CLINICAL FEATURES OF DEPRESSIVE DISORDERS OF ONCOLOGICAL PATIENTS

RESEARCH GROUP:

Hanna Kozhyna
Doctor of Medical Sciences, Professor, Head of the Department of Psychiatry, Narcology, Medical Psychology and Social Work
Kharkiv National Medical University

Kateryna Zelenska
Philosophy doctor, Associate Professor of the Department of Psychiatry, Narcology, Medical Psychology and Social Work
Kharkiv National Medical University

Svitlana Isaenko
Chair for Candidate of Medical Science Degree, Department of Psychiatry, Narcology, Medical Psychology and Social Work
Kharkiv National Medical University

Cancer has a strong impact on the human psyche. Stress, negative emotions, misunderstanding, anxiety, fear, confusion, panic, apathy, feelings of doom are causes of deep depression, suicidal thoughts and attempts. Recently, the relevance of the problem of depression in cancer practice has increased significantly, where their prevalence ranges from 40 to 60% according to various authors. Mental pathology has a significant adverse effect on the clinical and social outcomes of oncological diseases, including reducing survival rates, reducing the level of adaptation and reducing the quality of life, as well as attachment to pathogenetic treatment.

To achieve the goal, a comprehensive survey of 154 patients of both sexes (78 women and 76 men aged 25-55 years) with oncology was conducted on the basis of the Kharkiv Regional Clinical Psychiatric Hospital No. 3, adhering to the principles of bioethics and medical deontology during 2013-2016. The examined people had pathology of stages I and II without brain localization in which depressive disorders were diagnosed: disorders of adaptation, in the form of depressive reaction (F43.21, F43.22) (48.4%); moderate and severe depressive episode (F32.1, F32.2) (38.2%), organic depressive disorder (F06.32) (13.4%).

As the results of the survey indicated, all patients (100%) noted the psychotraumatic nature of the fact of diagnosing malignant tumors, they felt a sense of danger (69.3%); anxiety (78.2%) up to panic (45.8%); depression (72.9%); fear of death 66.8%; hopelessness (39.2%) and apathy (38.2%); despair (35.6%); loss of meaning of life (35.2%), sense of dignity (29.8%) and control of the situation (48.6%); they became introverted (44.6%).

According to the data obtained, the patients of the main group were characterized by low communicativeness, reserved demeanor, anxious vengeance,
a tendency to dramatization and a negative assessment of events and facts, increased sensitivity, vulnerability, coverage of the experiences of acute grief due to the diagnosis of cancer, with the narrowing of cognitive functions and domination of the content of mental trauma in consciousness, the assessment of the situation that has developed as hopeless, a sense of isolation, lack of social support.

References:

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FEATURES OF CLINICAL PRESENTATION OF MENTAL DISORDERS ACQUIRED DURING THE OPERATION OF INCORPORATED FORCES

Kateryna Yuntsova
Student
*Kharkiv National Medical University*

Herman Berezhnyi
Internship doctor of the Department of Psychiatry, Narcology, Medical Psychology and Social Work
*Kharkiv National Medical University*

UKRAINE

Topicality: last years due to situation on east of Ukraine related to defence of its territorial integrity the operation of Incorporated forces (OIF) is conducted that involved ten of thousands of people in. Battle actions are characterized by the high level of stress factors [1]. More than 85 thousand servicemen visited the zone of the battle operating on east [2].

Aim: to study the features of clinical presentation of mental disorders acquired during OIF.

Materials and methods: taking into account the rules of bioethics and deontology and at the informed consent to participating in an survey, in 2019 year 30 patients were examined on the base of the Military medical clinical center of the North region of Ukraine. All patients were male aged from 18 to 43. Next psychodiagnostic methodics were used: scale of CES - D and scale of estimation of influence of injuring event.

Results: according to the results of a psychodiagnostic study on the CES-D scale, 20% (6 people) of the respondents had a low level of influence of combat trauma (10-13 points), 16% (5 people) – the average level (14-17 points), 27% (8