few hours before the onset of seizures, and sometimes a day or two before, the patient becomes sleepy, sometimes twitches appear on the face or body, and the corners of the lips begin to tremble. [2]

Epilepsy treatment is a complex and individualized process that takes into account the patient's age, type of epilepsy, frequency and causes of seizures. The main methods of treating epilepsy are:

➤ *Drug (pharmacological) treatment:*

The mainstay of epilepsy treatment is the use of anticonvulsant drugs (AEDs). These drugs are designed to reduce the frequency of seizures or stop them altogether. The most commonly used drugs are:

- ✓ Carbamazepine
- ✓ Valproic acid (Depakin)
- ✓ Phenytoin
- ✓ Lamotrigine
- ✓ Levetiracetam (Keppra)
- ✓ Topiramate

➤ *Surgical method:*

If medications are not effective (this condition is called drug-resistant epilepsy), surgery is considered. Surgical methods:

- ✓ Epileptogenic zone ablation – surgical removal of the part of the brain that causes epilepsy.
- ✓ Vagal nerve stimulator – a stimulator is placed on the vagus nerve in the neck to control brain activity.

➤ *Ketogenic diet:*

This is a low-carb, high-fat diet, especially used in children when medications have not worked. It helps reduce seizures by changing the metabolic balance in the brain.

➤ *Psychological and rehabilitation support:*

Depression, anxiety, and self-doubt are common in patients with epilepsy.

- ✓ Psychotherapy (cognitive-behavioral therapy)
- ✓ Group exercises and family counseling
- ✓ Rehabilitation centers – to improve the patient's quality of life and social adaptation. [4]

Epilepsy impact on human psychology

Epilepsy is characterized by mental disorders accompanied by varying degrees of changes in the patient's behavior. In epilepsy, the patient's behavior changes to varying degrees. In this disease, personality changes are characterized by their own uniqueness, as a result of which the term epileptic character appeared in medical practice. Such patients are very stubborn, stubborn, impatient, easily offended, moody, get involved in trivial matters, are extremely irritable and quarrelsome. Of course, these symptoms can be expressed to varying degrees. The degree of their manifestation depends on the type of epileptic seizures, their causes, how often they occur, and the patient's treatment regimen.

Most patients with epilepsy have unstable personalities. A patient who is in a good mood can suddenly change and start insulting loved ones with harsh words. This can happen in any situation.

Numbness of thoughts is also reflected in the patient's speech. The patient cannot answer the questions asked, repeats the same thing several times, or retells a story that was understandable at the beginning of the conversation. They usually speak emotionally, sometimes they are silent, sometimes they are giddy. Sometimes an unreasonable high mood, that is, euphoria, is observed. The patient jokes even with strangers, makes jokes, comes up with funny stories, shameless anecdotes, and constantly apologizes in the middle of a conversation. If the patient meets an acquaintance, he may even cry and tell them about his pain. In some patients, especially in prefrontal epilepsy, sexual activity increases, that is, a hypersexual state develops.

The degree of personality disorders observed in epilepsy is closely related to the age at which the disease begins, which area of the brain is affected, the number and type of seizures, and the treatment regimen. The earlier the disease begins and the more frequent the seizures (especially with loss of consciousness), the faster and more severe the pathological changes in the patient's personality develop.

Some older patients, especially women, exhibit puerilism, that is, childlike behavior. Not only their actions, but also their thinking patterns are not appropriate for their age. Sometimes, however, in a 5–7-year-old child, you can see adult-like intelligence. They think like adults and give useful advice. [3]

Conclusion

Epilepsy is a chronic disorder of the central nervous system, characterized by unprovoked and recurrent seizures (epileptic paroxysms). The disease can be associated with various etiological factors: genetic, infectious, traumatic and metabolic. Epilepsy is a common neurological disease, affecting approximately 50 million people worldwide. The disease is not limited to seizures, but also has a negative impact on cognitive, psychoemotional and social health. Epilepsy, especially those that begin in childhood, can seriously hinder the patient's personal development and social adaptation.

Modern antiepileptic drugs, surgical methods, ketogenic diet and psychological rehabilitation play an important role in the treatment of epilepsy. The success of treatment depends on the individual approach, the form and severity of the disease, and serves to improve the patient's quality of life. Therefore, a multidisciplinary approach is important in the treatment of patients with epilepsy, that is, the cooperation of a neurologist, psychologist, psychiatrist, dietitian and other specialists.

References

1. .“Tibbiyot psixologiyasi” (Z. Ibodullayev): 2008-y. 269-270- b
2. “Tibbiyot psixologiyasi” (Z. Ibodullayev): 2009 –y. 284-297 – b
3. Визел Т.Г. Основы нейропсихологии. М.: 2000.
4. Гельмут К., Дженифер Б. Гипнотерапия. М. 2002.
5. Джудит Тодд, Артур К. Богарт. Основы клинической и консультативной психологии. / Пер с англ. СПб 2001.
6. “Asab va ruhiy kasalliklar” kitobi (mualliflar: X. Shodmonov, X. Eshmurodov, O. Tursunova): 2004-y.
7. Ibadullayev Z.R. Dominant va subdominant yarim sharlarning o'tkir ishemik zararlanishlarida xotira buzilishining neyropsixologik_tahlili // «Umumiy amaliyot vrachi» jurnali. 2001.
8. Ибадуллаев З.Р. Межполушарная функциональная асимметрия и нейропсихологические синдромы при церебральных инсультах, пути их коррекции. Дисс.... докт. мед. наук. Т. 2005.
9. Изард Е.Е. Психология эмоций. - СПб.: Питер. М. 2000.

10. Липатова, Л. В. "Нейроиммунные механизмы эпилепсии как ключ к патогенетическому лечению заболевания." Эпилепсия и пароксизмальные состояния 2.3 (2010): 20-27.
11. <https://med24.uz/uz/bolezn/epilepsiya>
12. <https://uz.medicinehelpful.com/17223356-is-epilepsy-curable-causes-treatment-methods-prognosis>
13. <https://asab.cc/uz/jenciklopediya/1723-jepilepsijada-bemorlar-psiologijasi.html>
14. <https://klinikarassvet.ru/patients/zabolevaniya/epilepsiya/>
15. <https://asab.cc/uz/jenciklopediya/1721-jepilepsija-va-jepileptik-sindromlar.html>