

type of personality, the patients were characterized by such traits as a tendency to guilt, pessimism, low self-esteem, difficulties in social contacts, impulsivity, irritability, short temper, aggressiveness, internal tension, anxiety, motor restlessness, restlessness, the desire to constantly change places. In the clinical picture of dysphoric depression, addictive forms of behavior disorders are established; petty theft, escapes from home, vagrancy, tobacco smoking, the use of alcoholic beverages. Teenagers with an anxious type of depression missed school classes, had conflicts with friends and peers, difficulties adapting to real society, a tendency to Internet-dependent behavior. In adolescents with masked depression, deviant manifestations of autodestructive behavior were observed in the form of suicidal tendencies and attempts, which in most cases were demonstratively blackmailing in nature.

Conclusions. According to the results of testing, it was revealed that severe depression was most often found in people with a dysthymic personality type. Depressive disorders of moderate degree were observed in adolescents of the psychoasthenic type. Mild depressive disorders were diagnosed in patients with a demonstrative personality type. The analysis of the clinical features of behavioral disorders of the depressive period allows us to establish prognostic indicators of the unfavorable course of these disorders, preventing the development of pronounced behavioral disorders and the formation of an antisocial personality.

THE ROLE OF COMORBID PATHOLOGY IN THE SEVERE COURSE AND UNFAVORABLE PROGNOSIS OF COVID-19 (RESULTS OF A RETROSPECTIVE ANALYSIS)

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Introduction. The most common manifestation of COVID-19 is damage to the respiratory system. However, this disease is characterized by high activity of inflammation and thrombotic complications, leading to multiple organ lesions. The management of a patient with COVID-19 involves not only the treatment of pneumonia and respiratory failure, but also the timely recognition and treatment of lesions of other target organs, the identification and correction of risk factors for complications of COVID-19 involves not only the treatment of pneumonia and respiratory failure, but also the timely recognition and treatment of lesions of other target organs, the identification and correction of risk factors for complications.

Aim: conduct a retrospective analysis of the

case histories of patients with COVID-19 and determine the risk factors for the development.

Materials and methods. The material of the study was the case histories of 128 patients with COVID-19 hospitalized for early rehabilitation. A retrospective analysis of medical history data was carried out to identify predictors of adverse events within a month after suffering COVID-19 adverse events within a month after leaving after from the infectious diseases hospital. The management of a patient with COVID-19 involves not only the treatment of pneumonia and respiratory failure, but also the timely recognition and treatment of lesions of other target organs, the identification and correction of risk factors for complications of COVID-19 involves not only the treatment of pneumonia and respiratory failure, but also the timely recognition and treatment of lesions of other target organs, the identification and correction of risk factors for complications.

Results. Within 1 month after COVID-19, thromboembolic events occurred in 66 patients (51.56%), 12 patients died (9.38%), the combined endpoint (death + thromboembolism) - in 70 patients (54.69%). The risk of adverse endpoints was significantly higher in patients with severe and extremely severe COVID-19 than in patients with moderate ($p < 0.01$). In patients who developed endpoints, compared with patients without adverse events, the average number of background pathologies was significantly higher ($p < 0.001$). Among the background conditions, COPD ($p < 0.001$), type 2 diabetes ($p < 0.05$), obesity and steatohepatitis ($p < 0.001$), Parkinson's syndrome ($p < 0.05$) were more common. Based on the results obtained, the prognostic significance of predictors of the risk of developing unfavorable endpoints was assessed.

Conclusions. A retrospective analysis of case histories showed that the risk of developing a combined endpoint (death and thromboembolic events) of COVID-19 increases 1.63 times in severe and extremely severe disease, 2.33 times - in the presence of COPD ($p < 0.001$), 1.63 times - in the presence of type 2 diabetes ($p < 0.05$), 3.64 times - in the presence of obesity and steatohepatitis ($p < 0.001$).

TRIGLYCERIDE-GLUCOSE INDEX AS A MARKER OF INSULIN RESISTANCE AND ITS ASSOCIATION WITH METABOLIC FACTORS

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Introduction. To detect insulin resistance (IR), it has recently been proposed to define the triglyceride-glucose index (TGGI) as a reliable and