

Kharkiv Ukraine













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TEMPORARY IMMIGRATION LIKE ONE OF THE BASES OF ADJUSTMENT DISORDERS WITH DEPRESSED MOOD AMONG FOREIGN MEDICAL STUDENTS

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Introduction. Adjustment disorders are among the most frequently experienced mental health disorders. However, given the range of stressors involved, severity levels, and settings in which data is collected, the reported prevalence estimates vary significantly. Given how complex and busy our lives have become in this technological age, it is not surprising that adjustment disorders are a relatively commonly experience. It is rare that we encounter only one single stressor at a time because of the number of different roles we take on. The main part of modern researches is devoted to importance of immigration factor in etiology of all mental disorders. We concider that even temporary immigration is highly stressfull.

Materials and methods. That's why foreign students have been taken to our study. There were 38 students in our research, 4th and 5th year courses, 23 ± 1.6 years old. Most of them were from the Middle East, India and Nigeria (muslims, christians, buddhists). They noticed a deterioration in mood for more than a few weeks in a month and had non-attached psychiatric anamnesis.

Results. According to the results of the clinical interview, the entire contingent of the study showed a subdepressive condition: a rough sleep disorder, sleep disturbances (long falling asleep, heavy awakening), loss of appetite most of the time, which did not lead to a significant reduction in adaptation, and there weren't complaints after returning home during the holidays. Several groups of factors were identified that negatively impacted students mood. This is the geopolitical characteristics of the country of study; micro-social factors, academic language difference and slang. At the same time, most men identified the leading differences in academic and outdoor communication, lack of information about cultural and social differences between countries, differences in expectations, and the actual situation, according to learning. Women noted the lack of information about supporting organizations, the language barrier. In the pursuit of adaptation, the students of both sexes became more closed, they lost their wish to leave their house or university alone, they were inclined to isolation or communication in closed organizations, increasing religiousness and the desire of protection, the tendency was to avoid contact with official organizations. In most cases, the men indicated using of nicotine, alcohol, caffeine, cannabinoids and non-chemical addictions (social networks, etc.).







Conclusion. In conclusion we should note the presence of AD with depressive mood among foreign students. For prevention of them, it is possible to develop the following measures: supporting work among students from the university and contact establishments, support for open student's organizations, involvement in sports organizations, support for hobbies, active leisure time (competitions, contests, parties) and student's researches.

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PSYCHOPREVENTION NONPSYCHOTIC MENTAL DISORDERS IN PREGNANT WOMEN

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Introduction. The high prevalence of nonpsychotic mental disorders in women during pregnancy determine the relevance of studying, developing and implementing methods of psychoprevention. Art therapy has a significant prevention potential in working with patients with nonpsychotic mental disorders. The use of art therapy in psychoprevention programs helps pregnant women utilize various verbal and non-verbal forms of creative activity. This improves a stress resistance, a social and personal level of adaptation in condition of significant changing of their life.

Materials and methods. The purpose of our study was to evaluate the effectiveness of art-therapy in the psychoprevention nonpsychotic mental disorders in pregnant women. Material and methods: The clinical-anamnestic, clinical-psychopathological and psychodiagnostical research methods were used. Tools used were The Hamilton Depression Rating Scale (HDRS), The Hamilton Anxiety Rating Scale (HARS), Symptom-Checklist, SCL-90-R, Quality of life index by Mezzich J.E., Cohen N. et al., 1999. During the research, 64 pregnant women were examined. The average age of women was $26,12 \pm 8,06$ years. Gestational age ranged from 22 to 32 weeks.

Results. The nonpsychotic mental disorders were observed in 43% of the examined women. In the structure of mental pathology are dominated by neurotic, stress-related and somatoform disorders in the form of adjustment disorder, anxiety disorders, somatoform disorders, neurasthenia. Anxiety, irritability, depressed mood, fear, decreased mental and physical activity, autonomic dysfunction were the main symptoms in pregnant women with nonpsychotic mental disorders. The average anxiety score on the HARS scale was $16,34\pm3,55$ points, which corresponds to a moderate anxiety. The average estimation of depression on the scale HDRS was $12,69\pm2,76$ points, which corresponds to mild degree of depression. According to SCL-90-R, in pregnant women were identified high level of mental distress (GSI – $0,78\pm0,69$, PSDI – $1,54\pm0,46$). The analysis of the profile of the quality of life demonstrate a more significantly decline general perception of the quality of life in pregnant