P01-268

PSYCHOPATHOLOGY REGULARITIES OF FORMATION OF DIFFERENT FORMS OF DYSTHYMIA

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Depressive disorders are a polymorphic group that is stipulated by a different genesis of the conditions (endogenous, psychogenic, organic). Dysthymia is one of the most complicated forms of psychopathology with depressive disorders.

A complex examination of 182 persons with dysthymia (60.5% were female and 39.5% were male patients from 20 to 49 years old) was performed. Clinical-psychopathological, psychometric, psycho-diagnostic investigations and statistical methods were used. A clinical-psychopathological stricture of dysthymia are ambiguous and polymorphic. This allows us to define three variants of the pathology: dysphoric, somatic-vegetative, senestho-hypochondriacal.

In a dysphoric variant a leading role belongs to accentuations of character (asthenic-neurotic type - 47.6%; labile type - 38.1%; cycloid type - 14.3%), which form a low stress-resistance, an emotional tension, and a depressive type of reaction on external events. In a genesis of a somatic-vegetative variant of dysthymia a leading role belongs to psychogenic factors characterized with a chronic and combined type and registered in 91.8% of patients. A senestho-hypochondriacal variant of dysthymia is formed due to a premorbidly changed "ground" (premorbid somatic and neurological diseases were registered in 91.1% of patients).

Criteria for diagnosis of dysthymia includes: etiological factors (constitutional psychogenic and biological parameters), structure of clinical-psychopathological manifestations (somatic-vegetative, sensitive, movement, and psychopathological disorders), peculiarities of personality, direction of a conflict zone (past, present, future), presence of mechanisms of a subconscious exaggeration of severity of the conditions.

Treatment is performed by means of combination of pharmaco- and psychotherapy, which must be use on step-by-step basis as cessation, stabilization, and prevention.