

WITH PROCEEDINGS OF THE INTERNATIONAL SCIENTIFIC AND PRACTICAL CONFERENCE

# PUBLIC COMMUNICATION IN SCIENCE: PHILOSOPHICAL, CULTURAL, POLITICAL, ECONOMIC AND IT CONTEXT

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According to our studies, 50.6 % of students felt apathetic, depressed due to the fact that their usual way of life was disturbed. 54.4 % of respondents said that they became more irritable. 46.8 % complained of sleep disturbance, 44.3 % reported loss of appetite. All these data indicate that about half of the students surveyed are under stress due to dramatic changes in their lifestyle due to forced self-isolation. But this is a normal state at the stage of adaptation, which usually lasts several weeks.

To avoid feelings of apathy and feeling depressed and unmotivated, it is important to create a clear structure of the day. Structuring allows you to gain some control over our lives. As a measure of psycho-prophylaxis of the development of depression, the technique of filling-in a reflective journal can be used also. A person writes down his thoughts and feelings daily. Then, looking through the records, it is necessary to fix the progress and make sure that adaptive changes occur, that is, the process of re-forming continues.

**Conclusions.** Full functional adaptation to a new lifestyle usually occurs after three months. Using the techniques of psycho-prophylaxis, it is possible to make its course more psychologically comfortable and reduce the level of stress on the emotional and mental sphere.

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## PARANOID SCHIZOPHRENIA WITH CONCOMITANT HYPERPROLACTINEMIA

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Schizophrenia is one of the most severe mental disorders and well known for more than 100 years. This disease is characterized by the presence of different psychopathological symptoms, such as positive, negative, general, cognitive. This pathology has a chronic type of course and leading to severe disability and social disadaptation.

Although the prevalence of schizophrenia is only 1%, these patients occupy more than 70% of all beds in psychiatric hospitals.

The severity of schizophrenia is determined not only by the presence of positive symptoms but also by the severity of residual symptoms.

The use of atypical antipsychotics has reduced the severity of both positive and negative symptoms. However, these drugs cause neuroendocrine side effects. These include hyperprolactinemia, impaired glucose tolerance, weight gain, dyslipidemia.

The presence of these side effects significantly reduces the quality of life of patients, compliance, increases the number of refusals from therapy and relapses.

The study aimed to study the effectiveness of complex therapy for women with paranoid schizophrenia and concomitant lactorrhea.

The study was conducted in three stages. In the first stage, an initial study of the entire study population was conducted. In the second stage, complex treatment was carried out for the study group. It included therapy with atypical antipsychotics, combined with elements of cognitive-behavioral therapy.

The study contingent consisted of 43 patients with paranoid schizophrenia. The age of the study population ranged from 20 to 40 years. All patients received atypical antipsychotic therapy for more than 3 years. The contingent of research was divided into two groups. The study group consisted of patients with concomitant lactorrhea. A comparison group consisted of patients with schizophrenia and without associated lactorrhea.

All patients received atypical antipsychotic therapy. Besides, the study group received a comprehensive psycho-rehabilitation correction, which included elements of cognitive-behavioral therapy. This effect was carried out individually with each patient. Psychotherapy was carried out in the form of 15 individual sessions, lasting 50 minutes.

In the third stage of the study, the entire study population was re-examined. Even though the entire contingent of the study showed an improvement in the general condition, the study group showed a significant improvement in the results of the study.

It showed an increase in the level of resocialization and adaptation of patients to the surrounding micro and macro social. Significant dynamics have undergone indicators of self-service, socially useful activities.

Thus, we can say that a complex integrated approach showed positive results. Combination of psychopharmacotherapy in combination with psycho-educational training and cognitive-behavioral therapy, which leads to a more pronounced recovery of social activity and successful resocialization of patients.

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