

# Effectiveness of Aromatherapy in Post-Covid Syndrome

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**Annotation:** Aromatherapy is the practice of using essential oils for therapeutic benefit.. When inhaled, the scent molecules in essential oils travel from the olfactory nerves directly to the brain and especially impact the amygdala, the emotional center of the brain. Essential oils are basically plant extracts. They're made by steaming or pressing various parts of a plant (flowers, bark, leaves or fruit) to capture the compounds that produce fragrance. It can take several pounds of a plant to produce a single bottle of essential oil. In addition to creating scent, essential oils perform other functions in plants, too.

**Key words:** aromatherapy, COVID-19, Essential oils, parosmia, hyposmia, anosmia.

Aromatherapy is the use of essential oils from plants for healing. Although the word "aroma" makes it sound as if the oils are inhaled, they can also be massaged into the skin, or rarely, taken by mouth. You should never take essential oils by mouth without specific instruction from a trained and qualified specialist. Whether inhaled or applied on the skin, essential oils are gaining new attention as an alternative treatment for infections, stress, and other health problems. However, in most cases, scientific evidence is still lacking. Essential oils are concentrated extracts taken from the roots, leaves, seeds, or blossoms of plants. Each contains its own mix of active ingredients, which determines the use of the oil. Some oils are used to promote physical healing. For example, to treat swelling or fungal infections. Others are used for their emotional value, they may enhance relaxation or make a room smell pleasant. Orange blossom oil, for example, contains a large amount of an active ingredient that is thought to be calming.

Essential oils have been used for therapeutic purposes for nearly 6,000 years. The ancient Chinese, Indians, Egyptians, Greeks, and Romans used them in cosmetics, perfumes, and drugs. Essential oils were also commonly used for spiritual, therapeutic, hygienic, and ritualistic purposes.

Researchers are not entirely clear how aromatherapy works. Some experts believe our sense of smell may play a role. The "smell" receptors in your nose communicate with parts of your brain (the amygdala and hippocampus) that serve as storehouses for emotions and memories. When you breathe in essential oil molecules, some researchers believe they stimulate these parts of your brain and influence physical, emotional, and mental health. For example, scientists believe lavender stimulates the activity of brain cells in the amygdala similar to the way some sedative medications work. Other researchers think that molecules from essential oils may interact in the blood with hormones or enzymes.

Aromatherapy massage is a popular way of using essential oils because it works in several ways at the same time. Your skin absorbs essential oils and you also breathe them in. Plus, you experience the physical therapy of the massage itself. Professional aromatherapists, nurses, physical therapists, pharmacists, and massage therapists can provide topical or inhaled aromatherapy treatment. Only specially trained professionals can provide treatment that involves taking essential oils by mouth. At an aromatherapy session, the practitioner will ask about your medical history and symptoms, as well any scents you may like. You may be directed to breathe in essential oils directly from a piece of cloth or indirectly through steam inhalations, vaporizers, or sprays. The practitioner may also apply diluted essential oils to your skin during a massage. In most cases, the practitioner will tell you how to use aromatherapy at home, by mixing essential oils into your bath, for example.

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Aromatherapy is used in a wide range of settings, from health spas to hospitals, to treat a variety of conditions. In general, it seems to relieve pain, improve mood, and promote a sense of relaxation. In fact, several essential oils, including lavender, rose, orange, bergamot, lemon, sandalwood, and others, have been shown to relieve anxiety, stress, and depression. Several clinical studies suggest that when essential oils (particularly rose, lavender, and frankincense) were used by qualified midwives, pregnant women felt less anxiety and fear, had a stronger sense of wellbeing, and had less need for pain medications during delivery. Many women also report that peppermint oil relieves nausea and vomiting during labor. Similarly, preliminary studies suggest aromatherapy may be an effective approach for post-operative nausea. Other studies suggest aromatherapy in conjunction with massage can help reduce symptoms of colic in infants. Massage therapy with essential oils (combined with medications or therapy) may benefit people with depression. The scents are thought by some to stimulate positive emotions in the area of the brain responsible for memories and emotions. But the benefits seem to be related to relaxation caused by the scents and the massage. A person's belief that the treatment will help also influences whether it works. In one study, Neroli oil helped reduce blood pressure and preprocedural anxiety among people undergoing a colonoscopy. In test tubes, chemical compounds from some essential oils have shown antibacterial and antifungal properties. Some evidence also suggests that citrus oils may strengthen the immune system and that peppermint oil may help with digestion. Fennel, aniseed, sage, and clary sage have estrogen-like compounds, which may help relieve symptoms of premenstrual syndrome (PMS) and menopause. However, human studies are lacking.

Pregnant women, people with severe asthma, and people with a history of allergies should only use essential oils under the guidance of a trained professional and with the full knowledge of their doctors. Pregnant women and people with a history of seizures should avoid hyssop oil. People with high blood pressure should avoid stimulating essential oils, such as rosemary and spike lavender. People with estrogen-dependent tumors (such as breast or ovarian cancer) should not use oils with estrogen-like compounds such as fennel, aniseed, sage, and clary sage. People receiving chemotherapy should talk to their doctors before trying aromatherapy. As with any new therapy, people receiving medical care for any illness should talk to their doctors about any aromatherapy they are planning on using.

It is estimated that up to one third of COVID-19 patients can develop long-lasting smell dysfunction, including parosmia (qualitative distortion of the normal sense of smell), hyposmia (reduced ability to detect odors) and anosmia (complete inability to detect odors). Viral infections, especially COVID-19, can cause anosmia through different pathomechanisms, including inflammation of the nasal epithelium, early apoptosis of olfactory cells, changes in odor transmission, alterations of nasal cilia, and damage of olfactory neurons and microglial cells. Different strategies have been proposed for effectively managing post-COVID-19 olfactory dysfunction in clinical practice, with olfactory training being recommended as a first-line treatment option, along with a healthy diet, lifestyle changes (smoking cessation), and, in selected cases, corticosteroid drug therapy. Since very limited treatment options exist for post-viral olfactory dysfunction and the prevalence of this health condition has markedly increased worldwide with the COVID-19 pandemic. Altered smell and loss of smell is common after COVID-19. Smell retraining may assist with recovery. For smell retraining there are 4 essential oils that are used to assist in possibly restoring sense of smell. The essential oils are: rose, citronel (citrus or lemon), eucalyptus (menthol), and cinnamon. In order to perform smell retraining, you should smell each essential oil twice a day for 6 weeks. Steps are as follows:

1. Place a few drops of the essential oil on a cotton ball or pad and let it sit for a minute or two.
2. Bring the pad within an inch of your nose and inhale through your nose slowly and naturally. Visualize what you're trying to smell, either by looking at a picture or imagining with your eyes closed.
3. Move the pad away, and then repeat several times with the same oil.



4. Repeat this process with each essential oil taking a few minute break between each separate oil. Try not to get discouraged. You may not smell anything at first, but that is ok. It may take time before you begin to smell anything.

**Reference:**

1. Karomatposhsho, A. (2023). UTILITY-GRADE OF PHYSICIST PARAMETERS AT 36–42 WEEKS’MATURATION IN THE PROGNOSTICATION OF ANTAGONISTIC PERINATAL AFTER-EFFECTS IN APPROPRIATE-FORGESTATIONAL-AGE FOETUSES. *World Bulletin of Public Health*, 29, 46-56.
2. Маматханова, Г. (2021). Оптимизация медицинской учетной документации и внедрение электронных систем в здравоохранение. *Общество и инновации*, 2(8/S), 61-67.
3. Маматханова, Г. М., & Шерматова, Г. Т. (2021). Оптимизация медицинской учетной документации и автоматизация отчетностей.
4. Маматханова, Г. М., & Ашурова, М. Д. (2020). КОМПЛЕКСНАЯ ОЦЕНКА ДЕЙСТВУЮЩЕЙ ЭЛЕКТРОННОЙ БАЗЫ ПЕРВИЧНЫХ УЧЕТНО-ОТЧЕТНЫХ МЕДИЦИНСКИХ ДОКУМЕНТАЦИЙ В УЧРЕЖДЕНИЯХ ПЕРВИЧНОГО ЗВЕНА ЗДРАВООХРАНЕНИЯ. *Экономика и социум*, (2 (69)), 506-512.
5. Исмаилов, С. И., & Маматханова, Г. М. (2022). ЭЛЕКТРОННЫЙ ДОКУМЕНТООБОРОТ КАК ВАЖНЕЙШИЙ ФАКТОР ПОВЫШЕНИЯ ЭФФЕКТИВНОСТИ УПРАВЛЕНИЯ ЗДРАВООХРАНЕНИЕМ. *Евразийский журнал медицинских и естественных наук*, 2(8), 38-45.
6. Mamatkhanova, G. M., & Ismailov, S. I. (2021). Optimization of Medical Records And Implementation Of Electronic Systems In Healthcare. *The American Journal of Medical Sciences and Pharmaceutical Research*, 3(01), 193-198.
7. Ismailov, D. (2024). PATHOPHYSIOLOGY OF COMPLICATIONS OF TYPE 1 DIABETES MELLITUS. *Академические исследования в современной науке*, 3(5), 153-156.
8. Ismailov, D. (2024). COMPLICATIONS OF TYPE 1 DIABETES. *Академические исследования в современной науке*, 3(5), 157-160.
9. Solijon o‘g‘li, A. S. (2024, May). Measles in Children, its Sympyoms and Treatment. In *International Congress on Biological, Physical and Chemical Studies (ITALY)* (pp. 102-106).
10. Solijon o‘g‘li, A. S. (2024). Antibiotic Therapy for Severe Infections in Infants and Children. *Innovative Society: Problems, Analysis and Development Prospects (Spain)*, 6, 21-24.
11. Solijon o‘g‘li, A. S. (2024). Infectious Diseases in Children. *Web of Semantics: Journal of Interdisciplinary Science*, 2(5), 289-393.
12. Solijon o‘g‘li, A. S. (2024, May). Diarrhoea in Children, Causes and Symptoms. In *Interdisciplinary Conference of Young Scholars in Social Sciences (USA)* (Vol. 7, pp. 12-15).
13. Solijon o‘g‘li, A. S. (2024). BACTERIAL, VIRAL AND MUCOPLASMA PNEUMONIA IN CHILDREN. *American Journal of Pediatric Medicine and Health Sciences* (2993-2149), 2(1), 273-280.
14. Абдукадилова, Л. К., & Абдуллаева, Ў. Я. (2019). Тошкент шаҳри кичик ёшдаги болалар тарбияланаётган оилаларнинг ижтимоий-гигиеник ҳолатини ўрганиш натижалари. *Интернаука*, (5-2), 47-48.
15. Jasim, S. A., Mohammadi, M. J., Patra, I., Jalil, A. T., Taherian, M., Abdullaeva, U. Y., ... & Alborzi, M. (2024). The effect of microorganisms (bacteria and fungi) in dust storm on human health. *Reviews on Environmental Health*, 39(1), 65-75.



16. Каримова, М. М., Содиков, Ю. Т., Юсупова, М. М., & Мухаммадсодиков, М. М. (2022). Covid-19 o'tkazgan bemorlarda qalqonsimon bez xolatini taxlil qilish. Журнал кардиореспираторных исследований, 3(1).
17. Shukhratjonovich, S. E. (2023). TREATMENT OF PATIENTS WITH CHRONIC RECURRENT CYSTITIS WITH A DRUG BASED ON BACTERIOPHAGES. Best Journal of Innovation in Science, Research and Development, 2(10), 541-544.
18. Shukhratjon, S. E. (2023). UROLITHIASIS DISEASE. World Bulletin of Public Health, 27, 35-36.
19. Rapikov, I. (2023). Formation of savings and entrepreneurship on the basis of labor education according to age characteristics in primary school students. Procedia of Engineering and Medical Sciences, 8(12), 80-83.
20. Анварова, З. (2024). СПИД/ВИЧ ИФИЦИРОВАНИЕ И ДЕТИ. THEORY AND ANALYTICAL ASPECTS OF RECENT RESEARCH, 2(22), 41-45.
21. Анварова, З. (2024). ЗАДЕРЖКА ВНУТРИУТРОБНОГО РАЗВИТИЯ ПЛОДА КАК ФАКТОР НАРУШЕНИЯ ГАРМОНИЧНОГО РАЗВИТИЯ ДЕТЕЙ. THEORY AND ANALYTICAL ASPECTS OF RECENT RESEARCH, 2(21), 234-237.
22. Zakhridinovich, I. B. (2024). SOME NEUROLOGICAL DISEASES IN CHILDREN. Miasto Przyszłości, 48, 162-169.

