

of methods for prevention, treatment and rehabilitation of representatives of the specified contingent.

It was carried out two-phase comparative research of FS and civil patients (CP) with AD. It was established during complex clinical, psychopathological and psychodiagnostic research that FS distinguishes from CP by: the raised frequency comorbid somatic pathology, inclination to relapses of AD and to alcoholic psychoses, and also rather high resistance to therapy of present psychopathological symptoms.

Offers concerning optimization of standards of treatment FS with AD are developed and most important of which are: the maximum reduction of the period between the alcohol intake termination (at exit from hard drinking) and hospitalization; increase of standard period of detoxication (after hard drinking) up to 3 weeks; accent in psychosocial support in post-hospital period: on regularity of therapeutic contacts, on cognitive-behavioral psychotherapy, on the family-focused actions; and also on the help in search of a new, civil workplace.

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Aim: Evaluating the effectiveness of art therapy in treatment of patients with depressive recurrent disorder (RDD).

Objectives: The study involved 150 patients of both genders with RDD. Patients were randomized into 2 groups: group study №1 and study group 2. Research Group №1 received standard therapy, while the study group №2 received art therapy in a complex standard treatment. We have used several types of drawing techniques.

Results: The study revealed a positive effectiveness of art-therapy for patients with RDD.

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Surgery-related posttraumatic stress disorder in parents of children with congenital heart defects

Prenatal diagnosis of congenital heart defect (CHD) can lead to maternal and paternal stress during pregnancy. We aimed at evaluating post-traumatic stress disorder (PTSD), depression and anxiety after prenatal diagnosis of CHD and surgery-related PTSD in parents of children undergoing heart surgery. Parents' PTSD forms gradually. The manifestations of psychological maladjustment with time can be transformed into PTSD. The risk of parental PTSD remains at all stages of hospitalization, including prenatal ultrasound CHD diagnostics, heart surgery, stage of intensive care unit and further psychomotor child's follow up. Clinicians need to identify parents at risk of the PTSD at all therapy stages. Psychologists could provide parents with systematic psychological assistance: psychoeducational and family therapy sessions as well as psychopharmacological support.

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The dynamics of body weight gain and secondary negative symptoms in patients with paranoid schizophrenia treated by various antipsychotic drugs