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Actual problems of social and humanitarian sciences  
Актуальные проблемы социальных и гуманитарных наук

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**2024**

# **SCIENCEPROBLEMS.UZ**

**ИЖТИМОЙ-ГУМАНИТАР ФАНЛАРНИНГ  
ДОЛЗАРБ МУАММОЛАРИ**

***№ 3 (4) - 2024***

**АКТУАЛЬНЫЕ ПРОБЛЕМЫ СОЦИАЛЬНО-  
ГУМАНИТАРНЫХ НАУК**

**ACTUAL PROBLEMS OF HUMANITIES AND SOCIAL SCIENCES**

**ТОШКЕНТ-2024**

## **БОШ МУҲАРРИР:**

Исанова Феруза Тулқиновна

## **ТАҲРИР ҲАЙЪАТИ:**

### **07.00.00-ТАРИХ ФАНЛАРИ:**

Юлдашев Анвар Эргашевич – тарих фанлари доктори, сиёсий фанлар номзоди, профессор, Ўзбекистон Республикаси Президенти ҳузуридаги Давлат бошқаруви академияси;

Мавланов Укташ Махмасабирович – тарих фанлари доктори, профессор, Ўзбекистон Республикаси Президенти ҳузуридаги Давлат бошқаруви академияси;

Хазраткулов Аброр – тарих фанлари доктори, доцент, Ўзбекистон давлат жаҳон тиллари университети.

Турсунов Равшан Нормуратович – тарих фанлари доктори, Ўзбекистон Миллий Университети;

Холикулов Ахмаджон Боймаҳамматовиҷ – тарих фанлари доктори, Ўзбекистон Миллий Университети;

Габриэльян Софья Ивановна – тарих фанлари доктори, доцент, Ўзбекистон Миллий Университети.

### **08.00.00-ИҚТИСОДИЁТ ФАНЛАРИ:**

Карлибаева Раја Хожабаевна – иқтисодиёт фанлари доктори, профессор, Тошкент давлат иқтисодиёт университети;

Насирходжаева Дилафруз Сабитхановна – иқтисодиёт фанлари доктори, профессор, Тошкент давлат иқтисодиёт университети;

Остонокулов Азамат Абдукаримович – иқтисодиёт фанлари доктори, профессор, Тошкент молия институти;

Арабов Нурали Уралович – иқтисодиёт фанлари доктори, профессор, Самарқанд давлат университети;

Худойқулов Садирдин Каримович – иқтисодиёт фанлари доктори, доцент, Тошкент давлат иқтисодиёт университети;

Азизов Шерзод Ўқтамович – иқтисодиёт фанлари доктори, доцент, Ўзбекистон Республикаси Божхона институти;

Хожаев Азизхон Сайдалохонович – иқтисодиёт фанлари доктори, доцент, Фарғона политехника институти

Холов Актам Ҳатамович – иқтисодиёт фанлари бўйича фалсафа доктори (PhD), доцент, Ўзбекистон Республикаси Президенти ҳузуридаги Давлат бошқаруви академияси;

Шадиева Дилдора Ҳамидовна – иқтисодиёт фанлари бўйича фалсафа доктори (PhD), доцент в.б, Тошкент молия институти;

Шакаров Қулмат Аширович – иқтисодиёт фанлари номзоди, доцент, Тошкент ахборот технологиялари университети

### **09.00.00-ФАЛСАФА ФАНЛАРИ:**

Ҳакимов Назар Ҳакимович – фалсафа фанлари доктори, профессор, Тошкент давлат иқтисодиёт университети;

Яҳшиликов Жўрабой – фалсафа фанлари доктори, профессор, Самарқанд давлат университети;

Файбуллаев Отабек Мухаммадиевич – фалсафа фанлари доктори, профессор, Самарқанд давлат чет тиллар институти;

Сайдова Камола Усканбаевна – фалсафа фанлари доктори, "Tashkent International University of Education" халқаро университети;

Ҳошимхонов Мўмин – фалсафа фанлари доктори, доцент, Жиззах педагогика институти;

Ўроқова Ойсулув Жамолиддиновна – фалсафа фанлари доктори, доцент, Андижон давлат тибиёт институти, Ижтимоий-гуманитар фанлар кафедраси мудири;

Носирходжаева Гулнора Абдукаҳаровна – фалсафа фанлари номзоди, доцент, Тошкент давлат юридик университети;

Турдиев Бехруз Собирович – фалсафа фанлари бўйича фалсафа доктори (PhD), доцент, Бухоро давлат университети.

### **10.00.00-ФИЛОЛОГИЯ ФАНЛАРИ:**

Ахмедов Ойбек Сапорбаевич – филология фанлари доктори, профессор, Ўзбекистон давлат жаҳон тиллари университети;

Кўчимов Шухрат Норқизилович – филология фанлари доктори, доцент, Тошкент давлат юридик университети;

Ҳасанов Шавкат Аҳадович – филология фанлари доктори, профессор, Самарқанд давлат университети;

Бахронова Дилрабо Келдиёровна – филология фанлари доктори, профессор, Ўзбекистон давлат жаҳон тиллари университети;

Мирсанов Ғайбулло Қулмурадович – филология фанлари доктори, профессор, Самарқанд давлат чет тиллар институти;

Салаҳутдинова Мушарраф Исамутдиновна – филология фанлари номзоди, доцент, Самарқанд давлат университети;

Кучкаров Рахман Урманович – филология фанлари номзоди, доцент в/б, Тошкент давлат юридик университети;

Юнусов Мансур Абдулаевич – филология фанлари номзоди, Ўзбекистон Республикаси Президенти хузуридаги Давлат бошқаруви академияси;

Саидов Улугбек Арипович – филология фанлари номзоди, доцент, Ўзбекистон Республикаси Президенти хузуридаги Давлат бошқаруви академияси.

#### **12.00.00-ЮРИДИК ФАНЛАР:**

Ахмедшаева Мавлюда Ахатовна – юридик фанлар доктори, профессор, Тошкент давлат юридик университети;

Мухитдинова Фирюза Абдурашидовна – юридик фанлар доктори, профессор, Тошкент давлат юридик университети;

Эсанова Замира Нормуротовна – юридик фанлар доктори, профессор, Ўзбекистон Республикасида хизмат кўрсатган юрист, Тошкент давлат юридик университети;

Ҳамроқулов Баҳодир Мамашарифович – юридик фанлар доктори, профессор в.б., Жаҳон иқтисодиёти ва дипломатия университети;

Зулфиқоров Шерзод Ҳуррамович – юридик фанлар доктори, профессор, Ўзбекистон Республикаси Жамоат хавфсизлиги университети;

Хайитов Хушвақт Сапарбаевич – юридик фанлар доктори, профессор, Ўзбекистон Республикаси Президенти хузуридаги Давлат бошқаруви академияси;

Асадов Шавкат Файбуллаевич – юридик фанлар доктори, доцент, Ўзбекистон Республикаси Президенти хузуридаги Давлат бошқаруви академияси;

Утемуратов Махмут Ажимуратович – юридик фанлар номзоди, профессор, Тошкент давлат юридик университети;

Сайдуллаев Шахзод Алиханович – юридик фанлар номзоди, профессор, Тошкент давлат юридик университети;

Ҳакимов Комил Бахтиярович – юридик фанлар доктори, доцент, Тошкент давлат юридик университети;

Юсупов Сардорбек Баходирович – юридик фанлар доктори, доцент, Тошкент давлат юридик университети;

Амиров Зафар Актамович – юридик фанлар бўйича фалсафа доктори (PhD), Ўзбекистон Республикаси Судъялар олий кенгаши хузуридаги Судъялар олий мактаби;

Жўраев Шерзод Юлдашевич – юридик фанлар номзоди, доцент, Тошкент давлат юридик университети;

Бабаджанов Атабек Давронбекович – юридик фанлар номзоди, доцент, Тошкент давлат юридик университети;

Раҳматов Элёр Жумабоевич - юридик фанлар номзоди, Тошкент давлат юридик университети;

#### **13.00.00-ПЕДАГОГИКА ФАНЛАРИ:**

Хашимова Дильдархон Уринбоевна – педагогика фанлари доктори, профессор, Тошкент давлат юридик университети;

Ибрагимова Гулнора Ҳавазматовна – педагогика фанлари доктори, профессор, Тошкент давлат иқтисодиёт университети;

Закирова Феруза Махмудовна - педагогика фанлари доктори, Тошкент ахборот технологиялари университети хузуридаги педагогик кадрларни қайта тайёрлаш ва уларнинг малакасини ошириш тармоқ маркази;

Қаюмова Насиба Ашурновна - педагогика фанлари доктори, профессор, Қарши давлат университети;

Тайланова Шохида Зайневна - педагогика фанлари доктори, доцент;

Жуманиёзова Мұхәйё Тожиевна – педагогика фанлари доктори, доцент, Ўзбекистон давлат жаҳон тиллари университети;

Ибрахимов Санжар Урунбаевич – педагогика фанлари доктори, Иқтисодиёт ва педагогика университети;

Жавлиева Шахноза Баходировна – педагогика фанлари бўйича фалсафа доктори (PhD), Самарқанд давлат университети;

Бобомуротова Латофат Элмуродовна - педагогика фанлари бўйича фалсафа доктори (PhD), Самарқанд давлат университети.

#### **19.00.00-ПСИХОЛОГИЯ ФАНЛАРИ:**

Каримова Васила Маманосировна – психология фанлари доктори, профессор, Низомий номидаги Тошкент давлат педагогика университети;

Хайитов Ойбек Эшбоевич – Жисмоний тарбия ва спорт бўйича мутахассисларни қайта тайёрлаш ва малакасини ошириш институти, психология фанлари доктори, профессор

Умарова Навбаҳор Шокировна – психология фанлари доктори, доцент, Низомий номидаги Тошкент давлат педагогика университети, Амалий психологияси кафедраси мудири;

Атабаева Наргис Батировна - психология фанлари доктори, доцент, Низомий номидаги Тошкент давлат педагогика университети;

Шамшетова Анжим Карамаддиновна – психология фанлари доктори, доцент, Ўзбекистон давлат жаҳон тиллари университети;

Қодиров Обид Сафарович – психология фанлари доктори (PhD), Самарканд вилоят ИИБ Тиббиёт бўлими психологик хизмат бошлиғи.

#### 22.00.00-СОЦИОЛОГИЯ ФАНЛАРИ:

Латипова Нодира Мухтаржановна – социология фанлари доктори, профессор, Ўзбекистон миллий университети кафедра мудири;  
Сеитов Азамат Пўлатович – социология фанлари доктори, профессор, Ўзбекистон миллий университети;

Содиқова Шоҳида Мархабоевна – социология фанлари доктори, профессор, Ўзбекистон халқаро ислом академияси.

#### 23.00.00-СИЁСИЙ ФАНЛАР

Назаров Насриддин Атакулович –сиёсий фанлар доктори, фалсафа фанлари доктори, профессор, Тошкент архитектура қурилиш институти;  
Бўтаев Усмонжон Хайруллаевич –сиёсий фанлар доктори, доцент, Ўзбекистон миллий университети кафедра мудири.

### ОАК Рўйхати

Мазкур журнал Вазирлар Махкамаси хузуридаги Олий аттестация комиссияси Раёсатининг 2022 йил 30 ноябрдаги 327/5-сон қарори билан тарих, иқтисодиёт, фалсафа, филология, юридик ва педагогика фанлари бўйича илмий даражалар бўйича диссертациялар асосий натижаларини чоп этиш тавсия этилган илмий нашрлар рўйхатига киритилган.

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[scienceproblems.uz@gmail.com](mailto:scienceproblems.uz@gmail.com)

**Боғланиш учун телефонлар:**  
(99) 602-09-84 (telegram).

## **МУНДАРИЖА**

### **07.00.00 – ТАРИХ ФАНЛАРИ**

*Hamroyev Asliddin Umed o'g'li*

“GULSHANUL MULUK” (“SHOHLAR GULSHANI”) ASARI – MANG’ITLAR HUKMRONLIGI DAVRI MUARRIXLIGI NAMUNASI ..... 13-18

*Bazarbayeva Shohsanam Muratovna*

SIRDARYO VILOYATIDA VETERINARIYA SOHASIGA OID ISLOHOTLAR (XIX ASR OXIRI – XX ASR BOSHLARI) ..... 19-23

*Asadova Dilnoza Innatovna*

O’ZBEKISTONDA RAQS SAN’ATI SOHASIDA KADLAR TAYYORLASH MASALASI TARIXI VA BUGUNI ..... 24-28

*Ҳайитов Умед Яҳёевич*

ЎЗБЕКИСТОН ССР МУВАҚҚАТ ИНҚИЛОБИЙ ҚҮМИТАСИ (МАРКАЗИЙ РЕВКОМ)НИНГ ТАШКИЛ ТОПИШИ ВА ФАОЛИЯТИ ..... 29-34

*Омонова Сарвиноз Ориф қизи*

ЎЗБЕКИСТОНДА СОВЕТ ДАВРИДА ЖИСМОНИЙ ТАРБИЯ ВА СПОРТНИНГ ҲОЛАТИ ... 35-42

### **08.00.00 – ИҚТИСОДИЁТ ФАНЛАРИ**

*Алимханова Нигора Алимхановна*

ТОВАР-МОДДИЙ ЗАХИРАЛАР АУДИТИНИ ТАКОМИЛЛАШТИРИШ ..... 43-52

*Mahmudova Dilafruz Hasanovna*

KORPORATIV BOSHQARUVNING AYRIM NAZARIY JIHATLARI ..... 53-60

*Toxirov Akbarxon Toirxon o'g'li*

SANOAT KORXONALARIDA IQTISODIY XAVFSIZLIKNING EKONOMETRIK MODELLASHTIRISH ..... 61-69

*Мехмоналиев Улугбек Эркинжон уғли*

СУЩНОСТЬ ОРГАНИЗАЦИИ СЛУЖБЫ ВНУТРЕННЕГО АУДИТА НА ПРЕДПРИЯТИЯХ .70-75

*Паязов Мурод Максудович*

“ЎЗБЕКИСТОН ТЕМИР ЙЎЛЛАРИ” АЖДА ТРАНСФОРМАЦИЯЛАШ ЖАРАЁНЛАРИНИ АМАЛГА ОШИРИШ МЕТОДИКАСИ ..... 76-86

*Шадибекова Дилдор Абдурахмановна*

ЛОГИСТИЧЕСКИЙ РЫНОК УЗБЕКИСТАНА И ПРОБЛЕМЫ ЕГО РАЗВИТИЯ ..... 87-92

*Malikova Dilrabo, Khudoiberdieva Maftunabonu*

INNOVATIVE HR MANAGEMENT: NECESSITY AND METHODS OF APPLICATION ..... 93-99

*Мамажонова Одинахон Алишер қизи*

КОРХОНАЛАР БОШҚАРУВИДА ИННОВАЦИЯЛАРДАН ФОЙДАЛАНИШ ЖАРАЁНЛАРИНИНГ РИВОЖЛАНИШ ТЕНДЕНЦИЯЛАРИ ..... 100-106

*Nozimov Eldor Anvarovich*

ELEKTRON TIJORATNI RIVOJLANISHDA O’ZBEKİSTON VA XORİJIY DAVLATLARNING O’RNI ..... 107-115

*Буранова Жазира Эргаш қизи*

ВЛИЯНИЕ ЦИФРОВИЗАЦИИ ЭКОНОМИКИ НА ИНКЛЮЗИВНЫЙ РОСТ ГОСУДАРСТВА ..... 116-120

<i>Худойназаров Фахритдин Хайтевич</i>	
КИЧИК БИЗНЕС ВА ХУСУСИЙ ТАДБИРКОРЛИК ФАОЛИЯТИДА РАҚАМЛИ ТЕХНОЛОГИЯЛарНИНГ ИҚТисодИЙ АҲАМИЯТИ .....	121-127
<i>Бахтиёров Бобур Баходир ўғли</i>	
ТИЖОРАТ БАНКЛАРИ РЕСУРСЛАРИДАН ФОЙДАЛАНИШ ВА БАНК ЛИКВИДЛИЛИГИНИ БОШҚАРИШНИНГ МЕТОДОЛОГИК АСОСЛАРИ .....	128-136
<i>Isomtdinova Gulbaxor Kurbonaliyevna</i>	
О'ЗБЕКИСТОН ШАРОИТИДА INVESTITSIYA RISKLARINI BOSHQARISH SAMARADORLIGINI OSHIRISH .....	137-145
<i>Yuldashev Shadiyor Shuxrat o'g'li</i>	
OLIY TA'LIM O'QUV JARAYONLARIDA ZAMONAVIY VEB TEХNOLOGIYALARI INTEGRATSIYASI .....	146-150
<i>Baxtiyorov Asrorbek Azizjon o'g'li</i>	
TIJORAT BANKINING KREDIT SIYOSATI ASOSLARI, UNING IQTISODIY MOHIYATI .....	151-159
<i>Saidov Shohruh Mirzo</i>	
SOCIO-ECONOMIC ANALYSIS OF CONDITIONS OF DEVELOPMENT OF HIGHER EDUCATION INSTITUTIONS .....	160-169
<i>Kunduzova Kumrixon Ibragimovna</i>	
IQTISODIY RIVOJLANISHNING HOZIRGI BOSQICHIDA XO'JALIK YURITUVCHI SUBYEKTLAR FAOLIYATIDAGI JORIY AKTIVLAR TUSHUNCHASI VA UNING O'RNI .....	170-177
<i>Inomjon Matkarimov</i>	
AGROKIMYO BIOCIMYO XIZMATLARI IJTIMOIY IQTISODIY SAMARADORLIGINI TA'MINLASHNING SWOT TAHLILI .....	178-183
<b>09.00.00 - ФАЛСАФА ФАНЛАРИ</b>	
<i>G'aybullayev Otabek Muxammadiyevich</i>	
JAMIyatda ESTETIK MADANIYAT RIVOJLANISHINING FALSAFIY ASOSLARI .....	184-189
<i>Masharipova Gularam Kamilovna</i>	
МАHMUD IBN MUHAMMAD IBN UMAR AL-CHAG'MINIYNING «AL-MULAXXAS FI-L-HAY'A» RISOLASINING NUSXALARI VA QOZIZODA RUMIYNING SHARHI .....	190-198
<i>Абдуллаханова Гулбахор Саттаровна</i>	
ФИЛОСОФСКИЕ ВЗГЛЯДЫ ИБН СИНО И ИХ РОЛЬ В УКРЕПЛЕНИИ ДУХОВНО- ЦЕННОСТНЫХ ОСНОВ СОВРЕМЕННОГО РАЗВИТИЯ ЦИВИЛИЗАЦИИ .....	199-206
<i>Urinov Xushnudjon Abdulomitovich</i>	
TA'LIM VA KASB-HUNAR ISLOHOTLARI GENEZISI: KASBIY FAOLIYAT VA MEHNATGA MUNOSABATNING TARIXIY SHAKLLANISHI .....	207-220
<i>Азизқулов Ақрам Абдурахмонович</i>	
ШАРҚШУНОС УИЛЬЯМ ЭРСКИН ТАДҚИҚОТЛАРИДА БОБУРИЙЛАР СУЛОЛАСИ ТАРИХИННИГ ЁРИТИЛИШИ .....	221-227
<i>Kenjayev Ulug'bek Muratovich</i>	
BEFARQLIK HAqidagi FALSAFIY FIKRLAR RIVOJI .....	228-232
<i>G'aybullayeva Laylo Safarboyevna</i>	
MAHALLADA YOSHLAR SIYOSIY FAOLLIGINI OSHIRISHDA IJTIMOIY-FALSAFIY RIVOJLANISH MASALALARI .....	233-238

<i>Xo'janova Tamara Jo'raevna</i>	
YOSHLAR MA'NAVIYATIGA TAHDID VA ULARDAN O'ZINI ONGLI HIMOYA QILISH KO'NIKMALARI .....	239-245
<i>Jabborova Saodat Sattorovna</i>	
MA'NAVIY SALOHIYATNING IJTIMOIY TARAQQIYOT MANBAI SIFATIDA XUSUSIYATLARI .....	246-252
<i>Xusanov G'olib Elmurodovich</i>	
O'ZBEK OILALARINING RIVOJLANISHIDA AXLOQIY TAFAKKUR MASALALARI .....	253-257
<i>Аззамходжаева Шахноза Сайдматмабовна</i>	
МУСУЛЬМАНСКОЕ БОГОСЛОВИЕ, СВЯЩЕННЫЙ КОРАН И ТВОРЧЕСТВО НАВОИ В КОНТЕКСТЕ ФИЛОСОФСКОЙ КОМПАРАТИВИСТИКИ .....	258-265
<i>O'rakov Bobir Baxtiyorovich</i>	
IJTIMOIY DAVLATNING NAZARIY VA METODOLOGIK ASOSLARI: VUJUDGA KELISH SHARTLARI, BELGILARI VA FUNKSIYALARI .....	266-270
<i>Qunishev Ulug'bek Ulashevich</i>	
NEMIS KLASSIK FALSAFASIDA JAMIYAT RIVOJLANISHIGA TA'SIR ETUVCHI AXLOQIY VA ESTETIK OMILLAR .....	271-275
<i>Турдибоев Бозор Худойбердиевич</i>	
ЦИВИЛИЗАЦИЯЛАР ТАРИХИЙ ЯХЛИТЛИК НАМОЁН БЎЛИШ ШАКЛЛАРИ СИФАТИДА .....	276-282
<i>Kenjayeva Dilrabo Rominovna</i>	
MARKAZIY OSIYO MUTAFAKKIRLARI TA'LIMOTIDA O'ZLIKNI ANGLASH TUSHUNCHASI VA UNING O'ZIGA XOS XUSUSIYATLARI .....	283-287
<i>Azamatova Gulrukha Islom qizi</i>	
SOCIOCULTURAL ASPECTS IN KARL POPPER'S PHILOSOPHY IN THE CONTEXT OF MODERN EDUCATION .....	288-293
<i>Toшпулатова Ширин Мухиддиновна</i>	
ЭТИЧЕСКИЕ ОРИЕНТИРЫ ГОСУДАРСТВЕННОЙ ГРАЖДАНСКОЙ СЛУЖБЫ В РЕСПУБЛИКЕ УЗБЕКИСТАН .....	294-302
<i>Yuldasheva Dilorom Yuldashevna</i>	
SCIENTIFIC ATTITUDE TO CONSCIOUSNESS AND ITS INFLUENCE ON THE FIELD OF EDUCATION .....	303-307
<i>Bekchanov Xudoybergan O'rinvich, Yusupova Firuza Hajiboy qizi, Yulliyeva Sohiba Shuhrat qizi</i>	
MAKTABGACHA YOSHDAGI KATTA GURUH TARBIYALANUVCHILARDA IJTIMOIY VA КОММУНИКАТИВ QOBILYATNING RIVOJLANISHI .....	308-314
<b>10.00.00 - ФИЛОЛОГИЯ ФАНЛАРИ</b>	
<i>Ткебучава Ирина Георгиевна</i>	
ПРОБЛЕМЫ И ПЕРСПЕКТИВЫ ФОРМИРОВАНИЯ КОММУНИКАТИВНОЙ КОМПЕТЕНТНОСТИ СТУДЕНТОВ ПРИ ОБУЧЕНИИ ИНОСТРАННОМУ ЯЗЫКУ .....	315-320
<i>Ikromxonova Firuza Ikromovna, Jazira Nusrultanqizi</i>	
TIPOLOGIK TAHLIL - KOMPOZITSIYA VA JANR (TARIXIY ASARLAR MISOLIDA) .....	321-327

<i>Ashurova Maftuna Asqar qizi</i>	
LINGUACULTURAL PECULIARITIES OF THE CONCEPT “HAPPINESS” IN ENGLISH AND UZBEK LANGUAGES .....	328-334
<i>Mustafayeva Saodat Burxanovna</i>	
SALIM ASHUR SHE’RLARIDA LINGVOMADANIY BIRLIKLER VOSITASIDA VOQELIKNI BADIY TALQIN ETISH .....	335-340
<i>Abdulxayeva Nodirabegim Ixtiyorjon qizi</i>	
DRAMATIK ASARLARNI TARJIMA QILISHDA LEKSIK-SEMANTIK, LINGVOKULTUROLOGIK MASALALAR .....	341-346
<i>Xajiyeva Dilfuza Adambayevna</i>	
FOLKLOR VOSITALARINING ZAMONAVIY ADABIYOTDAGI O’RNI VA O’RGANILISHI .....	347-351
<i>Jumanova Sevara Xolmurod qizi</i>	
KIYIM KECHAK NOMLARI TILNING BOYISH MANBAI SIFATIDA .....	352-356
<i>Hojaliyev Ismail Tadjibayevich, Ismailova Sayyora Tolkinovna</i>	
MATN NAZARIYASINING SHAKLLANISHI .....	357-366
<i>Abdullaev Ulmasbek Khairullayevich</i>	
LITERARY WORKS AS THE MOST IMPORTANT AND WELL-ACCLAIMED COMPONENTS OF THE CULTURAL HERITAGE OF THE NATION .....	367-370
<i>Maxmudova Fotima Maqsud qizi</i>	
TYPES OF MEDIA TEXT LANGUAGE .....	371-375
<i>Maxmudova Zuhra Maqsud qizi</i>	
BADIY TARJIMANING TILSHUNOSLIK DAGI AHAMIYATI .....	376-380
<i>Davronova Zulfiya Boboyevna</i>	
UZBEK- FRENCH RELATIONS AS A BINDING PART OF INTERNATIONAL CULTURAL AND HISTORICAL EXPERIENCE .....	381-386
<i>Hakimova Dilrabo Yo’ldoshovna</i>	
TERMINOLOGIYA SOHASINING TARIXI VA DOLZARB MUAMMOLARI XUSUSIDA .....	387-392
<i>Мадрахимов Тулибай Абдукаrimovich</i>	
СЎЗЛАШУВ НУТҚИННИНГ ТИЛ ФУНКЦИОНАЛ ВАРИАНТЛАРИ ОРАСИДА ТУТГАН ЎРНИ .....	393-395
<b>12.00.00 – ЮРИДИК ФАНЛАР</b>	
<i>Ergashev Ikrom Abdurasulovich</i>	
SOLIQ INTIZOMINI BUZISH BILAN BOG’LIQ HUQUQBUZARLIKLER UCHUN JAVOBGARLIKNING AYRIM JIHATLARINING ILMIY-NAZARIY TAHLILI .....	396-402
<i>Куатбек Гулнар Куатбековна</i>	
ВОПРОСЫ СОВЕРШЕНСТВОВАНИЯ МЕЖДУНАРОДНЫХ СТАНДАРТОВ ТРАНСПАРЕНТНОСТИ ПРЕДСТАВИТЕЛЬНЫХ ОРГАНОВ МЕСТНОЙ ВЛАСТИ .....	403-409
<i>Jurayev Dilmurot Mukhtarovich</i>	
ANALYSIS OF THE LEGISLATION OF THE REPUBLIC OF UZBEKISTAN ON ALTERNATIVE RESOLUTION OF DISPUTES ARISING FROM ADMINISTRATIVE AND PUBLIC LEGAL RELATIONS .....	410-415

*Mirakhmedova Fazilat Khokim kizi*

CRIMES OF MANUFACTURING AND SELLING PHARMACEUTICALS IN A WAY TO DANGER THE LIVES AND HEALTH OF INDIVIDUALS (Evaluation of Türkiye and Uzbekistan legal system) ..... 416-428

*Касимов Нодиржон Содикжонович*

ҚАСДДАН ОДАМ ЎЛДИРИШ ЖИНОЯТЛАРИНИГ УМУМИЙ ВИКТИМОЛОГИК ПРОФИЛАКТИКАСИНИ ТАШКИЛ ЭТИШ ..... 429-438

*Кутыбаева Елизавета Дуйсенбаевна, Есенбаев Джанибек Таирович*

ЭКОЛОГИК ТУСДАГИ ФАВҚУЛОДДА ВАЗИЯТЛАРДАН МУҲОФАЗА ҚИЛИШНИНГ ҲУҚУҚИЙ АСОСЛАРИНИ ТАКОМИЛЛАШТИРИШ ..... 439-445

*Джалилов Сардор Шавкатович*

ҲУҚУҚ МАНБАЛАРИ ВА НОГИРОНЛИГИ БЎЛГАН ШАХСЛАРНИНГ ҲУҚУҚЛАРИНИ КОДИФИКАЦИЯ ҚИЛИШ ЖАРАЁНИ ..... 446-453

### **13.00.00 – ПЕДАГОГИКА ФАНЛАРИ**

*Mirzayev Qodir Toirovich*

ZAMONAVIY XOR SAN'ATI TA'LIMINI TAKOMILLASHTIRISH MASALALARI ..... 454-458

*Васильченко Ольга Анатольевна*

ИСТОРИЯ И МЕТОДОЛОГИЯ РАЗВИТИЯ ВОКАЛЬНО-ХОРОВОГО ИСКУССТВА В УЗБЕКИСТАНЕ ..... 459-463

*Эрназаров Алишер Эргашевич, Бекмурадов Зариф Хуррамович*

ҮҚУВ МАШҒУЛОТЛАРИНИГ МОДУЛЛИ ВА ЛОЙИҲАЛАШТИРИЛГАН ТУРЛАРИ ҲАМДА АХБОРОТ ТЕХНОЛОГИЯЛАРИДАН ФОЙДАЛАНИШ ..... 464-470

*Mattiyeva Feruza Begmatdulobovna*

TARJIMONLIK MALAKASINI SHAKLLANTIRISHNING PSIXOLINGVISTIK VA DIDAKTIK XUSUSIYATLARI ..... 471-477

*Jurayev Bobomurod Tojiyevich*

ABU ALI IBN SINO QARASHALARIDA TA'LIM-TARBIYA MASALALARI ..... 478-482

*Umurova Ma'rifat Yoshiyevna*

XALQ QO'SHIQLARI VATANPARVARLIK TUYG'USINI RIVOJLANTIRISH VOSITASI SIFATIDA ..... 483-486

*Raxmanova Dildora Abdulkamid qizi*

INGLIZ TILIDA AKADEMİK YOZUV TUSHUNCHASI VA UNING TALABALAR ILMIY FAOILIYATIDAGI AHAMIYATI ..... 487-492

*Rajabiy Aziz Xasanovich*

VOKAL ARTISTI FAOLIYATIDA SAHNA MAHORATINING O'RNI ..... 493-497

*Omanov Rashid Sherqobilovich*

O'QUVCHILARDA EKOLOGIK TAFAKKURNI SHAKLLANTIRISH JARAYONLARINI TO'G'RI TASHKIL ETISH ..... 498-501

*Салимов Акром Хайитович*

БЎЛАЖАК ҮҚИТУВЧИЛАРДА ОИЛА, МАҲАЛЛА ВА МАКТАБ ҲАМКОРЛИГИНИ АМАЛГА ОШИРИШНИНГ АФЗАЛЛИКЛАРИ ..... 502-507

*Mamatmurodov Sharofjon Khudoyarovich*

TA'LIM SIFATINI OSHIRISHDA INNOVATSION TEXNOLOGIYALARNING O'RNI ..... 508-514

<i>Ли Екатерина Владимировна</i>	
СИНЭРГЕТИЧЕСКИЙ АНАЛИЗ ИННОВАЦИЙ И ИННОВАЦИОННОЙ	
ДЕЯТЕЛЬНОСТИ .....	515-523
<i>Ахмедова Нафиса Исаходжаева, Азаматов Абдулло Исахўжаса ўғли, Лутфуллина Румия</i>	
<i>Анваровна</i>	
ЁШ ТЕННИСЧИЛАРНИНГ ЖИСМОНИЙ ТАЙЁРГАРЛИГИНИ РИВОЖЛАНТИРИШДА	
ХАРАКАТЛИ ЎЙИНЛАРНИНГ АҲАМИЯТИ .....	524-533
<i>Очилова Мехрибон Суратовна, Хамроева Феруза Асроровна</i>	
АНАЛИЗ СОВРЕМЕННЫХ ОБРАЗОВАТЕЛЬНЫХ ПЛАТФОРМ И ИХ	
КЛАССИФИКАЦИЯ .....	534-541
<i>Amonov Mirjon Namozovich</i>	
IJTIMOIY PEDAGOGIK FAOLIYAT VA UNING ASOSIY FUNKSIYALARI .....	542-547
<i>Sharipov Habibullo Abduqahhorovich</i>	
TALABALARNING IJODKORLIGINI RIVOJLANTIRISHDA MUSTAQIL TA'LIMNING O'RNI VA	
AHAMİYATI .....	548-552
<i>Yaxiyaxonova Muxiba Maxmudjonovna</i>	
RAQAMLI TA'LIM MUHITIDA BOSHLANG'ICH SINF O'QUVCHILARINING IT SAVODXONLIGINI	
OSHIRISH METODIKASINI TAKOMILLASHTIRISH .....	553-560
<i>Xakimova Gulshan Abdusalilovna</i>	
JISMONIY TARBIYA VOSITALARI ORQALI YOSH BOLALARNI SIFATLARINI	
TARBIYALASH .....	561-565
<i>Nazarov Rustam Irkinovich</i>	
TECHNOLOGY FOR DEVELOPING COMMUNICATIVE COMPETENCE OF STUDENTS IN HIGHER	
TECHNICAL EDUCATION FIELDS (IN THE EXAMPLE OF ENGLISH LANGUAGE) .....	566-570
<i>Muqimova Fotima Abduqaxor qizi, Muqimova Zuxra Abduqahor qizi</i>	
CHIZMACHILIK DARSLARIDA O'QUVCHILARNING GRAFIK SAVODXONLIGINI	
RIVOJLANTIRISHDA O'YINLI TEXNOLOGIYALADAN FOYDALANISHNING	
AFZALLIKLARI .....	571-576
<i>Sulaymanova Dildora Nazarovna, Giyasova Shaxnoza Abdurafikovna</i>	
BO'LAJAK O'QITUVCHILARNING KREATIV TAFAKKURINI LOYIHAGA ASOSLANGAN O'QITISH	
VOSITASIDA RIVOJLANTIRISH MODELI .....	577-585
<i>Usmonova Matluba Nosirovna</i>	
O'QUVCHILARDA MILLIY VA UMUMINSONIY QADRIYATLARNI TARBIYALASH	
METODIKASINING KREATIV PEDAGOGIK YONDASHUVI .....	586-590
<i>Ustaev Abdurazzoq Qurbanovich</i>	
MILLIY KURASH SPORT TURINING FUNKSIYALARI VA MAQSADGA ERISHISHDAGI	
VOSITALARI .....	591-596
<i>Shoimqulova Nigina Xolmurodovna, Yadigarova Sitora Bahromovna</i>	
ADDRESSING CHALLENGES IN TEACHING ENGLISH IN CENTRAL ASIAN COUNTRIES: A	
SCHOLARLY EXAMINATION .....	597-603
<i>Yeshanov Marat Urazaliyevich</i>	
INGLIZ TILINI O'QITISHDA BO'LAJAK CHET TILI O'QITUVCHILARINING KOMMUNIKATIV	
KOMPETENSIYASINI TAKOMILLASHTIRISHDA PRAGMATIKANING AHAMIYATI	
LANGUAGE) .....	604-616

<i>Tursunova Shahnoza Bekchanovna</i>	
JAMOATCHILIK FIKRINI SHAKLLANTIRISHDA JAMOATCHILIK BILAN ALOQALARNING O'R NATISH .....	617-622
<i>Atoyeva Gulshoda Rabimovna</i>	
OILADAGI ZO' RAVONLIKNING O'SMIR XULQIGA PSIXOLOGIK TA'SIRI .....	623-628
<i>Musinova Ruxshona Yunusovna, Qurbanova Aziza Davlat qizi</i>	
JABRLANUVCHI SINDROMI, UNING ASOSIY SABABLARI VA BELGILARI .....	629-635
<i>Jamolova Mokhigul Bakhtiyorovna</i>	
METHODS OF DEVELOPING THE CRITICAL THINKING ABILITY OF PRIMARY CLASS STUDENTS THROUGH FAIRY TALES .....	636-641

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**CRIMES OF MANUFACTURING AND SELLING PHARMACEUTICALS IN A WAY TO DANGER  
THE LIVES AND HEALTH OF INDIVIDUALS  
(Evaluation of Türkiye and Uzbekistan legal system)**

**Abstract.** This study focuses on the crimes of producing and selling drugs that endanger people's lives and health. These types of crimes are common, especially in low- and middle-income countries, and can pose serious threats to public health in these countries. Based on different opinions and information, the causes and consequences of these crimes have been examined.

**Keywords:** Pharmaceutical production, counterfeit drugs, public health, organized crime, international trade, legal regulations, economic losses.

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**ПРЕСТУПЛЕНИЯ ПРОИЗВОДСТВА И ПРОДАЖИ ФАРМАЦЕВТИЧЕСКИХ ПРЕПАРАТОВ,  
ПРЕДСТАВЛЯЮЩИХ УГРОЗУ ДЛЯ ЖИЗНИ И ЗДОРОВЬЯ ЛЮДЕЙ  
(Оценка правовой системы Турции и Узбекистана)**

**Аннотация.** Это исследование фокусируется на преступлениях производства и продажи наркотиков, которые подвергают опасности жизни и здоровья людей. Эти виды преступлений распространены, особенно в странах с низким и средним уровнем дохода, и могут представлять серьезные угрозы общественному здоровью в этих странах. На основе различных мнений и информации были изучены причины и последствия этих преступлений.

**Ключевые слова:** Фармацевтическое производство, поддельные препараты, общественное здоровье, организованная преступность, международная торговля, правовые регулирования, экономические потери.

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**SHAXSLARNING HAYOTI VA SOG'LIG'IGA XAVF SOLUVCHI FARMATSEVTIK  
PREPARATLARNI ISHLAB CHIQARISH VA SOTISH JINOYATLARI  
(Turkiya va O'zbekiston huquq tizimida baholash)**

**Annotatsiya.** Ushbu tadqiqot odamlarning hayoti va sog'lig'iga xavf tug'diradigan farmatsevtika dori-vositalarini ishlab chiqarish va sotish jinoyatlariga qaratilgan. Bunday jinoyatlar, ayniqsa, daromadi past va o'rta bo'lgan mamlakatlarda keng tarqalgan. Bu vaziyat mamlakatlarda aholi salomatligiga jiddiy tahdid solishi mumkin.

Ushbu maqolada turli fikr va ma'lumotlar asosida mazkur jinoyatlarning kelib chiqish sabablari va oqibatlari o'rganildi.

**Kalit so'zlar:** Farmatsevtikada ishlab chiqarish, noqonuniy dori vositalari, sog'liqni saqlash, uyushgan jinoyatchilik, xalqaro savdo, huquqiy tartibga solish, iqtisodiy yo'qotishlar.

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**Introduction.** Pharmaceutical crime has become a global public health issue with the trade in counterfeit and illicit medicinal products. This crime is a truly global phenomenon, affecting all countries through source, transit or destination.

Pharmaceutical crime covers the full spectrum of crimes related to medical and pharmaceutical products. Simply said, pharmaceutical crime involves the sale of counterfeit medicines, dietary supplements and medical devices [38; p.104.]. Patients around the world risk their health and even their lives by consuming counterfeit and unregulated medical products that have been altered, diverted, poorly stored or expired. In addition, pharmaceutical crime can have an economic impact on genuine manufacturers, distributors, consumers and patients [14; p.182.].

Moreover, the offenses of manufacturing and selling medicines in such a way as to endanger the life and health of persons refer to the illegal production and sale of medicines that are not manufactured under proper quality control standards or are deliberately manufactured to contain harmful substances. These medicines may be counterfeit or inadequate, in other words they may not contain the right amount or type of active ingredient, or they may be improperly stored or deliberately contaminated with hazardous substances.

Consumers who unknowingly take these medicines risk serious health problems, including death. This type of drug crime is a major public health and global problem with an impact in all countries.

**Literary analysis and methodology.** Pharmaceutical crime, including the production and sale of counterfeit medicines, is a global public health concern posing serious health risks. Numerous studies review the complex nature of pharmaceutical crime, emphasizing its detrimental effects on individuals and economies. Additionally, the literature highlights the global reach of pharmaceutical crime, highlighting the involvement of organized criminal networks, emphasizing the need for international cooperation and stringent regulatory measures.

This study uses a qualitative research approach to examine the crimes linked to pharmaceutical manufacturing and sales in Türkiye and Uzbekistan. It conducts a literature review, analysing existing scholarship, legal frameworks, and empirical evidence. Data is collected from academic journals, governmental reports, legal statutes, and international conventions. Qualitative data analysis techniques, such as thematic analysis, are used to identify recurring themes. The study also employs a comparative analysis to assess similarities and differences in legal frameworks and enforcement mechanisms for combating pharmaceutical crime. The aim is to provide a nuanced understanding of the challenges posed by pharmaceutical crime and the effectiveness of legal responses in mitigating its impact on public health and safety.

**Pharmaceutical crimes and its terms.** The term "pharmaceutical crime" covers offenses such as misuse of medicines, counterfeit medicines, misleading advertising, illegal sale and distribution, theft of medicines and improper disposal of medicines [3; p.101.]. These offenses can pose serious threats to both individual and public health and can occur because of illegal activities. In addition to harming patients, crimes can damage the pharmaceutical industry, healthcare, and public trust [43].

Drug crime is one type of white-collar crime. It is common practice to refer to white-collar crime as a single phenomenon. However, the violations traditionally grouped under this category of crime have little in common with each other. Francis T. Cullen and his colleagues have divided white collar crime into six types of white-collar criminal behaviours. The offenses belonging to the six types are:

1. Violence - manufacturing and selling drugs known to be harmful to users, knowingly selling contaminated food that causes death.
2. Crimes against Business Organizations - employee embezzlement of company funds.
3. Government Corruption - when a public official gives favours in exchange for bribes, bribing a public official to obtain favours.
4. Corporate Price Rigging - setting prices for a consumer product such as gasoline, setting prices for machines sold to businesses.
5. Deception of Consumers - knowingly selling worthless stocks as valuable investments, lending money above legal interest rates, misleading advertising about a cure for headaches.
6. Income Tax Fraud - understating income on income tax returns, wilfully neglecting to submit income tax returns [12; pp.14-15.].

The 2014 Interpol report on medicines provides information on pharmaceutical crime, the production, trade, and distribution of counterfeit, stolen or illegal drugs and medical devices. This is seen in connection with activities such as counterfeiting of medical products, falsification of packaging and related documents, theft, fraud, illegal diversion, smuggling, illicit production and trade of medical products and related money laundering [43].

Illegal medicines may contain the wrong dose of the active ingredient, or none, or may contain a different substance. These are associated with many dangers and in the worst case can result in heart attack, coma, or death [38; p.103.]. Combating the production and sale of counterfeit medicines is vital to protect the quality of products in circulation and public health at a global level.

The increasing prevalence of counterfeit and illicit goods has been compounded by the rise of internet commerce, where they can be easily and cheaply purchased without a prescription. The scale of the problem cannot be quantified, but in parts of Asia, Africa, and Latin America, counterfeit medical products can account for up to 30% of the market [20; p.37.].

Organized crime networks are attracted by the huge profits that can be made through pharmaceutical crime. They operate across national borders, importing, exporting, manufacturing, and distributing counterfeit and illicit medicines. Coordinated and cross-sectoral action at the international level is vital to identify, investigate and prosecute the criminals behind these crimes.

**Causes and effects of producing and selling counterfeit medicines.** Before examining the area of counterfeit drug production and trafficking, the difference between original medicines, non-standard medicines and counterfeit medicines should be determined.

Original medicine is an international term used for new medicines that have been proven to have a positive effect on a specific disease because of long research and clinical trials, are based on a patented molecule and have no previous analogues [20; p.182.]. Original medicines are protected by strong laws in many countries around the world, under the protection of patent and data protection rights for a certain period [2].

"Non-standard medicines (also called out-of-specification (OOS) products) are actual medicines authorized by manufacturers that do not comply with the quality specifications set by national standards [42; p.85.]. Generally, every medicine produced by every manufacturer must comply with established quality standards and specifications. The product is reviewed and assessed by the national drug regulatory agency before it is authorized for marketing" [44].

A counterfeit medicine is "a counterfeit medicine is a medicine that is deliberately and fraudulently mislabelled as to its identity and/or source. Counterfeiting can apply to both branded and generic products, and counterfeit products may include products containing the correct ingredients, containing the wrong ingredients, containing no active ingredient, containing insufficient amounts of active ingredient or falsely packaged products" [6].

As noted above, counterfeit medicines or drug trafficking is a rapidly growing criminal activity on a global scale. The World Health Organization's (WHO) definition of pharmaceutical fraud includes medicines with deliberately misleading information about their identity and/or source, products containing false or inaccurate ingredients, products containing no or insufficient active ingredients, and products with counterfeit packaging [45]. Patented and generic medicines can also be counterfeited. Counterfeit medicines are often sold to pharmacies through traditional distribution channels or directly to users via the internet [5; pp.493-515.].

According to the authors of one academic study, the production and distribution of counterfeit medicines is an inevitable choice of criminals because, in accordance with one of the theories of crime prevention, a crime is committed when a suitable target and potential criminal meet at a suitable time and place without adequate supervision. Drug counterfeiting is often prevalent when access is limited, and prices are high. When the production and trade in counterfeit medicines needs to be tackled, we need to understand its root causes and organization. There are many reasons why it develops and most of them are linked to inadequate regulation and enforcement [35].

Producing and selling counterfeit medicines is considered a financially profitable and largely risk-free business. This is exacerbated by inadequate regulatory frameworks and lax enforcement, with some countries considered to be facilitators or collaborators in this process [42; p.86.]. The lack of an international legal framework has also been criticized. Unlike drug traffickers, producers of counterfeit medicines are less likely to be caught [28].

Moreover, as high value-added products, pharmaceuticals are often characterized by high prices and therefore make the best targets. This allows counterfeit drug manufacturers to charge a fraction of the price of their products, with no production costs, research and development or licensing costs [13; p.391.]. Even if they use the right ingredients, counterfeit drug manufacturers will have much lower quality standards and lower worker salaries. Real medicines are expensive and often burdened with import duties, so patients turn to seek

cheaper alternatives, thus encouraging the spread of unregulated production and street market or Internet distribution. The globalization of financial markets has facilitated smuggling and illegal imports and exports, which are common in some countries [29; p.142.].

The conditions under which counterfeit medicines are produced and processed are often appalling and pose a direct threat to patients' health. The products are often stored improperly, with no consideration of the "cold chain" [17; pp.138-143.]. Although counterfeit production does not require a lot of room, it can often be done in small industrial facilities, workshops, normal houses, backyards, garages, or even small vans, often by unskilled workers, although sometimes licensed facilities can be manipulated by fraudsters. 32% of counterfeit medicines contain no active ingredient at all and can therefore be life-threatening [47].

Every day, patients in need of effective treatment receive low-quality or counterfeit medicines and other medical products. At best, patients who receive these products do not feel relief from their symptoms; at worst, they can end up dying [2]. In poor countries, half of the medicines used for some deadly diseases are counterfeit and contain little or no active ingredients. In rich countries, drug safety is better, but poor quality or counterfeit medicines still cause thousands of side effects and some death [37]. As outsourced production and international trade in medicines become standardized, patients everywhere become vulnerable.

In short, the crimes of producing and selling drugs are motivated by financial gain and lack of regulation of the pharmaceutical industry. Moreover, the impact of crimes of manufacturing and selling medicines in a way that endangers people's lives and health poses not only health threats, but also economic losses and social credibility issues.

**The global context and challenge.** Pharmaceutical crime is a major public health issue that puts human lives at risk and directly harms those who make up the pharmaceutical supply chain: manufacturers, distributors, pharmacists, doctors, private organizations, and public institutions [32; p.169.].

The counterfeiting, manufacturing and sale of healthcare products is a growing phenomenon and, while difficult to measure precisely, data is provided annually by researchers at the Pharmaceutical Security Institute (PSI) [19]. International organizations fighting pharmaceutical crime have long considered this problem among the most serious emergencies that need to be addressed. Information about this phenomenon is often poorly known to the public, despite the efforts of the relevant authorities with communication initiatives on health risks.

There are several factors that contribute to criminality in the field of production, storage, sale (realization) and importation of medicines [32; p.172.]. The area of public supply of medicines remains the most corrupt area of public relations in the world. Statistics prove that the most frequent crimes on the life and health of citizens are the counterfeiting of medicines such as painkillers, antibiotics, and psychotropic substances, which are in demand and advertised on television and radio [22].

In the modern phase of the circulation of counterfeit medicines, the World Health Organization (WHO) and other international organizations are recognized as international bodies that control the quality and circulation of medicines. The World Health Organization (WHO) has developed guidelines for member states to prevent and combat counterfeit medicines, including the establishment of effective regulatory systems, the implementation of

supply chain security measures and the establishment of a legal framework for their implementation [46]. One example is the International Medical Products Anti-Counterfeiting Taskforce (IMPACT) established by the World Health Organization. In essence, IMPACT aims to stop the production, trade, and sale of counterfeit medicines in the world by establishing country-based and cross-country networks [35]. IMPACT is made up of major players in the fight against counterfeiting, including international organizations, law enforcement agencies, non-governmental organizations, pharmaceutical manufacturers' associations, and pharmaceutical government officials. Established in 2006 within the WHO, this Task Group has five working groups in total [7; p.206].

In the European Union (EU), there is a strong legal framework for licensing, manufacturing, and distribution to combat counterfeit medicines for human use and this is focused on the Directive on counterfeit medicines [9].

Many countries have enacted laws and regulations to address the problem of fake drugs. For example, in the United States, the Federal Food, Drug and Cosmetic Act provides the legal framework governing the manufacture and distribution of drugs and medical devices and imposes penalties on those who fail to comply with its provisions [27; p.227]. The National Association of American Pharmacists has identified more than 10,000 websites to combat counterfeit goods. However, only 3% of these websites are compliant with this country's pharmaceutical regulations and laws [21].

Other international organizations and initiatives, such as "Medicrime Convention" and the Institute for Drug Safety, work to prevent the production and distribution of falsified pharmaceuticals and other poor quality medical products [18; pp.61-63].

Although there are many national and international laws and regulations on producing and selling counterfeit or inferior medicines that endanger people's lives and health, in many countries the production and distribution of counterfeit medicines is compared to crimes such as trademark counterfeiting or DVD counterfeiting. While many countries have laws to pursue IPR infringements, most of them do not focus on the problem of medicines and public health issues [16]. Internet pharmacies pose particular problems due to the frequent absence of relevant legislation. For these reasons, the "public health" meaning of counterfeiting should probably be distinguished from intellectual property violation and legislation should mostly focus on the former. According to the Anti-Counterfeiting and Trade Agreement proposed by many countries, counterfeiting offenses on a commercial scale should entail criminal prosecutions and penalties. Swiss trademark owners, for example, have three tools: civil law, criminal law, and customs [39].

We can also think of counterfeit drug dealers as competitors of drug traffickers. Their revenues can be even higher than drug dealers and they face fewer risks. Worldwide, the production and distribution of counterfeit medicines is a widespread phenomenon. According to the World Health Organization, every year individuals fall victim to between 100,000 and 1 million tons of counterfeit medicines [10]. In France, a study conducted for a major pharmaceutical manufacturer, "Sanofi", shows that 20% of Europeans are at risk of using counterfeit medicines. Poor and underdeveloped countries are more exposed to the problem of counterfeit drug production and distribution than other countries. Between 30% and 70% of counterfeit medicines are consumed in countries in the Greater Sub-Saharan Africa, Southeast Asia, and Latin America [11].

Overall, preventing crimes and enforcing penalties for the production and sale of medicines that endanger people's lives and health is an important global issue that requires cooperation and coordination between governments, regulatory agencies, and other stakeholders.

**Evaluation in the legal system of Türkiye.** In its legislation, Turkish law provides several focused measures specifically designed to combat the trade in counterfeit medicines, as well as general provisions such as the "Smuggling Law". In relation to the World Health Organization's definition, Articles 186 and 187 of the Turkish Criminal Code deal with the sale of counterfeit or expired medicines [8; p.257.].

In this context, Article 186 of the Turkish Penal Code states that "Anyone who sells, supplies or possesses any kind of food or drink or medicines that have been spoiled or altered in such a way as to endanger the life and health of persons shall be sentenced to imprisonment from one year to five years and a judicial fine of up to one thousand five hundred days [24; p.494.]."

On the other hand, Article 187 of the Turkish Penal Code states, "Any person who manufactures or sells medicines in such a way as to cause a risk to the life and health of others shall be sentenced to imprisonment from one year to five years and shall be fined. If this offense is committed by a doctor or pharmacist, or if it is committed within the scope of a profession or artistic activity, the penalty shall be increased [49; p.509.]." However, these articles focus primarily on whether such medicines endanger human life, and law enforcement authorities are empowered to act legally if such an offense is detected.

Similarly, the right to a "healthy life" [41; p.269.] is already protected by the Turkish Constitution and is also protected by international treaties to which Turkey is a state party.

Article 186 considers the legal value protected by the offense as the protection of public health. Furthermore, Article 56 of the 1982 Constitution obliges the state to ensure that everyone lives in physical and mental health. In addition to general laws on this subject, there are also regulations in special laws such as the Public Health and Sanitation Law [33; p.219.].

Anyone can be the perpetrator of the offense of trafficking in spoiled or altered food or medicines. Since Article 186 of the TPC No. 5237 mentions "anyone" who sells, supplies or possesses any kind of edible or drinkable food or medicine that has been spoiled or altered in such a way as to endanger the life and health of individuals, the penalty will be aggravated if the perpetrator of the crime is a person who performs a profession or art based on official permission (TPC Article 186/2). The victim of the crime of trafficking in tainted or altered food or medicines can be anyone. In this crime, a specific victim is not required, it is intended to protect public health in general [33; p.221.]. The elements of the crime are material, illegality and moral. Under Article 186:

the material element is the sale, supply, or possession of all kinds of edible or drinkable substances or medicines that are adulterated or whose contents have been altered in such a way as to endanger the life and health of persons.

as the element of illegality: the occurrence of the offense depends on the illegality of the action. The reasons of lawfulness that eliminate the illegality, which is the element of the offense, and which are included in Article 24 and following of the TPC, are general provisions that apply to all crimes. In the presence of one of these reasons, the act ceases to be a crime and

the perpetrator is not punished. The existence of a reason of lawfulness for the trade of spoiled or altered food or medicines will decriminalize the act.

as a moral element: the moral element in the crime of trafficking in spoiled or altered food or medicines is intent; this crime cannot be committed with negligence. It is sufficient for the offense to be committed if the perpetrator acts knowingly and willingly; motive is not important [14; p.179.].

The subject of the offense of making or selling medicines in a way that endangers the life and health of persons regulated in Article 187 of the Turkish Penal Code is medicines. Drugs may be of animal, vegetable, mineral, natural or synthetic, crude or processed, dermo cosmetic or physiotherapeutic origin, or they may be solid, liquid, or gaseous, of domestic or foreign origin. It is even possible for a substance to be considered a medicine even if it is not authorized for production by the Ministry of Health or not sold in pharmacies if it has these qualities [4; p.864.].

The legal value protected by the offense of making or selling drugs in a way that endangers the life and health of persons is the public health, as stated in Article 186. The reason why the crimes of making or selling drugs in a way that endangers the life and health of persons are considered as crimes against public health is that their victims are uncertain [15; p.144.].

The perpetrator of the offense of making or selling drugs in a way that endangers the life and health of persons may be anyone. However, the fact that the perpetrator is a physician or pharmacist or a person practicing a profession or art based on official authorization has been accepted by the legislator as a reason aggravating the punishment (Art. 187/2 of the TPC) [4; p.865.]. The Turkish Penal Code does not provide any special mitigating circumstances for the offense of making or selling drugs in a way that endangers the life and health of persons.

The victim of this crime can be anyone. This offense does not require a specific victim but aims to protect public health in general. On the other hand, since this crime is regulated as an elective offense in Article 187 of the TPC, if the perpetrator both makes and sells the drug that endangers the life and health of people in the concrete case, the crime will be deemed to have been committed by performing the first elective act, that is, by making the drug, and a single crime will be considered to have occurred [33; p.225.]. Therefore, even if the drug subject to the offense is not sold to the same person, it is possible to increase the penalty by applying the provisions of chain crime against the perpetrator, provided that more than one sale of the drug is carried out within the scope of the execution of the same criminal decision [14; p.182.].

According to Article 187 of the TPC, the material element of the offense of making or selling drugs in a way that endangers the life and health of persons is to produce or sell drugs in a way that endangers the life and health of persons. Again, the sale of a drug that is dangerous for the life and health of persons over the internet will also be considered within the scope of the crime of selling drugs in a way that endangers the life and health of persons within the meaning of Article 187 of the TPC Unlawfulness depends on the unlawfulness of the action [23; p.231.].

The crimes of making or selling drugs in a way that endangers the life and health of persons are regulated as crimes that can be committed intentionally in Article 187 of the TPC. This refers to the moral element of the crime. Therefore, it is sufficient for the perpetrator to knowingly and willingly make or sell drugs in a way that endangers the life and health of persons, to be responsible for the crime in question [14; p.183.].

As sanctioned by Articles 186/187, the penalty is imprisonment from one year to five years and a judicial fine. The lower and upper limit of the judicial fine is not indicated in the provision. Therefore, the judicial fine to be imposed shall not be less than five days and not more than seven hundred and thirty days in accordance with Article 52/1 of the TPC [43].

It follows from this conclusion that what is important for the life and health of citizens in the production of medicinal products is the protection of the activities of pharmaceutical enterprises through state regulation and supervision. Several measures are taken by state control bodies to prevent and detect the commission of offenses.

**Evaluation in the legal system of Uzbekistan.** In the Republic of Uzbekistan, the Cabinet of Ministers ensures the implementation of a single state policy in the field of pharmaceutical and pharmaceutical activities [1; p.22.]. The "Pharmacopoeia Commission" is an official expert body that sets the requirements for the quality of pharmaceutical means, medical devices, and methods of their control.

According to the Law of the Republic of Uzbekistan "On Medicines and Pharmaceutical Activities" medicines drugs produced on the basis of drug substances and auxiliary substances based on them, drug substances and drug preparations used in medical interventions for the prevention, diagnosis, and treatment of diseases, as well as for changing the state and functions of the human organism. This includes immunobiological, radiopharmaceutical and para pharmaceutical preparations, homeopathic, diagnostic and sterilization means [48; p.2.].

Illegal (counterfeit) copies of unregistered medicines - medicines that are placed on the market in violation of intellectual property law - are not fit for public use. Since they are produced in a way that endangers the health of persons, they must be withdrawn from use and destroyed according to the decision of the owner or the court. The owner of such medicines must quickly remove such medicines and medical products from use and destroy them within 30 days [36; p.125.].

The procedure for the production, preparation, storage, transportation, or sale of low-quality or counterfeit medicines or medical products in the Republic of Uzbekistan is regulated in Article 186<sup>3</sup> of the Criminal Code of the Republic of Uzbekistan as follows:

"To produce, prepare, obtain, store, transport or transport counterfeit or inferior medicines, to sell medicines or medical products out of hospitals and their branches, as well as to offer for sale medicines containing potent substances for sale on prescription, and after administrative sanctions have been imposed for such acts, punishable by a fine of up to one hundred times the amount of the basic calculation or community service for up to three years or imprisonment from two to five years.

The same acts:

- a) in large quantities.
- b) with forethought by a group of persons.
- v) by a repeat or risky offender.
- g) committed by abuse of position of office
- d) causes moderate or serious injury to the body.
- e) carried out in a manner that is misleading as to the nature of the drugs or medicinal products and confirming documents of state registration, -

is punishable by deprivation of liberty for five to eight years.

Acts which:

- a) are of a very high magnitude.
- b) were premeditated by an agreed group or to protect their interests.
- v) result in the killing of a person, -  
is punishable by deprivation of liberty for ten to fifteen years.

The acts:

- a) cause the death of people.
- b) lead to the commission of other serious crimes, -  
shall be punished by deprivation of liberty for a term of fifteen to twenty years [30]."

The main object of the offense is understood as the relations that ensure the legally established regulation of control over the quality of medicines and medical devices, the interests of users, as well as the protection of the products of pharmaceutical manufacturers from counterfeiting. The additional object is the relations that ensure the life and health of citizens.

The subject matter of the offense referred to in Article 186<sup>3</sup> of the Criminal Code is unqualified or counterfeit medical devices and medicinal drugs. Objectively, the offense is the production, preparation, receipt, storage, transportation of poor-quality or counterfeit medicines or medical devices, as well as the sale of medicines independently of pharmacies and their branches [31; pp.216-217.].

Subjectively, the offense is committed intentionally. The offender understands the production, preparation, transportation and sale of poor quality or counterfeit medicines or medical devices and intends to carry out these acts. The perpetrator of the offense is considered to be any person who has reached the age of 16.

In addition, in Chapter VII of the Constitution of the Republic of Uzbekistan (Personal Rights and Freedoms), Article 24 states that the right to life is the fundamental right of every human being; the attempt on human life is the most serious crime. Article 43 states that the state is obliged to ensure and protect the rights of citizens guaranteed by the Constitution and laws [34; p.102.].

In short, although the Republic of Uzbekistan, like the Republic of Turkey and other international organizations, has some mechanisms in place to combat the crimes of producing and selling medicines in a way that endangers the life and health of persons, these mechanisms are still further developing.

**Conclusion.** As a result, people all over the world risk their health and even their lives by consuming counterfeit and unregulated medicinal products, or poorly stored or expired products. Pharmaceutical crime can also have an economic impact on genuine manufacturers, distributors, consumers, and patients.

Pharmaceutical crime involves the manufacture, distribution, and sale of counterfeit or fraudulent medicines. These are medicines that are deliberately mislabelled, contain poor quality or ineffective ingredients, or are clearly counterfeit. Pharmaceutical crimes have been included in white collar crime.

Financial gains and shortcomings in pharmaceutical industry regulation are the general motives for the production and sale of counterfeit or illegal medicines that endanger people's lives. This crime has its impact both in terms of health threats and economic losses for organizations, as well as in terms of public trust.

International organizations combating drug fraud are seriously tackling this problem by developing various preventive measures and strategic methods in every corner of the world. The European Union, the World Health Organization, the International Special Group to Combat Counterfeit Pharmaceutical Products (IMPACT), the Medicrime Convention and the Institute for Medicines Safety are examples of such activities.

In addition, penal practices to prevent drug trafficking crimes that put individuals' lives at risk are developing not only internationally but also within countries. Within the framework of this study, this can be seen in the case of the Republics of Turkey and Uzbekistan. The fact that the penal codes of Turkey and Uzbekistan have appropriate punishment mechanisms for this crime shows that public health and interests are protected in these countries.

Producing and selling medicines in a way that endangers the life and health of individuals is a serious offense. Such actions can lead to serious consequences for those who consume dangerous products, including injury or even death. It is therefore crucial that regulatory agencies are vigilant in identifying and punishing those who engage in these illegal activities to protect the health and safety of individuals and communities.

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ГУМАНИТАРНЫХ НАУК**

**ACTUAL PROBLEMS OF HUMANITIES AND SOCIAL SCIENCES**

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