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Treatment Of Sexual Dysfunctions In The "Doctor D" Hospital In Uzbekistan

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ABSTRACT

Long-term studies of clinical hypnosis at the "Doctor D" hospital in Uzbekistan demonstrate the effectiveness of this method in the treatment of various sexual disorders. This is confirmed by the change in the behavior of the subject in interpersonal relationships. Neurophysiological monitoring objectively confirms the change in the biorhythmic activity of the brain towards positive emotions, with the resurrection of feelings in the relationship of spouses.

KEYWORDS

Clinical hypnosis, sexual dysfunction, EEG monitoring.

INTRODUCTION

The rapid development of communication media and the Internet provokes among young people the problem of dependence on viewing porn sites. This is especially true for boys, young guys over the age of 15. This situation

leads to sexual tension in minor age boys and release in the form of masturbation. A chronic dependence of adolescents on pornography is forming.

The consequences of this phenomenon are expressed in a violation of personal identification in adolescents, over time, boys lose confidence in their own potency and they may develop an inferiority complex.

With a chronic passion for viewing porn sites, young people may become interested in more perverse topics, in particular, to viewing homosexual sites, while there is a threat of their homosexual orientation.

In the long term, boys, fascinated by the virtual sexual world, lose interest in real sexual partnerships, which is a difficult problem if there is a desire to create a real family in the future and can negatively affect the interpersonal relationships of spouses [3].

In the USA, England, France, Germany, Italy, Canada and Australia, many psychotherapists use hypnosis in the treatment of sexual dysfunctions [9,19].

Hypnotherapy has been studied, taught, practiced and popularized in Uzbekistan in the Doctor D hospital in Tashkent and in higher educational institutions of the country for many years together with Greek scientists [2, 15,16].

One of the areas of application of clinical hypnosis at the "Doctor D" Hospital is the treatment of various kinds of sexopathological problems, such as masturbation, impotence, homosexuality, infertile marriages, interpersonal partnerships between men and women in the family or in a civil marriage.

The Universal Decimal Classification System recognizes the code 612.821.71. "Hypnosis and the physiological nature of suggestion in hypnosis."

Hypnosis is a psychotechnical technique that allows you to transfer a patient to an altered state of consciousness, which increases a person's suggestibility. The degree of the patient's suggestibility depends on the level of hypnotizability, active participation in hypnotherapy, confidence in the hypnologist and the level of preparedness of the hypnotherapist.

Hypnosis is the most dynamic method for studying the human psyche, with the possibility of using it both in therapeutic and scientific theoretical terms [10, 13].

Hypnoidness is a physiological condition inherent in humans and animals. Hypnotic states are not only physiological and behavioral, but also special mental states [4]. Under hypnosis, it is impossible to inspire a person with the need for committing an act that is immoral for him and essentially criminal in nature [5].

GOAL AND OBJECTIVES

The purpose of this work is to analyze some of the psychological problems accompanying the development of sexopathologies in people, to identify the psychopathological characteristics of individuals, to treat these problems by the method of suggestion in hypnosis, and to objectify the results of treatment by laboratory studies of the EEG of the biorhythms of the brain.

METHODS AND MATERIALS

Research is conducted from 2009 to 2020. under the leadership of Doctor of Medicine Irgashev D.S. in the concilium of doctors of various specialties, together with the doctor of psychological sciences, hypnologist Sakkelion D.N., invited from Greece.

In the “Doctor D” hospital of Uzbekistan, a special hypnotarium is equipped and a neurophysiological laboratory is used to study the EEG of the brain in a state of hypnosis [1].

With the voluntary cooperation of 79 patients (49 men and 30 women aged 24 to 45) with sexual behavioral problems, we conducted:

1. Psychoanalytic scanning, with the identification of individual personality problems.
2. Tracking facial expressions and pantomimics of the patient.
3. Psychological survey of married couples.

Our psychological approach allows us to maximize patient confidence.

Patients were interviewed to determine their sexual status, character traits, adequacy of self-esteem and the degree of awareness about the possibility of resolving their psychological problems.

There was a short briefing on the psychotherapeutic effect of hypnosis.

A neurological and systemic history was collected.

We used the author's method of induction of "lightning-fast" hypnosis with the immobilization of the subject [14].

Preparation for the introduction to hypnosis also consisted of teaching the subjects to abstract from the environment, including as much as possible to ignore the verbal influence of others, to relax with closed eyes and to focus on the sensations of relaxation and warmth in the body. A feeling of a masklike face was suggested (to relax facial expressions), a feeling of freshness and

coolness of the head, and the cessation of thought processes.

To deepen the hypnotic state, the suggestion was used to "escape from the surrounding reality and ignore the time-space continuum."

As a result, at a certain rhythm and duration of such a suggestion, “suspense” is removed and, observing the ciliated symptom (stop blinking eyelids), we understand that the patient is in a state of sensory deprivation, when the suggestion is especially effective [6].

The degree of hypnotizability was determined by the timing of attaining immobility and clinical symptoms described in the Harvard [18] and Stanford [20] scales, which determine the deep degree of hypnosis.

Subsequently, when questioning the patient, the degree of his sensation of space and time was found out, in the absence of sensory perception of signals of various modality.

For objective registration of the hypnotic state, laboratory studies of the EEG of the biorhythms of the brain were used. The obtained analog EEG data were converted into digital format for further topographic mapping, which allows visualizing the processes occurring in the brain during hypnosis.

RESULTS

After a consultation of doctors of various specialties of the “Doctor D” hospital - andrologist, endocrinologist, urologist, gynecologist, neuropathologist, therapist and performed laboratory and instrumental examinations in these areas, in case of detection of a possible pathology, pharmacological and physiotherapeutic therapy was prescribed.

In parallel, psychotherapeutic counseling and hypnotherapy of patients were carried out, due to the possible presence of concomitant psychological problems in many of them.

Summarizing the problems of sexual dysfunctions in this article, we want to focus attention on sexual disorders in the behavior of young men, which are a catalyst for the violation of interpersonal relationships in marriage.

Analyzing the wide range of individual characteristics of men, we tried to summarize the most common problems using the example of a specific patient.

We were approached by a patient whose sexual dysfunction we assessed as manifestations of a pronounced asthenoneurotic syndrome. The patient is tense during the conversation. When responding to the doctor's questions, he is voluminous. Shy, timid, restless, pessimistic, irritable, vegetative disorders with facial flushing, sweating are noticeable.

Systematic screening of the patient showed that he did not have mental and neurological diseases.

The patient's history revealed:

Masturbation from 14 to 16 years of age: stopped because his parents frightened him of the adverse health effects of this habit. Before marriage, he had 4 sexual partners. The duration of intercourse was 2 to 4 minutes.

Sexopathological examination revealed the patient's complaints:

1. Weakness of erection, short duration of coitus, irritability, anxiety, low mood,

distraction of attention, occasional headaches, sometimes poor sleep.

2. Anxious fears of new failures led the patient to a decrease in sexual activity.
3. For 4 months he tried to have sexual intercourse with a frequency of about 1 time in 7-10 days.
4. Hard experienced sexual failures, constantly thinking about it. About 2 months ago, heartbeat, feeling of lack of air began to bother him, his mood dropped, he could not sleep for a long time, there were unpleasant sensations in the perineum.
5. Asserts that in recent months he has not been able to work productively due to the fact that he constantly thinks about his sexual problems. Notices that he has noticeably changed in character: he became touchy, withdrawn.
6. Due to constant obsessive thoughts about failures in intimacy and a deterioration in the general condition, performance has decreased.
7. The wife regarded this as evidence of complete indifference to her.
8. There were thoughts of divorce.

At the beginning of the psychotherapeutic effect, the patient was nervous, fussed, and showed obvious anxiety.

However, as a result of a special psychological approach, with the proposal to the patient "immediately and unconditionally trust the doctor," the patient calmed down. The offer to tune in to the positive - aroused the patient's desire for cooperation.

The patient was asked to reconsider the sequence of interaction with his spouse, it was recommended to devote most of the time (50%) to caresses, kisses, declarations of love

and delight in relation to the spouse and 50% of the time to devote to sexual intercourse. Following the sequence of such a procedure can have a positive effect on the sexual potency of a man.

The author's method of guidance method hypnotic trance allowed us, in most cases, within 3-4 minutes to achieve a deep immersion in hypnosis to the state of somnambulism and stay in this state for up to 30-45 minutes. Sensory deprivation was observed, in which there were no reactions to painful stimulation, the command "open eyes" was accompanied by a subjective lack of perception of the environment, the process of accommodation and the oculomotor reflex were disturbed during photo and phonostimulation. It is in this state that suggestive influence is especially effective. These subjects performed well with post-hypnotic suggestion. Post-hypnotic amnesia was observed, which made it possible to remove doubts and tension experienced by the patient during the process of hypnotic induction.

During a hypnotherapy session, calming, relaxation, stabilization of motor activity are noticeable, the patient freezes, relaxation of facial expressions appears on the face, the eyelids stop twitching, the patient falls asleep, mouth opening is possible, as in a dream, lack of response to extraneous stimuli.

Suggestion during hypnosis was focused on eliminating fear of failure during coitus, increasing self-esteem, improving interpersonal relationships, and harmonizing sexual interaction with a spouse.

EEG studies in a state of hypnosis showed an increase in delta-rhythms in the frontal leads of

the left hemisphere, register a deep degree of relaxation of the subject [8]. And changes in theta- rhythms in the temporal leads of both hemispheres serve as objective parameters excluding simulation [12].

DISCUSSION

Conducted 8 sessions of hypnotherapy.

After completing the course of treatment, the patient noted an increase in spontaneous and adequate (outside the situation of intimacy) erections, which increased to 7-10 minutes in the duration of intercourse (coitus) and then began to have intercourse with his wife 4 times a week, with an increased duration of intercourse. Irritability, anxiety, low mood, distraction of attention disappeared.

Headaches, irritability and internal anxiety are gone. Sleep has returned to normal. The heartbeat and feeling of lack of air ceased to bother. Obsessive thoughts about sexual problems of intimacy disappeared. Working capacity was restored. He stopped thinking about divorce.

In hypnosis, motor activity and emotional state become regulated, which is confirmed by the corresponding changes in the delta and theta rhythms on the EEG. Delta activity in the frontal leads of the left hemisphere corresponds to the high level of immobility in deep hypnosis [21], and theta rhythm in the temporal leads, with a positive emotional response to hypnosis [7, 17].

Most of the patients who underwent treatment by the method of clinical hypnosis were highly hypnotic due to the use of the author's method of inducing hypnotic trance. Accordingly, the effectiveness of psychotherapy with this method was high.

Confirmation is the stable psychological state of patients before and after the cycle of therapy.

CONCLUSION

1. The state of hypnosis allows to stabilize the mental processes of the individual, while the subject more productively perceives psychotherapeutic suggestion, it is possible to change the patient's behavioral model.
2. Methods of hypnotic influence are effective and do not involve simulation. This is evidenced by objective EEG parameters obtained in laboratory context.
3. The method of clinical hypnosis can be used to treat sexual dysfunctions in partners.

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