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**PATHOGENESIS AND PSYCHOLOGICAL CORRECTION OF DISFUNCTION OF MARITAL INTERACTION IN WOMEN WITH ENDOMETRIOSIS**

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**Introduction.** After conducting socio-demographic, clinical psychological, psycho-diagnostic, and special sexological survey of 150 married couples with women suffering from endometriosis we identified particular psycho-emotional sphere and the specificity of sexual fulfillment; distinguished typology of individual psychological characteristics of women; identified individual characteristics of family functioning and marital interaction in couples, where a woman suffers from endometriosis.

**Results.** The results of the tests (survey) confirmed the link between the state of psycho-emotional sphere and the presence of endometriosis in women. Moreover, negative anxiety and depressive emotions dominated in the surveyed women with endometriosis.

During the survey of the state of implementation of sexual function in patients we diagnosed the following symptomatic disorders of sexuality: the lack of sexual satisfaction, orgasmic dysfunction, dyspareunia, genitalgiya. We observed problems  in communication between men and women due to the presence of intra- and interpersonal conflicts, violation of the relationship and the inability to communicate, to express their needs and expectations, in particular, in the sexual sphere.

Analysis of individual psychological characteristics inherent in women with gynecological pathology pointed out the most common among patients demonstrative and emotive types of character accentuation. Among males more common were pedantic and stuck personality type. Comparative analysis of the personality profile options allowed us to establish three possible combinations: insecure-depressive; impulsive; anxious hypochondriac.

Survey of the state of family functioning in couples where women are suffering from endometriosis allowed us to establish complete breach in the emotional, spiritual, sexual and erotic, protective, psychological and rehabilitative functions.

Having identified the vicious circle of cause-and-effect relationships we developed the combination of psycho-corrective and psycho-prophylactic measures aimed at leveling the pathogenic psycho-emotional, sexual, and psychological factors and recovering of spousal interaction and improving the quality of life of this category of patients.

Psycho-corrective influence in complex treatment of women with endometriosis should be based on complexity, differentiation, sequences and consist of cognitive (information), affective (emotional) and connotative (behavioral) components. Psycho-prophylactic approaches were implemented using the techniques of cognitive-oriented (cognitive, rational and emotional), cognitive-behavioral therapy with individual, paired (family) and group forms of work. The latter made it possible to improve the quality of life of patients and revive family function in most cases.

*Keywords:* medical psychological care, genital endometriosis in women,