

МЕДИЦИНА, ПЕДАГОГИКА И ТЕХНОЛОГИЯ: ТЕОРИЯ И ПРАКТИКА

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PSYCHOLOGICAL REHABILITATION AFTER HYSTERECTOMY.

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Abstract: Hysterectomy — the complete or partial surgical removal of the uterus is one of the most frequently performed gynecological procedures worldwide. This operation is often indicated in life-threatening conditions such as uterine cancer, large fibroids, or severe hemorrhaging. However, beyond its physiological consequences, hysterectomy also significantly impacts a woman's psychological well-being. Therefore, psychological support plays a critical role in the postoperative rehabilitation process. This article aims to substantiate the importance of psychological assistance during the rehabilitation period following hysterectomy.

Keywords: hysterectomy, psychological support, reproductive health, mental well-being.

Introduction: Hysterectomy is among the most commonly performed gynecological surgeries globally. It is typically indicated for conditions such as uterine fibroids, endometriosis, abnormal uterine bleeding, or malignant tumors. Despite its clinical effectiveness, the procedure may have complex and multifaceted impacts on a woman's life, including her reproductive potential, sexual activity, emotional state, and social participation. Each patient's situation must be evaluated individually. According to the World Health Organization, millions of women worldwide undergo hysterectomy every year. Statistical data shows that a significant number of these women experience psychological disturbances postoperatively — including depression, anxiety, and a loss of identity associated with femininity. These mental health issues can adversely affect overall recovery and quality of life. Consequently, psychological support must be considered an integral part of the rehabilitation process.

Research objective: To analyze hysterectomy cases performed in 2024 and observe the psychological conditions of women in the postoperative period. The study also aims to justify the necessity of psychological support during the rehabilitation process after hysterectomy.

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Research materials, methods: the article summarizes the results of the analysis of scientific literature, clinical observations and psychological conversation. The statistical analysis of the specialized center for Scientific Applied Medicine of maternal and Child Health and the specialized center for Scientific Applied Medicine of oncology and radiology in the Samarkand region was analyzed in 2024. The study used the following techniques: questionnaire – to assess the mental state of postoperative women, observation to record changes in the rehabilitation process, and statistical analysis methods.

Research results and discussion: the following results were observed when we analyzed the statistics in 2024 of the specialized center for Scientific Applied Medicine of maternal and Child Health and the specialized center for Scientific Applied Medicine of oncology and radiology in the Samarkand region. Table 1

№	Medical Institution	Number of beds		Number of obstetric operations transferred		Uterine extirpation	
		Total	Of this, the rural population is	Total	Of this, the rural population is	Total	Of this, the rural population is
1	Regional Maternal & Child Health Center	6367	5263	5565	4674	72	69
2	Oncology & Radiology Center	3012	2189	480	395	480	395

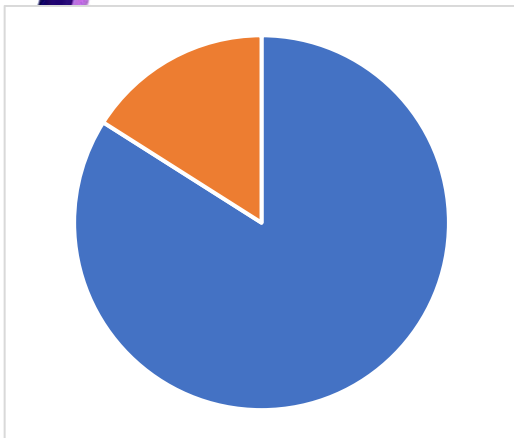
According to statistics, we can see that 83.9% of the obstetric surgery carried out is mainly women of the rural population. Image 1

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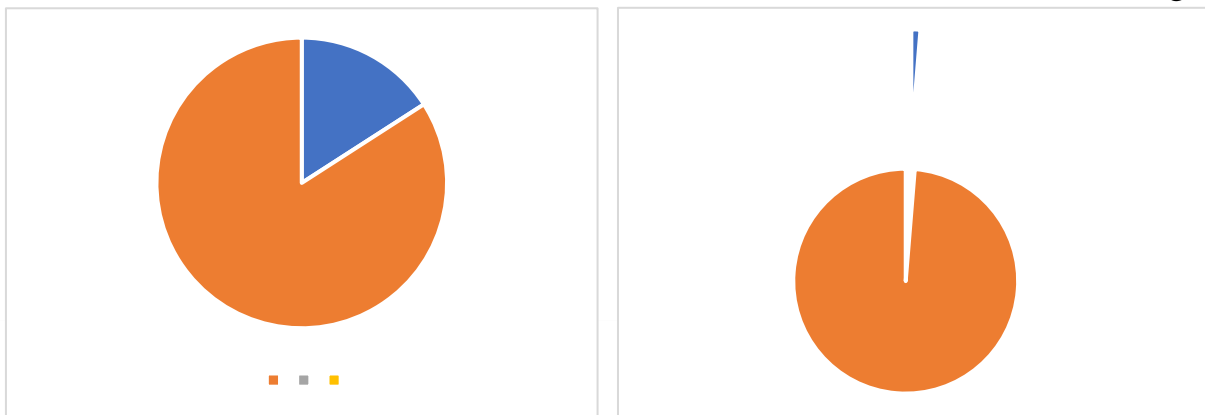
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According to statistics, the fact that 83.9% of obstetric surgical operations are attributed to women of rural population is a serious noteworthy condition. For the scientific justification of this situation, it is necessary to consider several social, medical and economic factors. Balkim may be related to the quality of perinatal services in these rural areas, the level of provision of modern diagnostic and therapeutic equipment, patronage control, the number of Obstetricians-Gynecologists operating in rural areas, and their qualifications.

The proportion of uterine extirpation from obstetric surgeries performed was 1.29% according to the statistical analysis of the Scientific Applied medicine center of specialized maternal and Child Health when analyzed. According to the statistical analysis of the scientific center of applied medicine of specialized oncology and radiology, the share of uterine extirpation according to patients admitted was 15.9%.

Image-2



Women after the practice of hysterectomy experience psychological effects (especially in cases where reproductive function ends). Some women may feel “lost from femininity” after a hysterectomy. Especially for young women who intend to have

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children, this operation can be a severe psychological blow. According to scientific studies, during the 3-6 months after hysterectomy, women are more likely to have depressive states and anxiety disorders. A meta-analysis conducted in 2020 (Journal of Psychosomatic Obstetrics & Gynecology): it was noted that the quality of life of women after hysterectomy was subjectively improved (55%) or not changed (30%). Only 15% of cases reported negative effects. A 2022 report by the European Society of gynecology: analyses of sexual functions found that women using vaginal hysterectomy were more satisfied with their sexuality. The data obtained indicate: in the first 3-6 months after surgery, depressive symptoms are observed in 45-60% of women. The level of feeling “separated from femininity” is higher, mainly in patients under 40 years of age. It was noted that in women who received psychological support (individual consultations, support groups), the process of re-socialization has doubled. Family attention and husband support turned out to be one of the most important factors that increase mental stability. The results of the discussion show that hysterectomy not only solves the problem of surgery, but also leads to complex psychological consequences. The effectiveness of rehabilitation is determined not only by medication or physiotherapy, but also by psychological assistance. Preoperative preparation – mentally preparing a woman for future changes, postoperative conversations – early detection of symptoms of depression and anxiety, family tips – involvement of loved ones in the mental support process, long-term psychological monitoring-we can support women who have psychologically had uterine extirpation through monitoring the patient's quality of life.

Conclusion: hysterectomy is not just a surgical procedure, but one of the important turning points in a woman's life, but a clinical decision that seriously affects a woman's life.. In each case, based on an individual approach, an objective assessment taking into account the age, general health status, psychoemotional readiness and personal needs of each patient, and the informed consent of the patient, it is necessary to decide on hysterectomy. Proper rehabilitation, mental support and the establishment of a healthy lifestyle in the postoperative period improve a woman's quality of life. Psychological support after uterine extrusion: reduces the level of depression and anxiety in a woman, accelerates social adaptation, helps to restore the quality of sex life, increases the level of life satisfaction. In addition to physical recovery, psychological and social support is also necessary for a positive impact on the way of

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life of women, therefore, it is necessary that psychological rehabilitation is introduced as a mandatory element in operations performed by gynecologists and Surgeons.

Literature used.

1. Johnson, N., Barlow, D., Lethaby, A., Tavender, E., Curr, L., & Garry, R. (2020). Surgical approach to hysterectomy for benign gynaecological disease. *Cochrane Database of Systematic Reviews.*
2. Lykke, R., Blaakaer, J., & Ottesen, B. (2022). The impact of hysterectomy on quality of life: A systematic review. *European Journal of Obstetrics & Gynecology.*
3. World Health Organization. (2021). Global Health Estimates on Hysterectomy.
4. Stewart, E. A. (2020). Uterine fibroids. *The Lancet*, 395(10242), 293–300