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QULOQ SHANG'ILLASHI — SABABLARI, RIVOJLANISHI, QULOQLARDAGI SHOVQINNI DAVOLASH, OLDINI OLISH

Annatatsiya: Ko'pincha shunday savolni eshitish mumkin: «Qaysi quloq shang'illashi bezovta qilmoqda?» Lekin kunduzi ham, kechasi ham quloq shovqinlansa nima qilish kerak? Bu muammoga duch kelganlar uni ochiq gapirishdan xijolat tortishadi. Axir, shang'illash ovozi tashqaridan emas, balki ichkaridan chiqmoqda. Qanday qilib boshqalarga mavjud bo'lmagan ovozni eshitayotganingizni tushuntirish mumkin? Darhaqiqat, gap tibbiyotda tinnitus deb ataladigan holat haqida bormoqda.

Kalit so'zlar: Quloq shang'illashi haqida, Tinnitusning tarqalganligi, Quloqlardagi shovqin tasnifi, Quloq shang'illashi sabablari, Quloq shang'illashi yuzaga kelishi nazariyalari, Quloq shovqinlanishi alomatlari, Quloq shang'illashini davolash, Oldini olish

QULOQLARDAGI SHOVQIN TASNIFI

Rossiya Fanlar akademiyasining Rus soveti akademigi I.B. Soldatov to'rt darajada farq qiladigan quloq shovqini darajasi bo'yicha klinik tibbiyot uchun tasnifni ishlab chiqdi:

1 daraja — shovqin mehnat qobiliyatini pasaytirmaydi, unga ko'nikish mumkin;

2 daraja — quloq shang'illashi sezilarli, ayniqsa kechki payt;

3 daraja — shovqin doimo bezovta qiladi, bemor shovqinga chalg'iydi. Uyqu buziladi, bezovtalanish paydo bo'ladi.

4 daraja — shovqin juda qiyin chidaladi, bemorni doimo bezovta qiladi. Ish qobiliyati deyarli yo'q.

Germaniya klinikalarida tinnitusning quyidagi tasnifi qo'llaniladi:

— vaqti bo’yicha:

O’tkir (aktual): 3 oydan kamroq his qilinsa;

O’tkir emas (o’rtacha): 3 oydan 1 yilgacha his qilinsa;

Surunkali: 1 yildan ortiq his qilinsa.

— ikkilamchi alomatlari bo’yicha:

Kompensatsiyalangan: bemor qulog’ida shovqin mavjud, ammo uni yenga oladi, shuning uchun qo’shimcha alomatlar paydo bo’lmaydi. Bemor juda oz miqdorda aziyat chekadi, shovqin hayot sifatiga ta’sir qilmaydi.

Dekompensatsiyalangan: quloq shang’illashi hayotning barcha sohalariga sezilarli ta’sir ko’rsatadi va ikkilamchi belgilar rivojlanishiga olib keladi: tashvish, uyqusizlik, diqqatni jamlash bilan bog’liq qiyinchiliklar, depressiya. Hayot sifati sezilarli darajada buziladi.

QULOQ SHANG’ILLASHI SABABLARI

Tinnitus mustaqil kasallik emas. Aksincha, turli xil patologik holatlar tomonidan chaqirilgan bo’lishi mumkin bo’lgan alomat. Quloqlardagi shovqin sabablari quyidagicha bo’lishi isbotlangan:

Arterial gipertenziya;

Bo’yin osteoxondrozi;

Quloqning yallig’lanishli kasalliklari (otit);

Sensonevral qulog’i og’irlik;

Menier kasalligi;

Qon tomirlarining aterosklerozi;

Stress;

Endokrin kasalliklar (qalqonsimon bez patologiyasi, qandli diabet);

Eshitish nervlarining nevrinomasi;

Tarqoq skleroz;

Ba’zi dorilarni qabul qilish;

Barotravma va akustik jarohatlar (yaqin masoada kuchi pirotexnikaning portlashi, rok-konsertlarda juda baland tovush).

TINNITUS VA DORI VOSITALARI

Quloq shang’illashi bir qator dori vositalarini qabul qilish yoki dorilarning o’zaro ta’siri tomonidan chaqirilgan bo’lishi mumkin. Bunday preparatlarga:

Aminoglikozid qator antibiotiklari (streptomitsin, gentamitsin va boshqalar), eritromitsin, vankomitsin;

Sisplatin ishlatish bilan kimyoterapiya;

Saratonga qarshi ba’zi dorilar, masalan «Mexloretamin» va «Vinkristin»;

Nosteroid yallig’lanishga qarshi preparatlar (aspirin (yuqori dozalarda), ibuprofen, ketoprofen, indometatsin, parasetamol, baralgin, naproksen va boshqalar);

Bumetanid, etakrinli kislota va furosemid kabi diuretiklar;

Xinin;

Psixiatriyada qo’llaniladigan preparatlar (sertralin, amitriptilin, anafranil va boshqalar), shuningdek uyqu dorilari.

Tinnitusni kamaytirish maqsadida ko’plab dori guruhlari ta’sirlarini o’rganish tadqiqotlari o’tkazilgan: antidepressantlar, antiepileptik preparatlar, trankvilizatorlar, betaserk guruhi. Preparatlarning hech biri quloq shovqinini kamaytiruvchi kuchli ta’sirga ega emas.

QULOQ SHANG’ILLASHI YUZAGA KELISHI NAZARIYALARI

TINNITUSNING PERIFERIK NAZARIYASI

Hozirgi vaqtda tinnitus kelib chiqishining ikkita asosiy nazariyasi mavjud. Birinchisi, periferik (yoki koxlear) nazariyaga ko’ra, quloqlarda shovqin ichki quloq hujayralari (ovozni nerv impulslariga aylantirib beruvchi hujayralar) nobud bo’lishiga reaktsiya sifatida namoyon bo’ladi. Bu biz kundalik hayotda ko’nikib qolgan va ahamiyat bermaydigan katta kuchli doimiy tovushli yuk tufayli sodir bo’ladi. Eshitish hujayralari darhol nobud bo’lmaydi, balki ma’lum bir vaqt bir o’lim oldi holati — parabiozda bo’ladi, bu holatda ularning vazifasi keskin buziladi va ular har bir tovush uchun maxsus impuls hosil qila olmaydi, aksincha miyaga doimiy axborot yuborib turadi va bu bemor tomonidan shovqin sifatida qabul qilinadi. Vaqt o’tishi bilan ba’zi hujayralar o’ladi, boshqalari esa parabioz holatiga o’tadi. Ushbu nazariyaga ko’ra, tinnitus periferik asab tizimi va quloq chig’anog’idan boshlanadi.

TINNITUSNING MARKAZIY NAZARIYASI

Ikkinchi nazariya tinnitus shakllanishi mexanizmini markaziy sifatida tasvirlaydi. Bu nazariya mualliflari quloqlardagi shovqin «fantom og’riqlar» kabi shakllanadi deb ta’kidlashadi. Eshituv hujayralari endi yo’q, lekin miya eshituv yo’llar orqali tashqi tovushlar haqida signallar kelishi kerakligini «eslaydi». Miyaning o’zi tovushlarni yaratolmagani sabab, u eshitish impulslariga o’xshash «axborotni» izlay boshlaydi. Bunday ma’lumot kayfiyat markazi orqali o’tadigan yo’llar orqali tushadi. Bu yo’l faollashadi va dominant bo’lib qoladi. Shuning uchun ham bemorlar shovqinga emotsional toqat qilishlari qiyin. Ushbu nazariyadan kelib chiqib, tinnitus «noto’g’ri» markaziy adaptatsiya (moslashish) natijasidir. Buzilish markaziy asab tizimida yuzaga kelganligi va «qayta tartibga solish» talab etilganligi

sabab, bunda psixoterapevtik davolash ko'rsatiladi. Markaziy quloq shang'illashi kelib chiqishi bosh miya po'stlog'ining eshitish zonasi bilan bog'liq deb hisoblanadi.

QULOQ SHOVQINLANISHI ALOMATLARI

Shuni ta'kidlash kerakki, normada har qanday odam mutlaq sukunat sharoitlarida bo'lsa ma'lum bir fon shovqinini eshitishi mumkin. Quloq shang'illashiga ko'pchilik duch kelgan, masalan, shovqinli kontsertda qatnashgach. Lekin ertasi kuni quloqda shovqinlar g'oyib bo'ladi.

Tinnitusdan aziyat chekadigan bemorlar quloqdagi shovqin uyquga ketishdan oldin, atrofda jimjitlik paydo bo'lishida eng aniq eshitilishini ta'kidlashadi. Diqqatni shovqinga jamlash uyqusizlikka olib kelishi mumkin. Agar tinnitus rivojlanishida davom etsa, quloq shang'illashi kunduzi, shovqinli muhitda ham bezovta qilishi mumkin. Inson tovushga tobora ko'proq diqqat qarata boshlaydi. Bu insonning psixoemotsional holatiga ta'sir qiladi. Uning kayfiyati yomonlashadi, depressiv reaktsiyalar rivojlanishi mumkin. Ayrim hollarda, eshitish qobiliyatining asta-sekin kamayishi qayd qilinadi.

QULOQ SHANG'ILLASHINI DAVOLASH

Quloq shang'illashiga qarshi dori haligacha mavjud emas. Biroq, amaliyotda quloq shovqinini davolash uchun quyidagi konservativ usullar ishlatiladi:

Medikamentoz terapiya;

Fizioterapiya;

Refleksoterapiya;

Eshitish protezlari;

Girudoterapiya;

Psixoterapevtik mashg'ulotlar, xususan, kognitiv-xulqiy terapiya.

Avvalo, quloq shang'illashi sababini aniqlashga yordam beradigan tadqiqotlar o'tkazish kerak. Agar sababi topilsa, unda tinnitusni davolash asosiy kasalliklarni davolashga yo'naltiriladi. Afsuski, ko'p hollarda xastalikning sabablari aniqlanmaydi. Bunday hollarda shifokor quyidagi davolash usullariga murojaat qiladi:

Dori vositalari bilan davolash (B guruhi vitaminlari, ginkgo-biloba, rux preparatlari, miyada qon aylanishini yaxshilaydigan dori vositalari);

Quloqdagi shang'illashdan ustun keladigan «oq shovqin» yaratuvchi maxsus implantat ishlatish. Ovoz terapiyasidan ham foydalanish mumkin. Buning uchun bemor tabiatning yoki atrof-muhitning tovushlari yozilgan musiqa tinglaydi. Bunday tovushlar insonning e'tiborini tashqi shovqin manbasiga o'tkazish imkonini beradi. Bu esa bo'shashish va uxlab qolishga yordamlashadi.

Psixoterapiya. Tinnitusni davolashda ko'pincha kognitiv-xulqiy terapiyaga murojaat qilinadi. Psixoterapevt bilan ishlashda bemorga meditatsion texnika o'rgatiladi. Shuningdek bu quloqdagi shovqinni qabul qilishni o'zgartirishga, ovozga e'tibor qaratishni to'xtatishga yordam beradi.

Ba'zi klinikalarda tinnitusni davolash uchun gipnoz va giperbarik oksigenatsiya qo'llaniladi, biroq ularning samaradorligi juda past.

2000-yilda Moskva Ilmiy-tadqiqot institutining otorinolaringologiya hodimi O. A. Golubovskiy «Otorinolaringologiya elchisi» jurnalida «Sub'yektiv quloq shovqini va giperakuziya. Flyuktuatsion toklar bilan davolash» maqolasini chop etdi. Flyuktuatsion tok bilan davolash ham eshitish buzilishisiz sub'yektiv quloq shovqini bo'lgan bemorlar holatida, ham surunkali neyrosensor qulog'i og'irlik bo'lgan bemorlar holatida ham yuqori foizli ijobiy natijalar berdi. Tinnitusdan aziyat chekayotgan 36 bemorning 8 tasida u butunlay g'oyib bo'ldi, 18 tasida esa kamroq intensiv holatga keldi. O. A. Golubovskiy fikriga ko'ra,

sub'yektiv quloq shovqinini flyuktuatsion toklar bilan davolashning kelajagi bor va chuqurroq o'rganishni talab etadi.

Quloq shang'illashi kechalari uyqu bermasa, internetda shovqinni maskirovkalovchi maxsus dasturlar mavjud. Mobil qurilmalar uchun ishlab chiqarilgan dasturlardan biri Sound Oasis saytida taqdim etilgan va «Tinnitus therapy pro» deb nomlanadi. Tanishib olish uchun 5 turdaig tovush mavjud bo'lgan «Tinnitus therapy lite» nomli dasturni bepul yuklab olish mumkin. Shuningdek bepul tarqatiladigan dastur «Аура. Звуковая атмосфера леса — дневного и ночного» ham mos keladi.

Hozirgi kunda dunyoda quloq shang'illashini davolash uchun Pavel Yastreboff ishlab chiqqan model — tinnitus retraining therapy (TRT) ustunlik qilmoqda.

TINNITUS RETRAINING THERAPY

TRT usulining mohiyati sodda, lekin bemorga o'rgatish uchun vaqt kerak bo'ladi: kishiga shovqinni tinglamaslik, unga chalg'imaslik, bo'shashish o'rgatiladi va unga jiddiy kasallik bilan kasallanmaganligi va hayotiga xavf yo'qligi tushuntiriladi. O'rgatish uch kunlik intensiv kursda o'tkaziladi. Kursning birinchi qismida odamlarga quloqdagi shovqin salbiy narsa emas deb o'ylashni o'rgatish uchun aniq maslahatlar berishni o'z ichiga oladi. Kursning ikkinchi qismi tovushli terapiya. Dori-darmonlarsiz shovqin 6-12 oy ichida o'z-o'zidan 50% gacha kamayadi. Muvaffaqiyatli psixoterapiya bilan, odam 3-20 oy ichida tinnitusni sezmay qo'yadi. Ba'zan jiddiy depressiyada asabiy zo'riqishini kamaytirish uchun antidepressantlar buyurilishi mumkin.

TRTning tovushli terapiyasi tez-tez «oq shovqin» ni tinglashni tavsiya qilishdir — sharshara, dengiz, shivirlaytogan barglarning ovozi. Audiomasker tomonidan chiqariladigan «oq shovqin» po'stloq osti eshitish yo'llarida hech qanday ahamiyatga ega bo'lmagan neytral tovush sifatida baholanadi. Shu zahotiyoq uni qabul qilish bloklanadi va signal po'stloq darajasigacha yetib bormaydi va shovqin hissini chaqirmaydi. Shu bilan birga, bemorni

bezovta qiluvchi shovqin ham o’z ahamiyatini yo’qotadi va bemor uni ham idrokiy qabul qilishni to’xtatadi. «Oq shovqin» universal emas, balki maxsus tekshiruvlardan keyin har bir bermor uchun alohida tanlanadi. Bundan tashqari, davolash uslubiga psixoterapiya ham kiradi, u bermorni bezovta qilayotgan shovqinga e’tibor qaratmaslikni o’rgatadi. Agar bemorda qulog’i og’irlik aniqlansa, eshitish apparati tanlanadi, chunki tashqi ovozlarning kuchayishi ham ichki shovqinni «pasaytiradi».

OLDINI OLISH

Har qanday kasallikni davolashdan ko’ra oldini olish osonroqdir. Ushbu oddiy tavsiyalarga rioya qilib, o’zingizni tinnitusdan qutqarasiz:

Agar siz quloqchinlarda musiqa tinglasangiz, musiqa juda baland ovozda emasligiga ishonch hosil qiling. Metroda bo’lganingizda musiqa tinglamaslikka harakat qiling. Musiqa bilan birgalikdagi poezdning shovqini eshitish analizatori juda ko’p zo’riqishiga olib keladi.

Agar kasbiy faoliyatingiz ish joyidagi shovqinlar bilan bog’liq bo’lsa, quloq tiqinlaridan (berushi) foydalanishni unutmang.

Kofeinli va spirtli ichimliklardan saqlaning. Ushbu ichimliklar quloqdagi shovqinning kuchayishiga olib kelishi mumkin.

Quloqlarni tozalash uchun paxtali tayoqchalarni ishlatmang. Ularning noto’g’ri qo’llanishi quloq oltingugurtini eshitish kanaliga itarilishiga olib keladi.

Stressli vaziyatlardan qoching. Autogen trening metodlarini o’rganing. Kuniga kamida yetti-sakkiz soat uxlayotganingizga ishonch hosil qiling.

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