

**CARDIOLOGY AND NEUROLOGICAL DISEASES ASSOCIATED WITH
PSYCHOLOGICAL FACTORS: A CLINICAL APPROACH**

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Abstract: This work is devoted to the study of the clinical approach to cardiological and neurological diseases associated with psychological factors. The study analyzes the impact of psychological states such as stress, anxiety, depression and emotional stress on the functioning of the cardiovascular and nervous systems. It is shown that psychological factors play an important role in the development of pathologies such as arterial hypertension, ischemic heart disease, arrhythmias, headaches, migraines and neuroses through psychosomatic mechanisms. The clinical approach emphasizes the need for a comprehensive assessment of patients, that is, a joint analysis of the somatic and psychological state. It also highlights the effectiveness of early diagnosis, psychotherapeutic approaches, pharmacological treatment and preventive measures. In general, the integration of the areas of psychocardiology and neuropsychiatry is of great importance in modern medicine.

Keywords: Psychological factors, cardiology, neurology, psychosomatic diseases, stress, depression, arterial hypertension, migraine, clinical approach, psychocardiology.

In modern medicine, the close connection of chronic diseases not only with physical, but also with psychological factors is increasingly being recognized. In particular, it has been scientifically proven that stress, depression and emotional instability play an important role in the development of diseases of the cardiovascular, nervous and musculoskeletal systems. However, in practice, the assessment and treatment of the psychological state with physical therapy has not been sufficiently established. This reduces the effectiveness of treatment and leads to relapses of diseases. Psychosomatic analysis of cardiological, neurological and joint diseases, determining their interrelationships and developing treatment principles based on an integrated approach are one of the urgent issues today. The response of the heart to stress. The heart is one of the most active and sensitive organs of the body. It is the first to react to mental changes. In cases of stress, fear and anxiety, the sympathetic nervous system is activated and conditions such as heart rate (tachycardia), increased blood pressure, and angina occur. Heart disease and emotional background. Scientific studies show that: Arterial hypertension is associated with a stressful lifestyle in 40–60% of patients. Episodes of infarction and angina often occur after a strong emotional shock,

the death of a loved one, or a serious social loss. Depression and anxiety disorders are noted in most patients who have had a heart attack. Neurological Diseases: An echo of the mental state. The response of the nervous system to stress. The central nervous system responds strongly to stress. Among psychosomatic neurological diseases, the following are distinguished:

Migraine is often associated with emotional overload, internal dissatisfaction, and unforgiven anger. Dizziness, paresthesia (itching, tingling) - occur against the background of vegetative dysfunction.

Conversion disorders (psychogenic paralysis, loss of speech) are the physical manifestation of deep psychological conflicts.

Neurological masking of psychological problems. Patients often “transmit” their mental suffering to the body: that is, nervousness, anxiety, depression - manifested by headaches, muscle tension, tremors or sleep disorders. Neurological symptoms are the expression of the mental state in “physical language”. Joint diseases and the psychosomatic approach. Arthritis and mental stress. Joint diseases, especially rheumatoid arthritis, are often based on a malfunction of the immune system. However, this malfunction is not only associated with genetic or infectious factors, but also with severe psychological stress. Psychoneuroimmunological studies show that in cases of depression and chronic stress, the production of cytokines (inflammatory substances) increases. This exacerbates rheumatic diseases.

Inactivity and mental decline. Joint pain and limitations in movement often lead to depression. However, this process is two-way: psychological depression also aggravates joint disease. Inactivity leads to mental isolation, social withdrawal, which further aggravates stress and pain.

Based on the conducted analyses, it was found that not only physiological, but also psychological factors have a direct impact on the development of cardiological, neurological and joint diseases. Factors such as stress, depression, anxiety and emotional stress can aggravate diseases of the cardiovascular system, nervous system and musculoskeletal system or cause them to become chronic. Also, the interdependence of these diseases and the presence of psychosomatic mechanisms in all of them indicate the need to treat them on the basis of a comprehensive, systematic approach. This fact proves the need to provide assistance to the patient in modern medicine not only with drugs, but also on the basis of a psychological approach .

Practical recommendations. Comprehensive diagnostics: When examining cardiological, neurological, and rheumatological patients, it is necessary to introduce into practice the assessment of their psychological state (for example, stress level, depression tests).

Multidisciplinary approach: The collaborative involvement of a psychologist, psychotherapist, physiotherapist, and doctors in the therapy process ensures high effectiveness.

Stress management techniques: Patients should be taught autogenic training, breathing exercises, meditation, and other stress-reducing techniques.

Psychotherapy and counseling: Cognitive-behavioral therapy and conversational counseling methods can be effective in symptoms that develop against the background of prolonged stress, family conflicts, problems at work, and personal crises. This reduces the effectiveness of treatment and leads to relapses of diseases. Psychosomatic analysis of cardiological, neurological, and joint diseases, determining their interrelationships, and developing treatment principles based on an integrated approach are one of the most pressing issues today. Response of heart activity to stress. The heart is one of the most active and sensitive organs of the body. It is the first to react to mental changes. In cases of stress, fear, and anxiety, the sympathetic nervous system is activated, and conditions such as heart rate (tachycardia), increased blood pressure, and angina (angina) occur. Heart diseases and emotional background. Scientific studies show that: Arterial hypertension is associated with a stressful lifestyle in 40–60% of patients. Infarction and angina episodes often occur after a strong emotional shock, the death of a loved one, or a serious social loss. Depression and anxiety disorders are noted in most patients who have had a heart attack. Neurological Diseases: An echo of the mental state. The nervous system's response to stress. The central nervous system responds strongly to stress. Psychosomatic neurological diseases include the following:

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Promoting a healthy lifestyle: The patient's overall well-being can be strengthened through sleep hygiene, proper nutrition, regular physical activity, and social engagement.

Training of medical personnel: Introducing advanced training courses for doctors and nurses on the basics of psychosomatics will help them gain a deeper understanding of diseases and provide quality care.

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