



ABSTRACT BOOK



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Consequently, we can recommend well-minded labour routine and rest, doing sports, and carrying out psychotherapeutic work to decrease an emotional susceptibility of students.

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CLINIC OF HALLUCINATORY-PARANOID SYNDROME

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Introduction. As known, all kinds of childhood mental pathology are expressed in the form of distorted development, dysontogenesis or accompanied by similar manifestations. In addition, mental disorders are characterized by rudimentary, low differentiated symptomatology due to immaturity of mental functions and all morphofunctional systems of the brain [Tsirkin S.Yu., 1999]. Early manifestation of childhood schizophrenia is accompanied by social disadaptation. Until now, the issues of treatment, psychocorrection, rehabilitation and adaptation of children in schizophrenia require development, that is possible on the basis of studying psychopathological and pathopsychological disorders. All this determines the priority of studying mental disorders with the specified forms of pathology in the age aspect. The aim of the research was to study the clinical manifestations of hallucinatory-paranoid syndrome of children with schizophrenia. Object of the study: mental and behavioral disorders in children's endogenous process. Research methods: clinical-psychopathological, methods of mathematical statistics.

Materials and methods. Materials and methods: The study included 26 children examined from 5 to 12 years of age with a diagnosis of schizophrenia, a children's type.

Results of research. Among them, 5 children (19.2%) had hallucinatory-paranoid syndrome that was dominant in the clinical picture. All examined had mental and behavioral disorders. The productive symptomatology of the hallucinatory-paranoid syndrome was represented by delusion fantasies of different contents, with a predominance of reincarnation, a variety of sensostatic sensations, the appearance of which patients associates with the influence of external factors, aural, visual, olfactory and visceral deceptions of perception. The subjects of this group were in motor excitation, attention was drawn for a short time, and was exhausted. Children talked colorfully about their experiences, and general questions were answered with absurd answers or did not answer at all. The emotional background dissociated with the facial expressions of the patients, the emotionally significant experiences for the child were accompanied by hypomymia and alienation in the conversation. The emotional background dissociated with the facial expressions of the patients, the emotionally significant experiences for the child were accompanied by hypomymia and alienation in the conversation.

Conclusions. In this way, as a result of clinical and psychopathological research, 19.2% of children diagnosed with schizophrenia, the hallucinatory-paranoid syndrome is the leading and require psychopharmacotherapeutic correction.