INCIDENCE AND DISABILITY IN THE UDMURT REPUBLIC

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Summary: dynamics of indicators of the general and primary incidence, level of primary disability of adult population of the Udmurt Republic with diseases of an ear and a mastoidal shoot for 2012-2016 is presented in article. According to the statistical materials provided by Republican medical information and analysis center of the Ministry of Health of the Udmurt Republic and the Main bureau of medico-social examination on the Udmurt Republic it is established that in dynamics of the last five years growth of patients with primary disability while indicators of incidence had wavy dynamics is noted: with decrease in level by 2015 and new growth in 2016.

Keywords: primary disability, incidence, diseases of an ear and mastoidal shoot, Udmurt Republic.

Introduction. The health care exerts important impact on the state of health and an outcome of a disease, at the same time the state of health of the person and society influences or, at least, has to make the leading impact on development of the health care system. In recent years in the Russian Federation deterioration in health of adult population is noted that reflect indicators of incidence and primary disability. Dynamics of these indicators is the indicator of health of the population. In common they show quality and level of medical care, a condition of the ablebodied and disabled population, development of socio-economic factors [1-4]. The work purpose - to estimate indicators of the general and primary incidence, level of primary disability of adult population of diseases of an ear and a mastoidal shoot of the Udmurt Republic.

Results. As a result of the analysis wavy dynamics of the general and primary incidence is established. Decrease in level of the general incidence of the population of diseases of an ear and a mastoidal shoot with 4852,7 in 2012 to 4281,6 on 100 thousand population in 2015, with growth of indicators in 2016 to

4520,4 on 100 thousand population is noted. In too time indicators of 2016 did not exceed those in 2012.

Primary incidence of diseases of an ear and mastoidal in Udmurt Republic from 2012 to 2015 had a resistant tendency to decrease from 2438,2 to 2167,1 on 100 thousand population, with growth in 2016 up to 2202,4 on 100 thousand population, at the same time the indicator remained lower than the level of 2012 for 9,7%.

Republican values of primary disability diseases of an ear and a mastoidal shoot for the studied period showed the gathering growth of number of cases this pathology. It is established that for the five-year period primary disability grew from 0,6 to 1,0 on 10 thousand population. Growth was 66,7% in relation to 2012. Growth of incidence of the population of diseases of an ear and mastoidal shoot can be caused by various negative factors of the infectious nature, microtraumatic injuries of an ear, decrease in the general and local immunity, the wrong hygiene of an ear, allergic reactions, mechanical, thermal and acoustic injuries of an ear on production, foreign matters, etc. However, they cannot be associated only with influence of external factors as indicators of incidence and primary disability are also determined by the level and availability of medical care by a profile otorhinolaryngology, neurology to the population of the region, the social and psychological processes happening in society, and also the provision of a personnel condition of the republic. With increase in a retirement age of the population of the Russian Federation it is necessary to expect changes of statistics with increase in growth of incidence and primary disability.

Conclusions. Are revealed: growth of the general and primary incidence of the population in 2016 in the Udmurt Republic diseases of an ear and a mastoidal shoot, indicators of primary disability increase on all interval of a research every year. The revealed growth of statistics demands profound studying of this question from the point of view of quality of rendering, availability of medical care to the population of the republic, the level of security with otorhinolaryngologists and their qualifications.

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