

UNDERSTANDING OF THE DIAGNOSIS OF COGNITIVE DISORDERS IN SCHIZOPHRENIA

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Annotation: *Today, studies of social cognitive functions in schizophrenia are conducted in two main directions [3]. The first direction is carried out mainly in the UK and is aimed at understanding the nature of specific clinical symptoms, for example, to study the relationship of social cognitive functions with paranoid symptoms or thought control. The second line of research is conducted mainly in North America and is devoted to the role of social cognitive functions in the outcome of schizophrenia.*

Key words: *schizophrenia, diagnosis, treatment.*

It is known that as a result of schizophrenia, serious violations of various spheres that determine the functional outcome arise [7]. There is a point of view that violations of social functioning are the most significant of them, as they lead to violations of family relationships, conflicts with work colleagues and lead, as a result, to social isolation. Disorders of social functioning are also the most stable consequences of schizophrenia [3].

According to a number of authors [2, 5], improvements in social functioning cannot occur solely due to the achievement of control over psychotic symptoms, since psychotic symptoms are not closely related to the level of functional adaptation, which is confirmed by the results of studies conducted in schizophrenia patients living in "supportive housing" (communitydwelling). However, the therapeutic effect aimed at the key determinants of the deficit of social functioning leads to improvements in this area. Studies of social cognitive functions were mainly conducted in chronically ill patients. Meanwhile, a number of studies have found disorders of social cognitive functions in patients who have not previously received medication or with a recent onset of the disease [3]. In several studies, violations of social cognitive functions have also been found in non-ill relatives of patients suffering from schizophrenia [3].

When describing social cognitive functions in schizophrenia, the following phenomena are necessarily mentioned: perception of emotions, "Theory of Mind" (the term "Theory of Mind" is usually translated as "theory of mind", but its essence expresses the form of la "internal model of consciousness of another", hereinafter referred to as VMSD), attributive style [4] and social perception [3]. There is a growing number of studies showing that disorders of social cognitive functions are of great importance and largely determine the functional outcome in patients suffering from schizophrenia [2]. The perception of emotions today is increasingly considered within the broader concept of "emotional intelligence" (EI), which includes the ability to recognize, understand emotions and manage them, bearing in mind both the subject's own emotions and the emotions of other people. Two alternative models on which the EI measurement is based are described. Mixed models are closely related to adaptation to real life and coping processes and include cognitive, personal and motivational traits [1]. In the paradigm of mixed models, the measurement of EI is carried out using self-report questionnaires (like traditional personality questionnaires). Ability models define EI as a set of abilities measured by tests consisting of tasks with correct and erroneous answers [2]. The results of questionnaires and EI tests are low correlated with each other. Measurement of EI using questionnaires has sufficient reliability and criteria validity, but doubtful incremental validity (that

is, their results are difficult to distinguish from the results of personality questionnaires). Measuring EI using tests seems preferable in theory, but in practice its criterion validity turns out to be insufficient. It is assumed that EI tests measure not so much certain abilities as the conformity of the subject's ideas about emotions to cultural norms [3].

Literature.

1. Джураев Ш. Д. ФАКТОРЫ РИСКА СУИЦИДАЛЬНОГО ПОВЕДЕНИЯ ПРИ АФФЕКТИВНЫХ РАССТРОЙСТВАХ У ВЗРОСЛЫХ И ПОДРОСТКОВ //Scientific progress. – 2022. – Т. 3. – №. 4. – С. 66-74.
2. Жураев Ш. Ж. СПЕЦИФИЧЕСКИЕ ОСОБЕННОСТИ РАЗВИТИЯ И ТЕЧЕНИЯ ШИЗОФРЕНИИ У БОЛЬНЫХ ЖЕНСКОГО ПОЛА //TA'LIM VA RIVOJLANISH TAHLILI ONLAYN ILMIY JURNALI. – 2022. – Т. 2. – №. 12. – С. 322-326.
3. Жўраев Ш. Ж. МЕТОДЫ ЛЕЧЕНИЯ, ОСНОВАННЫЕ НА КЛИНИЧЕСКИХ ОСОБЕННОСТЯХ СУИЦИДА ПРИ ЭНДОГЕННО-АФФЕКТИВНЫХ РАССТРОЙСТВАХ //BARQARORLIK VA YETAKCHI TADQIQOTLAR ONLAYN ILMIY JURNALI. – 2022. – Т. 2. – №. 11. – С. 98-101.
4. Idievna S. G. THE EFFECT OF DENTAL TREATMENT-PROFILACTICS ON THE CONDITION OF ORAL CAVITY ORGANS IN CHILDREN WITH TRAUMATIC STOMATITIS //Tibbiyotdayangikun» scientific-abstract, cultural and educational journal.-Bukhara. – 2022. – Т. 5. – №. 43. – С. 103-106.
5. Idievna S. G. CHANGES IN THE CONTENT OF TRACE ELEMENTS IN THE SALIVA OF PATIENTS IN THE TREATMENT OF PATIENTS WITH TRAUMATIC STOMATITIS WITH FLAVONOID-BASED DRUGS //Journal of research in health science. – Т. 6. – С. 23-26.
6. Каримов Х. Я., Азимова С. Б., Бобоев К. Т. Анализ генотипических вариантов полиморфизма гена CYP2C9 в узбекской популяции //Міжнародний медичний журнал. – 2012. – №. 18, № 4. – С. 106-109.
7. Karimov K., Azimova S., Iriskulov B. Immunogenetic Aspects Of Pathogenesis Of Chronic Hcv-Infection //European Medical, Health and Pharmaceutical Journal. – 2012. – Т. 4.
8. Mukhamadeevich R. Z. Features of the Course of Iron Deficiency Anemia in Children //AMALIY VA TIBBIYOT FANLARI ILMIY JURNALI. – 2023. – Т. 2. – №. 5. – С. 266-269.