

KHARKIV NATIONAL MEDICAL UNIVERSITY

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NEUROSCIENCES



Diagnosed: Parkinson`s disease, mixed form. Complex treatment that included L-dopamine-containing medicine Levocom Retard (250 mg) was prescribed in the dosage of 0,5 of a pill two times a day during the first week and then one pill two times a day (always).

Reduction of tremor, reduction of muscle stiffness, of hypokinesia and hypomimia, normalization of handwriting and spech improvements were observed after examination in two months.

Findings: positive dynamic was observed after a two-month usage of Levocom Retard - motor symptoms of Parkinson`s disease lessened greatly. The patient didn`t have by-effects after taking Levocom Retard because this medicine includes not only Levodopa (200 mg) but also Carbidopa (50 mg). Carbidopa doesn`t go though blood-brain barrier and decreases extracerebral decarboxylation of Levodopa and the last gets largely into a brain thus lowering the frequency of by-effecs that are connected with the increase of extracerebral dopamine level.

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ANALYSIS OF PREMORBID FEATURES OF WOMEN WITH OPIOID DEPENDENCE

Under observation there were 165 women between the ages of 18 and 45 (mean age 31.5 ± 1.6 years) who had opioid addiction.

The criteria for inclusion in the study was a diagnosis of opioid dependence according to the criteria of ICD 10 (F11.2).

Hereditary burden was found in 63 patients (38.2%). The largest share was occupied by alcoholism on the line of the father 28,6%, alcoholism on the line of the mother met in 4,8% of cases. The incidence of morbidity for various forms of surfactant dependence in the patients' parents was 7.9%.

In the anamnesis of the majority studied women were noted unfavorable micro-social conditions parenting, often mothering, hypopoic or permissive parenting, frequent parental conflicts and quarrels, other stressful situations). Particular attention was paid

to such factors as the loss of one parent at the age of 5 years (18.8%), the breakup of the parental family at the age of 16 (12.7%), the unequal behavior of parents in the family. 31 women (18.8%) had completed higher education; 5 women (3%) were students of educational institutions; 48 women (29.1%) received secondary specialized education; 81 people (49.1%) graduated from high school.

Manifestations of deviant behavior (systematic avoidance of study or work, early onset of smoking or alcohol use, petty theft, auto-aggressive behavior, etc.) by the age of 16 were reported in 53 women - 32.1%.

The onset of alcohol consumption in all patients was noted at the age from 12 to 14 years, smoking - at the age from 10 to 13 years. At the time of the study, episodic drinking was reported in 69 people (41.8%). Other patients refused alcohol.

The age of onset of drug use in almost all patients ranged from 12 to 16 years.

The motivation for the first drug usage were more often manifestations of curiosity, self-affirmation, reduction of the level of psycho-emotional stress, attempts to get new pleasures, less often imitation of older acquaintances or passive subordination. In the vast majority of cases, cannabinoid drugs were used for the first time. The experience of using psychoactive substances (cannabinoids - in all cases; rarely - derivatives of amphetamines and hallucinogens; sporadically - cocaine), which preceded the dependence on the main drug (opioids), in 72 patients (43.6%) began from the age of 12-14 years; 48 (29.1%) - aged 15-16; in 31 (18.8%) - from 17-18 years, in 9 (5.5%) - from 19-20 years, in 5 (3.0%) - from 21-22 years.

The first opioid usage occurred usually at the age of 15-16 years, most often intravenously. In most cases, they were accompanied by toxic somatovegetative reactions in the form of "scratching", nausea, vomiting, dizziness, headache, "brokenness", weakness, drowsiness.

Pathological attraction to opioids was of a dominant nature, as evidenced by a sense of coverage of drug-related experiences, a sense of insecurity, a lack of internal processing, and a struggle against motives.

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