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COGNITIVE CONTROL IN STATIONARY PATIENTS PATIENTS IN THE ACUTE PERIOD OF CEREBRAL STROKE

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Relevance: Defects in working memory and attention are considered common problems after a stroke. Working memory (WM) is the ability to memorize and manipulate information with a low delay[2]. WM and attention have a close relationship since WM is necessary for filtering unnecessary informative functions[5,6]. The disadvantages of WM and attention associated with cerebral stroke lead to an increase in negative trends in professional activity and social functioning. To predict rehabilitation after stroke, it is necessary to assess the degree of deterioration of WM and attention[1]. WM is a fundamental cognitive ability, on the basis of which we can choose the right tactics for managing a patient with a cerebral stroke[3]. The main idea is that interference is created by automatic processes, and not vice versa[4]. Post-stroke patients lose cognitive control due to a combination of psychophysiological and biological factors, depression and apathy also develop.

Objective: To evaluate cognitive control using the Stroop test in hospital patients in the acute period of cerebral stroke.

Materials and methods: the study was conducted in the neurological department of the ASMI clinic for patients with acute cerebral circulatory disorders in Andijan. The number of patients who took part in the studywas 98 people who had suffered a cerebral stroke. All patients were in the acute period of stroke. The age of the patients ranged from 35 to 89 years, the arithmetic mean age was 61.25 years. Day of hospitalization it has always been the day of the development of acute cerebral stroke. We examined patients who were in the hospital from 2 to 11 days, the arithmetic mean is 6.5. In the study, we used the test of J. A scab, during which patients were provided with a series of cards. On each of them was written a word denoting color. All the words were written in different colors (not always the same as the text itself, that is, the word "red", for example, could be written in black). The study participants had to name the color that the word is written with, not the meaning of the word. This often caused difficulty, since it was easier for a number of patients to read the word itself, and cognitive control did not always work clearly. All words are written in the size of 14 pt. The Exel program with a statistics package was used for data processing.

Results and discussion: The number of errors and the speed of the test are closely related to the age of the patients, the higher the age, the slower and with more errors the tasks were performed. The relationship is directly proportional. Test execution time J. The scab was from 19 to 224 seconds, the average time was 75.90. The number of errors during the scab test is from 0 to 8, the average is 1.85.

To determine the data pairs we are interested in, we used a correlation matrix.

Conclusions: In the acute period of cerebral stroke, cognitive control decreases and is characterized by a certain rigidity. We plan to continue the study and compare the results obtained in our sample of patients after strokes, expanding it, with the data of patients with other diseases and healthy people of the same sex and age, as well as compare the data we obtained with published data on other populations.

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