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# CONCOMITANT DISEASES AND THE OCCURRENCE OF CHRONIC FATIGUE SYNDROME AMONG ATHLETES

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## Introduction

It is known that modern high-performance sport is a field of activity in which the athlete's body is exposed to extreme physical influences, while under conditions of prolonged training and competitive loads, a state of chronic fatigue and recurrent infections can form. If these symptoms do not disappear during the recovery period or during a long rest of the athlete, it is necessary to conduct additional clinical examinations. It is quite difficult to distinguish between physiological fatigue associated with training at the elite level and fatigue of a pathological nature, because such conditions usually reduce the level of performance of the athlete and, as a result, poor performance in competitions.

**Target.** To assess the impact of concomitant diseases on the functional state of an athlete against the background of intense training.

**Materials and methods.** On the basis of the medical clinic " EZGU NIYAT ", additional medical examinations were carried out in 38 male athletes, whose average age was 24 ± 3.8 years, who were at the stage of higher sportsmanship, who complained of constant fatigue and recurrent infections, of various sports qualifications (swimming, rowing , football). All of them underwent a thorough examination to exclude the presence of hidden pathology and to identify the causes of chronic fatigue and susceptibility to infection. Particular attention was paid to the causes of SARS, and it is also the main cause of infections in elite athletes. The degree of fatigue was assessed using a subjective visual analogue rating scale. Athletes rated their degree of fatigue at rest and after exercise on a scale from 1 (deep, unable to train) to 5 (no, no fatigue), and the duration of fatigue symptoms was also recorded. Laboratory and biochemical tests included a complete blood count, glucose concentration, creatine kinase activity , and kidney, liver, and thyroid function tests. Screening for infectious diseases included serological testing for hepatitis A, B and C, toxoplasmosis, cytomegalovirus. The immune status was determined at the level of IgG , IgE .

**Results.** It was found that 89% of the examined athletes had signs of chronic fatigue, these signs were observed in swimmers (76%), football players (67%) and rowers (32%). Analysis of the obtained laboratory and biochemical studies showed that immunodeficiency states were detected in 37% of the examined athletes, unresolved viral infections in 38%, hypoglycemia on an empty stomach - 32%. Allergic diseases were identified in 17%, upper respiratory dysfunction in 11%, sleep disturbances in 22%, iron deficiency in 16% and thyroid disease in 4%. In 72% of cases, chronic fatigue syndrome is multifactorial (more than two diseases).

**Findings.** The results of this study show that unresolved viral infections, as a cause of immune suppression, are a trigger in the development of chronic fatigue syndrome and recurrent infections that negatively affect an athlete's professional sports activities.

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