



# MEDICAL PERSONNEL OF TREATMENT INSTITUTIONS IN UZBEKISTAN PROBLEMS OF SUPPLY

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## ANNOTATION

*The history of Uzbekistan in 1917-1945 is characterized by socio-political complexity, exacerbation of contradictions and contradictions in all spheres, exacerbation of social problems. In various spheres of state and public life, new procedures and methods of work were introduced in accordance with the requirements of the new system, which, in turn, created enormous difficulties for ordinary people. In particular, these changes have affected the performance of the health sector.*

**KEY WORDS:** *Uzbekistan, venereologists, phthisiatricians, obstetricians-gynecologists, infectious disease specialists, therapists, pediatricians, Syrdarya region, Navoi region, Tashkent Institute of postgraduate Medical Education.*

## DISCUSSION

The development of society and the state in many respects depends on the personnel working in the field, which is one of the main base points of a particular sector. In particular, medical personnel occupy an important place in social life, they are entrusted with a responsible and honorable task, such as maintaining the health of people, treating the sick.

In the years of Soviet rule, a number of measures were taken to prepare medical personnel with higher and secondary education in Uzbekistan, to provide personnel of therapeutic institutions, and their number increased from year to year.

In 1940, a total of 3,158 doctors worked in Uzbekistan, in 1980 45,995 doctors, in 1989 68,477 doctors. The average medical staff increased from 12.3 thousand people in 1940 to 3386000 people in 1989. In Uzbekistan, too, there has been a sharp increase in the work of training medical personnel, but most of the medical personnel with higher education have been working in the treatment institutions of large cities. For example, in 1960, 5,549 of 12,106 doctors in Uzbekistan operated in Tashkent city, but only 82 doctors in Jizzakh region, 166 in Sirdarya region, 172 doctors in Navoi region operated. In general, 80 percent of medical workers with higher education worked in city and district centers.

From the dissatisfaction of the conditions created for doctors, some specialists refused to come to the places where they were sent and work. In 1957,

32 of the 52 doctors who were sent to the region of Surkhandarya came to work, but no more.

The sending of representatives of the indigenous population by the Ministry of Health to medical universities was not put on a sufficient agenda at that time. Therefore, very few of the personnel working in the regions were made up of representatives of the local population. And doctors from other cities and villages went to their places when their prescribed periods were over. In the same way sent more young personnel instead of qualified specialists. And this seriously affected the quality of work on the protection of public health and treatment.

The reason why medical personnel leave their jobs was mainly because they provided accommodation. In 1958, 223 out of 311 doctors in the Surkhandarya region were not provided with housing. Especially in the Termez, Denov, Angor districts, the provision of medical workers with housing became unsatisfactory.

Even in the city of Tashkent it was not possible to fully provide the state of the doctor with personnel. In 1947 Tashkent city 1606 doctor's state was allocated for treatment institutions, 940 individuals worked in them.

Due to the lack of doctors in the treatment facilities, patients were often received by secondary medical personnel. In 1948, in rural ambulances of Samarkand region 36.3 percent of patients received feldshers. In some districts, the figure was very low. For example, the reception of doctors in the



outpatient clinics of Nurota district of Samarkand region was 18, 2 percent.

In the regions of Uzbekistan, it was problematic to provide the population with doctors of certain medical specialties. For example, in the Andijan region in 1953 there were 537 doctors, in 1959 their number was 859. But in 1955 year there were 35 obstetricians and gynecologists in the region, in 1959 they became 33, x-rays decreased from 16 to 13 in 1958. In the regional treatment institutions, especially venereologists, fiziators, obstetricians, infectionists, therapists, pediatricians lacked. If the oculist doctor was in only three districts of the province, then in one district there were no neurologist doctors.

1957 year in Kuva, Buvayda, Baghdad districts of the Fergana region, none of the therapeutic institutions-doctors did not operate. The task of the therapist in the grandmother's district was performed by a gynecologist, an infectionist in the Baghdad district. In 7 units of 26 rural precinct hospitals in the region, there were no medical personnel with higher education at all.

Despite the fact that tuberculosis is common throughout the Republic, x-ray doctors are very few. For example, in 1957 in Tashkent region there were 27 x-ray specialists, of which only 8 worked in rural areas. 1969 year 521 of the States allocated to anti-tuberculosis institutions of Uzbekistan for doctors remained vacant due to lack of personnel. The shortage of personnel in this area was especially strong in Tashkent region, Kashkadarya region, Fergana region, Sirdarya region, Tashkent City, Khorezm region. In this regard, work in the QQ ASSR was good and there were only 4 staff of the existing 83 states.

Although the increase in the number of medical personnel in the Republic from year to year was noted, but the shortage of medical personnel with higher education in the regions was still strong. For example, in 1970, the personnel provision of treatment facilities in Kattakurgan, Narpay, Akdarya districts of Samarkand region was very low. Because, due to the fact that there were not enough conditions for medical personnel in the places, they abandoned their jobs. In 1970 in this region, 75 doctors and 60 doctors went to work elsewhere. In the same year, the personnel provision of treatment facilities in the Namangan region was 91, 1 percent.

The role of secondary medical personnel in maintaining the health of the population in Uzbekistan cannot be overemphasized. In the 80-ies of the XX century in Uzbekistan there were 113 medical specialists of the specialty of Medicine. They made up a large part of the staff of all treatment institutions as the main performers of the treatment process. All the treatment procedures prescribed by the doctors were carried out by secondary medical personnel.

6 thousand 595 feldsher-obstetrics punches in the villages of Uzbekistan provided independent medical care to the population of 18 thousand feldsher, obstetricians and nurses. Residents of the village of the republic received medical care mainly from the feldsher-akusher punks. In the mountainous and desert regions, 70-80 percent of patients received first aid from feldshers, midwives and nurses. 41, 0 percent of patients in Bukhara, Namangan, Kashkadarya region initially applied to secondary medical personnel.

In rural areas, secondary medical workers have added a number of complex functions of the health care business at the same time. They performed such tasks as the organization of sanitary education promotion among the population, the organization of vaccination work against various diseases, the registration of the population in the dispensary, treatment. 56, 2 percent of the ambulance calls were served by the feldsher brigade. This indicator was even higher in some regions.

In Soviet times, problems were also accumulating in the organization of the qualification work of medical personnel. In the territory of Central Asia, The Tashkent Institute of professional development of doctors was the only training center for retraining medical personnel. The medical staff of the institute was retrained in such directions as specialization, general training, qualification on a particular topic, internship course.

The number of those who were sent from the regions of Uzbekistan for training in the courses of professional development increased from year to year. In 1949-1951 years in Bukhara region only 102 doctors underwent retraining courses and training. In 1956 45 doctors were sent from Andijan region to training courses, in 1960 their number was 91.

Scientific staff and teachers of the Institute Professor R. A. Abdullaev, S. A. Agzamkhodjaev, D. F. Karimova, M. H. Hamidova, A. A. Said-Ahmedov, Sh. H. Khodjaev Professors, teachers and scientific staff such made a great contribution to the revival and development of the work of professional development of doctors of the Republic for many years.

In almost all regions of Uzbekistan, in most cases, the leadership of the health care system is assigned people who do not have practical experience.

In short, a number of practical works on providing medical personnel of treatment institutions in Uzbekistan, training specialists in various specialties of medicine, training of medical personnel have been carried out, although many achievements have been achieved, but when the indicators in this regard are analyzed in comparison with the allied republics, the presence of a large discrepancy in the middle and the due to the fact that most of the treatment institutions of Uzbekistan provide medical



personnel with higher education, patients were received by secondary medical staff. In addition, due to the shortage of specialists in various specialties of medicine, namely pediatrics, obstetrics, fiziator, venereology, cases of skin-venous diseases of the obstetrician-gynecologist, tuberculosis venerologist were encountered.

The lack of professionalism in some of the medical personnel, the lack of knowledge and experience in accordance with the modern requirements, irresponsibility and cold-blooded approach to their duties, the escalation of bribery and malnutrition among them negatively affected the quality of treatment work, which caused a large number of complaints and complaints of patients.

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