

FEATURES OF THE COGNITIVE SPHERE IN PERSONS WITH ALCOHOL ABUSE DEPENDENCE

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Abstract: The article presents a theoretical review of empirical research in the field of clinical psychology, which describes the mechanism of direct toxic effects of alcohol on the body and on the functioning of its individual systems, and characterizes cognitive dysfunctions in alcoholism. It is worth dwelling on less obvious losses. By analogy, as in the case of traffic crimes, when we talk about the direct victims of the accident, and about people who were traumatized in them, we should also talk about those for whom alcohol played a role in fatal role in life, although it did not lead them to immediate death. Traumatization, due to alcohol abuse, is such that we have to talk about such persons as 157 about limited legal capacity (capacity) members of society. At the same time, there are actually many times more people who abuse alcohol. According to the latest WHO definition, alcoholism is a disease which sooner or later leads to one outcome - death. If drunkenness becomes immoderate, then the boundaries between drunkenness and alcoholism are erased, and often the first develops into the second.

Key words: Alcohol, cognitive sphere, intoxication, cognitive impairments.

Today in psychological practice, under the phrase "cognitive sphere of personality" experts understand several psychological processes occurring in accordance with logical and meaningful sequence, the purpose of which is to process information. Traditionally, this area is associated with memory, attention, perception, thinking, decision making, speech. With a certain simplification, it can be argued that the cognitive sphere is a set of competences and knowledge, skills and abilities. Thanks to the availability and correct functioning of this sphere, people have the opportunity to perceive, process and remember information. High latency is due to public censure, possible stigmatization by society, denial of the problem and a variety of other associated factors. In the pathogenesis of alcoholism there are three main stages: stage of repeated acute alcohol intoxication; stage of drunkenness (chronic alcohol intoxication); alcoholism (dependence on alcohol intake, including complications such as withdrawal and psychosis) [7]. In this case, we are talking about two, often adjacent, ways of damaging human systems of the body associated with alcohol consumption are the direct toxic effects of alcohol and deficiency states. In this work, we are more interested in the direct direct mechanism toxic effects of alcohol on the body and on the functioning of its individual systems.

According to the International Classification diseases and health problems tenth revision (ICD-10) [8], the toxic effect of alcohols means intoxication with methyl, isopropyl alcohol, fusel oils and other alcohols. Acute alcohol intoxication occurs more often in case of poisoning with ethyl alcohol consumed orally for the purpose of intoxication. Dose of ethanol at which a threat occurs life, varies from 4 to 12 grams per kilogram of body weight. Dangerous concentration ethanol in the blood, which can lead to alcoholic coma, starts from 3 g/l, concentration from 6 g/l is considered fatal [9]. These indicators are not absolute and may fluctuate depending on individual alcohol tolerance. Ethyl alcohol is quickly absorbed in the gastrointestinal tract (about 80% of resorption occurs in the small

intestine). About ninety minutes after oral intake of alcohol, the maximum concentration of ethyl alcohol occurs in blood. When the suction phase is almost complete (about 90% of the alcohol was resorbed), the elimination (excretion) phase begins. The average metabolic rate is 90–120 mg/kg body weight per hour (varies) individually). When taken orally, 90% ethyl alcohol is oxidized through the liver through alcohol dehydrogenase to CO₂ (carbon dioxide gas) and H₂O (water). Residual ethylene (10%) excreted on average 10–12 hours through the lungs and kidneys. Alcohol is excreted through urine and exhaled air, and in urine ethylene is detected longer than in the blood. Ethyl alcohol has a narcotic influence on the central nervous system. The mechanism of this effect is due to a decrease in oxygen utilization, disruption of mediator systems, and changes in metabolism brain cells, which entails a weakening of excitation processes. The intensity of drug intoxication depends on the individual tolerance, depending on alcohol concentration in blood in the resorption stage. On the part of the respiratory system, when drinking alcohol, hypoxia is possible, which provokes homeostasis disorders (acid-base state, water-electrolyte balance).

On the hemodynamic side, a violation of vascular tone is possible, somewhat less often there is hypovolemia, impaired microcirculation due to acidosis, hypercoagulation, hypothermia, alcoholic cardiomyopathy. In the case of the somatogenic stage of alcoholism diseases we are talking about residual pathological disorders, lesions internal organs, infections, which entails a violation of vital functions. Cognitive impairments in alcohol abusers are extremely diverse. type and scale of injury. Cognitive functions are usually understood as the most complex functions of the brain. brain, with the help of which it is carried out the process of rational cognition of the world [11]. To cognitive functions include thinking, memory, speech, perception, imagination. In contrast to the concept of "cognitive function," it is advisable to use the concepts "cognitive dysfunction" or "cognitive violations." According to generally accepted terminology, in clinical psychology cognitive dysfunctions should be understood as decreased memory, mental performance, attention; speech and perception disorders compared with the initial level (individual norm) [5]. From a nosological point of view, the causes of cognitive impairment can be: vascular diseases of the brain, dysmetabolic encephalopathies, neurodegenerative diseases, neuroinfections, injuries and brain tumors, etc. It's about alcohol intoxication. This is due, first of all, to accessibility, voluntary use and legality alcoholic beverages, which cannot be said about those same narcotic and psychotropic substances (the consumption of which is actively condemned society and is suppressed by the legislator). The basis of cognitive dysfunctions in Alcoholism is due to the direct toxic effects of ethanol and its metabolites on the central nervous system. "The effects on neurons are due to the induction of glutamate neurotoxicity as a result of decreased neurofilament protein production or impairment of fast axonal transport. Ethanol activates inhibitory GABA receptors and is an antagonist for glutamate receptors (N-methyl-D-aspartic acid-NMDA). Chronic alcohol abuse leads to dysfunction of these neurotransmitters systems with a compensatory decrease in GABA activity and an increase in that of glutamate. Due to impaired metabolism ethanol produces cytotoxic proteins, reversibly affecting cells of the nervous system; a dose-dependent effect of ethanol on the severity of nervous system damage has been established systems" [10]. Damage to the central nervous system (CNS) is an obligate sign of alcoholism and develops to varying degrees in all persons who abuse alcohol (from mild reversible cognitive deficit to severe dementia). Alcohol is one of the most accessible exogenous toxins causing progressive intellectual impairment functions that cause encephalopathy. In alcoholics, in more than half of the cases (50–70%) cognitive impairment is observed, and in 10% of cases we are talking about acquired dementia (dementia). Every tenth case of dementia is alcoholic dementia. 70% of alcoholics have diffuse cerebral atrophy (one third of them with damage to the frontal lobes). Often stopping alcohol intake and therapy leads to restoration of cognitive defect. Neuropsychological

defects are explained from three points of view: – “right hemisphere” hypothesis (when drinking alcohol, it is primarily the right hemisphere);

– hypothesis of “diffuse cerebral defect”, or “premature aging” (the similarity of cognitive damage in severe alcoholism with aging - both hemispheres suffer equally); – hypothesis of “predominant defeat anterior parts of the brain” (the fact of dominance in chronic alcoholism signs of damage to the frontal parts of the brain, dissociation syndrome - a violation connections between the anterior parts of the brain and other parts of the cortex and subcortical structures). We have summarized the identified main cognitive impairments arising from alcoholism, immediate causes and their symptoms. Most often as a cognitive Practitioners suffer from dysfunction in alcoholism. Almost always, when alcohol abuse occurs, the ability to perform certain purposeful actions suffers. Cognitive dysfunction associated with impaired attention function, characteristic also for most diagnoses and syndromes arising in connection with alcoholism. Cognitive impairment in the form of impairment memory are characteristic of encephalopathies (Wernicke–Korsakoff, hepatic, toxic), pellagra, Korsakov's psychosis, alcoholic dementia, as well as for such associated diagnoses such as Alzheimer's disease, vascular dementia and severe cases of vitamin B12 deficiency. Gnosis as a cognitive function, closely associated with memory, suffers more when pellagra, Marchiafava-Bignami disease, toxic and chronic encephalopathies, Alzheimer's disease, disconnection syndrome and B12 deficiency. Speech impairment as a cognitive dysfunction should be more closely associated with vascular and alcoholic dementia, Alzheimer's disease, toxic and hepatic encephalopathy. We have to talk about a wide range of cognitive distortions that arise with alcohol abuse. Either way otherwise, even minor exposure to alcohol negatively affects all systems human body. Speech in alcoholism refers to chronic, constant excessive the effect of alcohol on the body, leading to mental and physical dependence, which has a detrimental effect on the status of the individual in society, his capacity, position in society. This transformation of personality is based primarily on cognitive disorders arising from alcoholism diseases, which was studied by us in the framework of this work. We have made a generalization of the main cognitive impairments that occur in alcoholism. This topic further requiresits development and study, since alcohol abuse affects, in addition to a specific individual suffering from alcohol addiction, society as a whole. From The most able-bodied population is missing out on the full life of society. Healthy persons, from a physical point of view, purposefully actually become disabled, do not have the opportunity to be complete conscious members of society, take care of yourself and about those around you. It is often necessary talk about the social danger of such persons. Aggression, auto-aggression, committing crimes and antisocial acts under the influence of alcohol - this is only an incomplete list of dangerous acts. The formation of any addiction goes through a number of stages. First stage – emergence and formation of mental dependence. When a person first comes into contact with everything that can cause addiction, he develops pleasant sensations. The second stage is characterized by the development of mental dependence and physical dependence. It is characterized by an increase in dose, syndrome withdrawal, transition of mental dependence from positive to negative, loss of control, lack of criticism regarding your addiction. The third stage is the further progression of mental and physical addictions, leading to mental, physical, emotional and spiritual exhaustion. At this stage, dependence is there is life. But the pleasure that use previously brought substances or behavior, in the third stage for a short time. The stages of addiction formation can be most clearly seen in example of chemical dependencies, one of the most common species, which is alcohol addiction. Alcohol addiction with from a medical point of view, it is a disease that develops in as a result of long-term alcohol abuse with pathological attraction to them, which is caused by mental, and then physical dependence on alcohol. [38] In this case, a distinction is made between mental and physical pathological addiction.

Mental dependence is expressed in the need to receive eleven alcohol to get rid of unpleasant thoughts, depression, pain or to inducing feelings of euphoria. Physical dependence manifests itself withdrawal syndrome – a complex of severe clinical symptoms, indicating serious changes in homeostasis, disruption of work The central nervous system, the autonomic nervous system, the main systems and organs of the body. Psychological dependence on alcohol is based on the feeling that it may produce different desired effects. And, indeed, alcohol is capable cause: euphoria, relief of anxiety, concern, tension, workload affairs, increased communication. Alcohol addiction leads to early disability or death patient due to intoxication, trauma or mental violations. According to the latest WHO definition, alcoholism is a disease which sooner or later leads to one outcome - death. If drunkenness becomes immoderate, then the boundaries between drunkenness and alcoholism are erased, and often the first develops into the second. Today in psychological practice, under the phrase "cognitive sphere of personality" experts understand several psychological processes occurring in accordance with logical and meaningful sequence, the purpose of which is to process information. Traditionally, this area is associated with memory, attention, perception, thinking, decision making, speech. With a certain simplification, it can be argued that the cognitive sphere is a set of competences and knowledge, skills and abilities. Thanks to the availability and correct functioning of this sphere, people have the opportunity to perceive, process and remember information.

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