

ROLE OF BIOETHICS AND PUBLIC HEALTH IN PROVISION OF FAIR AND QUALITY MEDICINE

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ANNOTATION

Since the advent of public health (MPH) in the 17th century, its success has depended on close engagement with society. In the field of health, bioethics professionally bridges the gap between institutional and public policy, creating a link between achievements, responsibilities, and what needs to be done when the area of responsibility prevails as the guiding principle of ethics. In this context, since public health and bioethics incorporate social and subjective determinants in their analysis, it is recommended that public health action be undertaken using an expanded and integrated view of the relationship between human and health. The essence of public health ethics concerns the moral rationale for policies, programs, and laws that protect and promote public health. Since public health includes broad social programs and public policies, issues related to justifying paternalistic interventions, equitable distribution of resources, and responsibility for health. Certain patient care measures (such as vaccinations) also contribute to public health, and difficult ethical questions can and do arise among practitioners.

The purpose of this study was to explore the possibility and necessity of combining the efforts of bioethics institutions, public health, and civil society to provide fair and quality medical care. The paradigm of the social context of the development of bioethics, in addition to the educational component in medical universities, which form the worldview and bioethical culture of future doctors in general, includes a component of the practical implementation of this important task in society. It is to promote and discuss bioethical discourse in society through the efforts of public health organizations, civil society institutions with the aim of providing better, equitable health care, solving bioethical problems, passing laws and related legal norms.

KEYWORDS: bioethics, public health, civil society institutions, health policy, fair and high-quality medical care.

MATERIALS AND METHODS

Analysis of information obtained from personal experience, conferences, scientific literature, search for information on research

INTRODUCTION

Bioethics contributed to the formation of a new discipline, which became a bridge between the two sciences, natural and human, which in their dialogue made possible the further development of science with a current emphasis on ethics.

The theory and legislative practice in the second half of the 20th century considered the Universal Declaration on Bioethics and Human Rights. According to Article 1 of the 2005 Universal Declaration on Bioethics and Human Rights. [1], bioethics "addresses ethical issues related to medicine, life sciences and related technologies in relation to people, taking into account their social, legal and environmental aspects." For the training of future physicians, this definition expands the discipline, going well beyond the traditional and more controversial questions of the beginning and end of life or the limits of research. The right of everyone to the highest attainable standard of health is recognized - among other things - as one of the principles that global bioethics must comply with, including all determinants of human development and well-being. Therefore, social responsibility and respect for people and groups living in situations of particular vulnerability, the sharing of knowledge and benefits, and sustainable development are key to the work of the UNESCO International Bioethics Committee (IBC). The commitment to improving the health, dignity, and quality of life of every person is a matter of society, as well as public health and medicine. Human health, the life expectancy of people, and an active resource of their vital activity are the main values of the state and its main wealth. The basic sphere of preserving and multiplying these values is medicine, the legal support of which has recently been subject to active innovation processes, based on the tasks of building a modern society in Uzbekistan, where human health is not his own business, but the most important component of national wealth - human capital. Innovation policy is complex and not always a risk-free process, the course of which is determined by many initial prerequisites: technical, financial, economic, and social. However, in the modern world, only an innovative way of development ensures progress. Uzbekistan ranked 93rd out of 131 in the Global Innovation Index 2020 (GII, Global Innovation Index). The country has not been included in the GII for the past five years due to a lack of data. "Uzbekistan's continuous and systematic process to improve data coverage has led to the country's inclusion in the GII this year. However, additional progress in data collection, especially on the Innovation Input sub-index, is still needed to further improve the credibility of the country's overall ranking," the index compilers emphasized. In September 2018, the President of Uzbekistan Shavkat Mirziyoyev approved the Strategy for Innovative Development of Uzbekistan for 2019-2021. [2]. Its main task is to enter the country by 2030 into the 50 leading countries of the world

according to the Global Innovation Index rating. Today, innovative activity in Uzbekistan is not limited only to the creation of innovations, but also implies the adoption of the necessary measures for even wider use of advanced experience, the creation of modern conditions to ensure the prosperous life of our people. One of the important outlined tasks of the strategy is - "improving the quality and coverage of education at all levels, developing the system of continuing education ..." It is envisaged that programs and teaching materials based on international educational standards are widely introduced into the educational process, which rightfully belongs to the course bioethics. As an academic discipline, bioethics has entered the international educational standard at philosophical and medical universities. The priority in the philosophical teaching of medical students is the formation of their creative thinking and scientific outlook in order to become a free and responsible person, able to work constructively in problem situations, combining professional competence with civic responsibility. Currently, Uzbekistan pays special attention to creating conditions for further improving the quality of medical services in all regions of the republic. To accomplish this task, it is the relevant form of bioethical culture of future doctors. The central problems in the bioethics course are topics related to the presentation of modern worldview guidelines and humane values of culture, associated with delicate problems that have arisen as a result of the breakthrough of biomedical technologies: problems of life and death, ethical problems of biomedical research on humans, medical genetics and genomic medicine, etc. The discipline "Bioethics" refers to the social and humanitarian cycle, for which it is necessary to master as prior knowledge in the field of philosophy, history of medicine, religious studies, history of Uzbekistan, jurisprudence, public health and health care, clinical genetics and others. Modern biomedical ethics is based on a rich tradition of systematic moral thought, philosophical and religious.

Today, in the 21st century, in the system of medical education, the interaction and synthesis of natural and humanitarian disciplines are of paramount importance. One of the ways to solve this problem is the mastery of the foundations of biomedical ethics by future specialists, which will help formulate new ethical postulates, put them forward in front of the medical and scientific community, and more fully understand the moral dilemmas that doctors, medical staff and researchers face, not only in their daily work but and in mastering the latest biomedical technologies. The search for new value foundations of biomedical ethics, such as mercy, charity, consent, solidarity, continues the ancient traditions of the spiritual basis left by the Arab-speaking scientists of the East and Central Asia.

The relevance of the formation of the social context of bioethical problems in Uzbekistan

The population of Uzbekistan today is over 33 million people. At the initiative of President Shavkat Mirziyoyev, work is consistently continuing in the country to reform the healthcare system. These reforms are aimed at preserving the health of the population, raising a physically and spiritually healthy generation. Today, in all regions of Uzbekistan, even in the most remote villages, new medical institutions have been built or existing hospitals have been reconstructed, which have acquired a modern look and have all the amenities. They have created opportunities for accurate diagnosis of diseases and the use of modern methods of treatment and prevention of diseases. Over the past three years, more than 160 regulations have been adopted. As a result, important changes are taking place at all levels of the health care system. Starting from primary health care and ending with specialized centers, new technologies are being introduced everywhere, the achievements of world science and medicine are widely used. These changes are based, first of all, on the decree of the President of the Republic of Uzbekistan "On comprehensive measures to radically improve the health care system of the Republic of Uzbekistan" dated December 7, 2018 [3]. The decree approved the Concept for the Development of the Healthcare System of the Republic of Uzbekistan for 2019-2025

and the Program of Measures to Implement the Concept for the Development of the Healthcare System of the Republic of Uzbekistan in 2019-2021. [3]

Public discourse on topical issues, reaching agreements on controversial issues, public participation in making socially important decisions, the possibility of the public audit of enterprises of various forms of ownership and state institutions in matters of compliance with agreements - in these civil society procedures, the eco-, and bioethical components become a catalyst for practical actions. The system-forming component of civil society - the public sphere - is a space for interaction of citizens as individuals, free from government interference, in solving a number of problems on the principles of self-organization. These include environmental and bioethical issues today. Today, significant changes in the provision of medical care transform patients from gullible, relatively passive recipients of medical care into an increasingly skeptical and informed group of consumers expressing their concerns and challenging the previously undeniable authority of practicing doctors, which was facilitated by medicalization, overdiagnosis, and the commercialization of medicine. Currently, health care consumers are concerned about the number of procedures they undergo and wonder if these procedures are really necessary to diagnose or treat their disease? The population is concerned about the costs of providing medical services and treatment at an affordable price. The health insurance system is just getting started. The government provides some protection for health benefits for vulnerable populations.

One of the objectives of the strategy is “to increase the efficiency of government bodies through the introduction of modern methods and management tools” [2]. Why is it so important to include bioethics not only in the category of educational courses for undergraduate and postgraduate education but for public health, civil society, and law? Because, firstly, the concept of bioethics is related to the ethical issue of preserving the planet and its biodiversity in the face of technological advances that can harm the ecosystem. Against this background, bioethics includes the perception of the quality of human life, respect for the environment and ecosystem, as well as existing biomedical problems. Bioethics encompasses advances in biotechnology, health care, and professional ethics, including in the search for possible solutions, focused on the complexity of life itself and its problems. Second: in the field of health care, bioethics professionally creates bridges between institutional and public policy, creating an interface between achievement, duty, and what is to be done when the area of responsibility prevails as the guiding principle of ethics. In this context, since public health and bioethics include social and subjective determinants in their analysis, it is prudent to pursue public health (MPH) action with an expanded and integrated view of the relationship between people and health. The essence of public health ethics concerns the moral rationale for policies, programs, and laws to protect and promote public health. Since public health encompasses wider social programs and government policies, such as providing clean water to the population and banning smoking in public places, the issues of justifying paternalistic interventions, equitable distribution of resources, and responsibility for health are very important. Certain patient care measures (eg vaccination) also contribute to public health and difficult ethical questions may arise for practitioners.

IBC is entrusted with addressing major ethical issues related to the progress of medicine, life sciences, and related technologies. These areas are among those in which the unprecedented pace of this progress seems to be increasingly complex from an ethical, political, and legal point of view. Despite the significant global improvement in living standards, health, and well-being, the persistence of poverty and related diseases remains an alarming fact in the lives of billions of people around the world and is the main reason for the inability of developing countries to improve the situation and the health of their peoples. The right to development, acting through the vector of rights, can tackle the

social determinants of health by obliging governments and the international community to support public health systems while reducing health inequities by reducing poverty and economic growth.

Poverty is generally considered to be one of the main causes of many social, economic, and political problems around the world. Where it is widespread poverty, it is much easier to spot higher illiteracy rates and shorter life expectancies when looking at the key elements of the Human Development Index. Here we draw attention to the initiative of the head of our state Sh.M. Mirziyoyev on defining the issue of eliminating poverty and fighting poverty, which was one of the main topics of the UN General Assembly session, as well as holding a global summit on these issues.

The Universal Declaration of Human Rights established that everyone has the right to a standard of living that is necessary to maintain the health and well-being of himself and his family, including food, clothing, housing, medical care and necessary social services, the right to security in case of unemployment, illness, disability, widowhood, old age or another case of loss of livelihood due to circumstances beyond his control. As part of the implementation of the SDGs, Uzbekistan pledged to introduce reliable strategic mechanisms for sustainable development and social protection for everyone and, in particular, low-income and vulnerable people. Currently, our republic is actively preparing a large-scale program to reduce poverty, actively studying international experience in eliminating poverty. The government has launched comprehensive studies, work is underway to develop a national methodology for determining poverty, taking into account the best international practices. All this work will make it possible to form a methodological basis for conducting a comprehensive assessment of poverty in the country, determining the criteria for classifying people as needy. The calculation and approval of the minimum consumer basket and the subsistence minimum will create the necessary basis for the subsequent adjustment of the social security system, the calculation of benefits, payments to the poor. The state provides assistance to young people and other people if there is a desire to develop independently, to engage in labor activity, it determines the creation of social infrastructure and appropriate conditions for increasing employment, increasing productivity based on modern technologies, and developing entrepreneurial activity.

GLOBALIZATION AND GLOBAL BIOETHICS

Global economic markets and the relative strength of global economic institutions shrink the national policy space. It is relevant to consider the potential contributions and limitations of human rights in achieving greater equity in the formation of social determinants of health. Many ethical concerns are associated with public health interventions. Ethics and bioethics specialists ask important questions and answer the questions of how to do the right thing and how to be in the context of modern medicine and healthcare. They draw on a variety of pluralistic traditions, both secular and religious, to give impetus to civil discourse on controversial issues of moral difference and other issues that most people agree with. Bioethics specialists contribute to public knowledge and understanding of both moral philosophy and scientific advances in health. They highlight how medical technology can change the way we perceive the meaning of health and disease and, ultimately, the way we live and die. Potter, the author of the term and the doctrine of bioethics, saw bioethics as a special worldview that unites objective scientific knowledge and universal values, natural and human sciences, theory, and practice in order to create the necessary conditions for the survival of mankind. Gradually, the scientist came to the idea of global bioethics as the prerequisites and grounds for which he proposed to consider medical and environmental ethics. [4.5]

As a sociological study, bioethics emerged in the 1970s, part of this vision was in two globally recognized paradigms: the principled paradigm and the casuistic paradigm. The main theory, published in the Belmont report (1978) [6] and highlighted in Principles of Biomedical Ethics, first published in 1979, was based on four basic bioethical principles (Beauchamp and Childress, 1994) [7].

This theory, often referred to as the principles paradigm of bioethics, was conceived to be an accessible and practical tool for analyzing conflicts arising in the field of bioethics, namely: (1) beneficence; (2) not causing harm; (3) fairness and (4) autonomy. Other principles that are used in applying evidence in public health interventions, such as respect, solidarity, resilience, social responsibility, participation, transparency, and accountability in public health, help build a model of health intervention based on an ethical understanding of evidence. Beauchamp and Childress [7] postulate that bioethical principles are not formalized as absolute truths, but are *prima facie*, that is, they become obvious, valid, and generally accepted at the first analysis of the case in the absence of another, more decisive principle. Bioethics, in this context, arose as a concern with the establishment of moral criteria for human behavior in various life situations. Human rights act as ethical guidelines to support bioethics in action to protect life and health.

With the questions posed by globalization, ethical issues, in particular bioethics, concern us all. UNESCO has proposed an institutional framework for the collective discussion of the 1997, 2003 and 2005 Universal Declarations. Article 23 of the 2005 Declaration calls on all states to encourage NGOs to consultative status with UNESCO to participate in educational and information programs on bioethics, the convergence of biomedical and environmental ethics. [1] Various UNESCO resources have been created, such as the GEObs 4 databank, programs to help establish bioethics committees. Participation of NGOs as representatives of civil society in all its diversity. Let's turn to the Universal Declaration on Bioethics and Human Rights. Article 23 - Education, training, and information in the field of bioethics states:

1. In order to promote the implementation of the principles set out in this Declaration and to better understand the ethical implications of scientific and technological progress, in particular for young people, States should strive to promote bioethics education and training and to promote dissemination programs information and knowledge about bioethics.

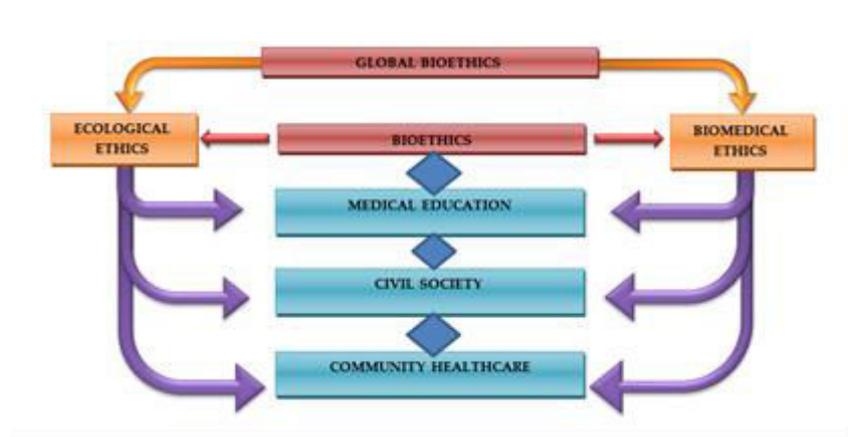
2. States should encourage participation in these efforts of international and regional intergovernmental organizations, as well as international, regional, and national non-governmental organizations. [one]

Potter considered global bioethics as a modern stage in the development of environmental ethics in the following scheme: environmental ethics - environmental bioethics - environmental bioethics - global bioethics. [4,5]

Global bioethics analyzes and evaluates both biomedical sciences and any other knowledge and technologies arising in various fields of theory and practice - everything that is related to the problem of human survival and the preservation of life on the planet. Numerous concepts and principles of bioethics play the role of universal mechanisms of "inscribing" a modern person and his life world into the totality of life, which allows us to speak of bioethics as universal ethics. A characteristic feature of global bioethics is the development of foundations and mechanisms not only for combining medical and environmental ethics but also for their further transformation as integral parts of a new global view of the world and its unity. Bioethical principles [7] act as invariants, which are, as it were, in the interval, "between" scientific and everyday concepts, performing simultaneously cognitive, heuristic, and ontological tasks. They are open to interpretation and coexistence with a variety of values, and their main task is to provide conditions for the preservation and development of life "worthy of human spiritual aspirations." All other values and ideals must be subordinate to this basic task.

We propose to further transform the concept of global bioethics to include medical education, civil society, and public health as promoting and confirming the ideas and teachings of bioethics in a

practical context. The diagram shows the relationship between environmental and biomedical ethics and global bioethics. One of the first stages on the path of bioethicisation of society is medical education, in which an academic discipline is formed, which is practiced in laboratories or in science and clinical medicine, which is responsible in this direction for the formation of the bioethical culture of future doctors. The assistance of civil society institutions is also important here. In Uzbekistan, there are 5 officially registered parties, the efforts of which should be carried out to promote bioethical doctrine in society. The partner model is bioethical, it should be a modern model not only in the doctor-patient relationship, it should become understandable and consistent with the civilian population and society. Involvement of a pluralistic civil society in a consensus in the discussion of delicate problems of bioethics depending on religious preferences, national traditions, and legal regulation is not an easy process, but it should be striven for in the name of harmony in society, the achievement of high-quality medical care and public health. The solution of complex, not simple problems arising as a result of the development of modern biomedical technologies depends not only on the saturation of them with devices in public and private clinics, it must be coordinated by the adoption of thoughtful legal regulation, taking into account the above-mentioned religious, national traditions and modern scientific discoveries.



The demand for bioethics and bioethics is now wider and greater than what is required by the actions and policies of hospitals, medical device companies, and global pharmaceutical corporations. Bioethics who are trained in ethics and philosophy are important to society, they have a special set of skills that are urgently needed in all areas of public policy. But the potential for meaningful action is different from actual activity. The civil rights movement is a classic example of a bottom-up approach. If laws are passed from above thanks to a group of deputies, it will not be complete - an example of a temporary provision on closely related transplantation. [8]. This is a very difficult problem to be solved and perceived by society, which has a complex context depending on the recommendations of religious ethics, religious teachings, and views despite a secular state such as Uzbekistan. Because in addition to philosophical, medical, biomedical, and ethical problems, the aspect of a religious, historical, and national understanding of the problem of organ and tissue transplantation is included.

Survival of humanity, deepening democratic processes in modern society and positively solving the dilemmas of democracy by overcoming global problems, improving living standards in all aspects, including health and protection of consumers of medical services, ensuring a sustainable long-term development perspective, promoting the fundamental interests of civil society of current and future generations can be achieved outside the legal framework and a well-developed and successfully implemented the concept in bioethics and biosafety. Significant inequalities in health between and within countries have been measured over the past decades. While these inequalities, as well as attempts to improve health below the established level, raise deep questions of social justice

and the right to health, people working in the field of bioethics have historically tended to pay more attention to ethical issues arising from new, serious problems of advanced biotechnology. such as life support, genomics, stem cell research, or transplantation. This suggests that bioethics research may revolve around issues that, while interesting and important, currently affect a certain segment of the world's population. We conclude that while there is some evidence of an increased focus on bioethical issues in developing countries, this trend should be further developed as it can help broaden the horizons of this area and increase its social value wherever it is applied [9]. There are huge differences in health status between low-, middle- and high-income countries around the world, as well as significant differences in health status within these countries. Epidemiologists, economists in the field of health, and health policy-makers usually express global health inequities in the form of differences between a country's health indicators (and proxies for health) such as life expectancy, maternal and child mortality, and average per capita income. The science and art of preventing disease, prolonging life, and promoting health through organized community efforts, a movement dedicated to equitably improving the health and well-being of communities with their full participation is led by the Nuffield Bioethics Council. [ten]. Key public health functions are assessing community health needs and mobilizing resources to respond to them, developing health policies in response to specific community and country health needs, and ensuring that conditions are conducive to good health, including high-quality health services, safe water supplies, good nutrition, and unpolluted atmosphere, and an environment that offers opportunities for exercise and relaxation are available to individuals (World Medical Association 1995). [eleven].

The interaction of government policy and structural change leads to changes in the institutional environment for biomedical innovation with serious social and ethical implications.

The main goal of the policy in the field of bioethics and biosafety of the activities of specific institutions in these areas is to create and maintain favorable conditions for solving the most important political, economic, and social dilemmas, especially serious moral relations between each person and humanity, which continue to be exposed to threats and global dangers. For this reason, a close examination of bioethical issues in an interdisciplinary context, in the areas of health and consumer protection, is a viable solution.

What impact can the concept of social responsibility have on bioethics? How does bioethics contribute to understanding social responsibility? Without a doubt, this influence is mainly aimed at restoring the balance of bioethics, perceived as understanding the ethical issues affecting people in the context of a high-tech health care system, towards a more global, more collective approach that highlights solidarity. When asked, can bioethics and public health join forces to represent equitable health care? Let us answer in the affirmative, relying on article 26 of the Universal Declaration on Bioethics and Human Rights, which states the political nature of the role, social protection, that bioethics should play in the health sector. Consequently, social responsibility will lead to questions about the reality and effectiveness of the health system depending on specific goals and the desire for equity. But this remains the field of bioethics, not the entire social sphere.

As the number and complexity of ethical dilemmas in health, aging, mental health, and social work continue to grow, there is a growing need for social workers of excellence who are aware of the principles and methods of problem-solving that are fundamental to bioethics and medicine. In healthcare settings, ethical advice is often required on decisions regarding end-of-life, organ donation, and initiation or termination of treatment. Support in these areas, as well as advise health care providers, organizations, and clients; participating in policy setting and educating others on these issues.

Conduct that conforms to certain bioethical doctrines can conflict with public health needs and ethics. Growth bacterial resistance to antibiotics and the spread of SOVID-19, HIV complicate the fight against infectious diseases. These two sets of priorities need to be reconciled, and this is likely to require a reassessment of prevailing ethical doctrines in the face of public health needs.

CONCLUSION.

The essence of public health ethics concerns the moral rationale for policies, programs, and laws aimed at protecting and promoting public health. Public health includes broad social programs and public policies, issues related to justifying paternalistic interventions, equitable distribution of resources, and responsibility for health. Certain patient care measures (such as vaccinations) also contribute to public health, and difficult ethical questions can and do arise among practitioners. The paradigm of the social context of the development of bioethics, in addition to the educational component in medical schools that form the worldview and the bioethical culture of future doctors in general, includes a component of the practical implementation of this important task in society. It consists of promoting and discussing bioethical discourse by society through the efforts of the Public Health Organization, civil society institutions to provide better, fair, and quality medical care, solve bioethical problems, adopt laws and appropriate legal regulation.

Social responsibility will lead to questions about the reality and effectiveness of the health care system, depending on specific goals and the desire for equity. But this remains the field of bioethics, not the entire social sphere. Health care policy in general aims to promote health by legislating approaches to prevention, treatment, and care. The general assumption is that health policy is not just words on paper, it can have a real impact - especially when integrated into institutional procedures and/or supported by the rule of law - on how health interventions are implemented in the real world.

Bioethical issues in low-income countries and those in underserved or marginalized communities in wealthier countries share similarities arising from historical inequalities, limited access to health care, racial discrimination, and gender-based violence. Given the importance of health as a human value and the traditional aspiration of bioethics to formulate universal principles, it can be predicted that ethical issues related to these global differences will occupy a very important place in scientific research and research in the field of bioethics. The natural moral law impels all conscience to do good and avoid evil. This applies to all areas of ethical behavior in general and, in particular, to bioethics. The organization and continuous education of the population in the interests of a healthy lifestyle can only be achieved by promoting the principles of bioethics and the imperatives of bioethics.

In the pluralistic society in which we live, open to many options, science needs evolutionary dynamics and open ethics. The sciences that are interested in an interdisciplinary dialogue on bioethics are medicine, psychology, sociology, economics, and so on, those who are somehow related to life in all its manifestations and can help improve the quality of life.

Human rights laws and principles, health equity concepts, and technical approaches can be powerful tools for mutual reinforcement, not only by promoting awareness and consensus on shared values, but also by analyzing and strengthening the measurement of human rights and health equity what is the great role of bioethics and public health care, guiding principles of which are equity, social protection, social responsibility, and solidarity.

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