

**Organizational problems in providing medical care to children and adolescents with acne
(Review)**

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Annotation. The review describes the prevalence of acne in children and adolescents, the current care and formation of the disease, as well as the prevention and quality control measures that need to be developed. Studying the materials and data of official statistics, literary sources, the authors find problems in the availability of medical care for children and adolescents suffering from acne in modern Russia. The aim of the work was to develop measures for quality control and prevention of this pathology. Within the framework of the author's research, new aspects are proposed for the effective and safe solution of the problems of optimizing the quality of medical care for this group of patients. The incomplete approach to the availability and quality of medical care for children and adolescents suffering from acne, the ambiguous implementation of the obligations of state guarantees for children and adolescents, all this indicates organizational problems in the Russian healthcare system.

Keywords: public health, public health, acne, children and adolescents, recommendations.

Introduction

The Global Strategy for Child and Adolescent Health 2016-2030 [1] shows us the need to divide health care into age groups and focuses on the adolescent population. She puts the prevention of diseases in the first place, in which she sees success in promoting the health of children and adolescents.

According to the World Health Organization (WHO), children and adolescents are a valuable asset of the state. The report "Health for Adolescents around the World", included in the WHO Global Strategy, stated that "investment can come to naught if there is no prevention of diseases in them." The main goal of each state should be the prevention of diseases in adolescence. [1].

The same report highlighted that 3,000 adolescents die from preventable causes and most diseases that are acquired during childhood and adolescence. Attention was also drawn to issues related to the psychological health and well-being of children. WHO noted that during the period of humanitarian crises and instability in which we now live in 2020-2021, the need for health protection is particularly strong.

The aim of the work was to develop measures for quality control and prevention of acne in children and adolescents.

Materials and methods

The authors analyzed 50 scientific articles, legal sources, dissertations on the prevention of acne in children and adolescents. The problems of personnel deficiency for improving preventive work with this contingent of patients are shown.

Results and discussion

The development of medical science and the improvement of the health care system are taking rapid steps. The organizers of health care believe that the quality of medical care depends on the human potential of employees, including dermatovenerologists, and not only on funds and material resources, and on their effective use. [2, 3, 4]. Studying the quality of medical care, it is clearly seen that scientists of the world differently assess the quality of medical care for different categories of citizens [5, 6, 7, 8, 9, 10], there is a personnel shortage, which is highlighted in numerous publications [11, 12, 13, 14].

Every person who is faced with health issues wants to receive high-quality medical care, in a comfortable home environment and have a long-term result. [15, 16, 17]. At the moment, the process of reforming the Russian healthcare system is going on dynamically, the main task of which is to study and solve the problems of accessibility, safety and quality of medical care.

Acne is a polymorphic multifactorial dermatological disease of the sebaceous glands. It is recognized as a chronic dermatosis, which can affect the psychological state and social aspects of

patients' lives. The activity of the disease occurs during puberty and is accompanied by a long chronic sluggish course with periods of exacerbation of the disease. This disease requires a long course of treatment and maintenance therapy, which indicates the need for its early detection [18].

The rapid development of medicine, the dynamics of the primary morbidity of children with diseases of the skin and subcutaneous tissue from 0 to 14 years since 1990 has increased by 44%, and children from 15 to 17 years-by 2.3 times [19].

Appearance is of great importance for teenagers, especially for children from orphanages. Taking into account the social changes that may occur in the lives of children, it is necessary to carry out the prevention of acne - this will have a positive impact on the arrangement of personal life and adaptation of the individual in society [20].

It is especially important to note that the formation of physical health, mental and creative capacity is mainly due to the age of children [21].

A significant interest of the majority of scientists is caused by the poor health of children [22,23,24,25,26]. In the course of the research work, it was found that acne is widespread in the world. This disease is diagnosed by doctors of different specialties in most cases at the age of 12-13 in 69.9 % of girls, and in 73.6 % of young people associated with the late onset of puberty - at 14-15 years [27].

Acne can occur in mild to moderate severity, for the treatment of such forms of severity, it may take 3-4 years of treatment. In the case of treatment of severe acne, it may take significantly longer: from 8 to 12 years [28].

Due to the fact that this disease tends to manifest in visible areas of the body, increasingly experts note a decrease in the quality of life of patients due to the appearance of social phobia, anxiety and depression in acne patients. It is especially important to note the fact of non-acceptance of their appearance in patients suffering from acne, which has a high percentage of negative consequences accompanied by suicidal outcomes [29, 30].

Acne should be considered a disease that has a negative impact on the psychological and emotional state of patients' health; in this regard, a standard psychiatric examination and psychological support should necessarily be included in the acne treatment plan [28].

According to Federal Law No. 323-FZ of 21.11.2011 "On the basics of protecting the health of citizens in the Russian Federation", articles 7 and 30 emphasize the priority of protecting the health of children and the preventive direction in the formation of a healthy lifestyle [29]. Thus, the state emphasizes the need to protect the health of children, through the development and implementation of programs aimed at the prevention and early detection of

diseases to create the necessary conditions for the normal physical and mental development of children.

In turn, according to the Order of the Ministry of Health of the Russian Federation No. 924n of November 15, 2012 " On approval of the Procedure for providing medical care to the population in the profile "dermatovenerology "[30] in the clinical recommendations for the treatment of acne, there are no preventive measures, as well as methods of rehabilitation of acne, which are an important aspect for preserving the life and health of children and adolescents.

To date, the prevention of acne has not been developed, which indicates the relevance of our study. In addition, it is worth paying attention to the new ICD 11 revision that has appeared on the Internet, which has not yet been approved, but has seriously changed regarding diagnoses concerning acne. The addition of new diagnoses such as: ED80 Acne and related disorders, ED80. 4 Acne Scars, 6B25 Body-related behavioral disorders, MB26. 090 Somatic delusion directed at the skin, 6B21 Body Dysmorphic disorder, proves once again the relevance of the chosen topic and focuses on new topical problems that arise in patients with acne, leading to a decrease in the quality of life and negatively affecting the psychological status of the patient[31].

According to the WHO, every sixth person in the world is in the age group of 10-19 years. She also emphasizes that at this age, 16% of violations are related to diseases related to mental illness, and half of such diseases occur before the age of 14 and remain untreated, leading to negative consequences for the individual. [32].

At the same time, I would like to note that the order of the Ministry of Health of the Russian Federation "On approval of the standard of medical care for patients with Acne" dated December 11, 2007 No. 750 does not provide for the study of the psychoemotional status [33].

And suicides are the third most important in the age group of 15-19 years. Denial of mental health disorders in adolescence, failure to provide assistance and early diagnosis of diseases in children, will entail consequences that will reduce the quality of full-fledged life activity of an individual in adulthood, and will have a negative impact on both physical and mental health.

According to WHO data on the DALY indicator, the main causes of lost years of life among adolescents in 2015 included anxiety, depressive disorders, anxiety disorders, intentional harm to their health, behavioral disorders of childhood, interpersonal violence [1].

Studying scientific studies related to the disease of acne, it was found that 19.2% of adolescents suffered in their personal and public life. Social phobia was diagnosed in 45% of patients with acne compared to 18% in the control group. Race and gender did not play a role in self-awareness and social perception of the disease [34]. In children with acne, the presence of psycho-vegetative disorders is noted [12]. This disease contributes to the appearance of a

psycho-traumatic situation and concentration on the disease, which significantly reduces the effectiveness of conventional therapy [35].

Due to the fact that the disease affects open areas of the body, especially the face, and forms long-lasting skin defects, and sometimes leaves lifelong traces of negative skin changes on the face, after the disease. In 10% -40% of patients, there are significant negative changes in social and psychological activity, which contribute to a significant decrease in self-esteem and quality of life in general, thereby exacerbating the so difficult daily life of a teenager. As well as to the development of anxiety-depressive disorders with a subsequent probability of suicide [36, 37].

According to E. E. Zhiltsova et al. [38], acne patients have a violation of the psycho-emotional background and a reduced quality of life, are diagnosed with states of anxiety (85.2%), self-doubt (77.8%), increased irritability (33.3%), isolation (42.6%), signs of depression, sleep disorders (5.6%). The relationship between the severity of the disease is directly proportional to the change in the quality of life [39].

Studies conducted by O. I. Zadnipyryana et al. [40], with the participation of 101 patients with acne and post-acne, showed that in 66.2% of acne sufferers, previous psycho-traumatic situations (intra-family and interpersonal conflicts, death or long-term chronic illness of relatives, failures in the professional sphere) acted as a provoking factor for manifestation and disease.

Often there is the formation of a post-acne symptom complex in acne patients, due to self-damage to the skin, diagnosed as expropriated acne.

Acne is an indicator of an unfavorable socio-economic situation, which, in turn, generates socio-economic problems. Adolescence is a period of formation of protective behavior, the body of children, especially children from social risk groups, is more vulnerable and sensitive to changes in environmental factors, so it is necessary to identify and analyze the influence of social and hygienic factors affecting the risk category of children and adolescents is relevant [41].

In recent years, the level of general and primary morbidity of children of puberty is increasing: more than 50% of adolescents are diagnosed with chronic diseases. I would especially like to highlight children from the social risk group, who in the near future will replenish the social, economic, military, scientific and cultural reserve of society. The health of generations can be protected by strengthening the health in the adolescent period by strengthening the psycho-emotional background of the child[28].

Prevention of adolescent acne will reduce current and future health care costs and qualitatively increase social capital. Human health determines the quality of life and the

implementation of the planned life plans, the creation of a family, the desire for professional training, social development, the development that determines the development of the country will depend on it [42].

The child and youth mortality rates are of particular concern. Analyzing adolescent mortality, it was found that 75% of deaths can be prevented, as they are caused by accidents (34%) and suicides (30%), substance poisoning (6%), alcohol intoxication (5%) [43]. Among these deaths, there may have been patients with acne, but no one takes into account such statistics.

An important place in society is occupied by the appearance of a person. In adolescence, there is a desire to improve their appearance, for a better sense of attractiveness, which will contribute to self-confidence, efficiency and, of course, will make them more in demand in society, in those professions in which a person's appearance is of great importance [44].

Global data emphasize that acne is one of the top three skin diseases in the global population, affecting about 85% of adolescents[23, 45].

Numerous scientific data indicate that up to 80% of people in the age range from 12 years old, regardless of gender, race, or ethnic group, suffer from acne [46, 47]. According to WHO, more than 3,000 adolescents die every day, or 1.2 million a year. One of the primary reasons is suicide against the background of dissatisfaction with their appearance [48].

According to the observation of many scientists, patients with acne feel a decrease in adaptation in society, among such people there are many lonely and unemployed citizens. Patients in the provision of medical and social care, patients often do not receive support from the state due to biased criteria. The issues of medical and social expertise of patients with diseases of the skin and subcutaneous tissue are still practically not studied and methodologically not worked out [46, 49].

The needs of adolescents in health services are increasing, it is necessary to optimize the activities of the system of medical and preventive care for adolescents, especially a systematic approach is needed, focused on the interests of children, including changing priorities in the work of the health sector, as well as the formation of responsibility for their own health. Strengthen the capacity of health workers by improving the system of rationing and remuneration. Take measures to provide assistance to children focused on the interests and needs of adolescents, while respecting the principles of confidentiality, security, protection and respect. Provide the opportunity to receive assistance in a favorable environment and ensure psychosocial well-being. Optimization of the system with the revival of the practice of distributing young specialists (even with secondary special education), taking into account the needs of medical organizations [48].

With regard to the outpatient stage of treatment of patients suffering from severe skin diseases, it is necessary to take into account that to this day there is no single mechanism for their preferential drug provision within the framework of co-financing [50].

Conclusion.

The analysis of publications related to the problem of organizing medical care for children and adolescents with acne shows the relevance of the study in this aspect. Health problems associated with acne may seem new, not fully understood, without solving the problem of access to medical care for this category of children and adolescents, especially from socially restricted groups, it is possible to predict a decrease in the quality of medical care, which will inevitably lead to an increase in morbidity, premature mortality and disability of the population.

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