

CLINICAL MEDICINE: EXPERIENCE AND INNOVATIONS

DOI <https://doi.org/10.30525/978-9934-26-113-8-1>

SOME FEATURES OF PSYCHOPATHOLOGICAL SYMPTOMS IN PATIENTS WITH DEPRESSIVE DISORDERS

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Depressive disorders are one of the main problems of modern psychiatric science and practice. Depressions are associated with comorbid pathological, suicidal behavior, reduced of quality of life, and social disadaptation both in patients with depressions and in their microsial environment [1, 2, 3]. According to modern studies, depressive disorders are characterized by polymorphism of symptoms, difficulty of diagnosis and resistance to therapy [4, 5]. An important factor in the development of preventive measures for depressive disorders is the study of their pathomorphosis, in particular, clinical phenomenology of depressive disorders at the modern stage [6, 7]. At the same time, a some of important issues of clinical pathomorphosis of depressive disorders remain insufficiently studied, and the data of existing studies are incomplete and contradictory [8, 9].

The aim of the study is to investigate the structure and severity of psychopathological symptoms in patients with depressive disorders at the present stage, taking into account age and gender factor.

With the observance of the principles of biomedical ethics, we have clinically examined 107 men and 138 women who applied for medical care at Vinnitsa Regional Psycho-Neurological Hospital from 2015 to 2019. The nosological structure of the contingent was as follows ICD-10 codes: F 31.3, F 31.4, F 32.0, F 32.1, F 32.2, F 33.0, F 33.1, F 33.2). The average age of the men was 34.2 ± 11.1 years, and 33.2 ± 11.4 years for women ($p=0.422$), the average duration of depression was 5.7 ± 5.8 years for men, and 4.5 ± 5.4 years for women ($p=0.064$). 3 subgroups were allocated in group of men and women

depending on the age of patients at the time of the study: up to 30 years (M1 and W1 groups, respectively), from 30 to 44 years (M2 and W2 groups, respectively), 45 years and older (M3 and W3 groups, respectively). The study was carried out using Symptom Check List-90-Revised – SCL-90-R (L. Derogatis and al., 1976). Statistical analysis of differences between groups was carried out using non-parametric Mann-Whitney test.

The general trend of the modern pathomorphosis of depressive disorders is an increase in the proportion of anxious and somatized depressions in the structure of depressive disorders [10].

These tendencies are manifested in the indicators of psychopathological symptomatology.

Quantitative values of indicators in men are as follows: somatization 0.72 ± 0.09 points in M1 group, 0.83 ± 0.20 points in M2 group and 0.97 ± 0.26 points in M3 group; obsessive and compulsive symptoms: 0.68 ± 0.45 points, 1.12 ± 0.77 points and 1.24 ± 0.85 points respectively; interpersonal sensitivity: 1.33 ± 0.19 points, 1.53 ± 0.34 points and 1.65 ± 0.37 points respectively; depression: 2.65 ± 0.79 points, 2.91 ± 0.71 points and 3.44 ± 0.44 points respectively; anxiety: 2.00 ± 0.23 points, 2.21 ± 0.38 points, 2.37 ± 0.36 points respectively; hostility: 0.31 ± 0.26 points, 0.54 ± 0.51 points and 1.78 ± 1.23 points respectively; phobic anxiety: 0.61 ± 0.15 points, 0.77 ± 0.30 points and 0.93 ± 0.30 points respectively; paranoid symptoms: 0.24 ± 0.11 points, 0.30 ± 0.16 points and 0.33 ± 0.16 points respectively; psychoticism: 0.64 ± 0.27 points, 0.70 ± 0.25 points and 0.69 ± 0.19 points respectively; Global Severity Index: 1.19 ± 0.25 points, 1.39 ± 0.37 points and 1.67 ± 0.38 points respectively; Positive Symptom Total: 45.42 ± 8.37 points, 49.37 ± 9.95 points and 55.04 ± 10.47 points respectively; Positive Symptom Distress Index: 2.34 ± 0.21 points, 2.49 ± 0.23 points and 2.73 ± 0.20 points respectively.

Quantitative values of indicators in women are as follows: somatization 0.90 ± 0.19 points in W1 group, 1.13 ± 0.38 points in W2 group and 1.92 ± 0.69 points in W3 group; obsessive and compulsive symptoms: 1.47 ± 0.69 points, 1.71 ± 0.71 points and 2.40 ± 0.66 points respectively; interpersonal sensitivity: 1.65 ± 0.31 points, 1.85 ± 0.40 points and 2.44 ± 0.49 points respectively; depression: 2.30 ± 0.76 points, 2.65 ± 0.86 points and 2.98 ± 0.73 points respectively; anxiety: 2.35 ± 0.31 points, 2.55 ± 0.40 points, 2.99 ± 0.34 points respectively; hostility: 0.15 ± 0.23 points, 0.37 ± 0.44 points and 0.90 ± 0.98 points respectively; phobic anxiety: 0.91 ± 0.26 points, 1.11 ± 0.39 points and 1.72 ± 0.50 points respectively; paranoid symptoms: 0.21 ± 0.05 points, 0.23 ± 0.09 points and 0.29 ± 0.17 points respectively; psychoticism: 0.59 ± 0.23 points, 0.59 ± 0.22 points and 0.69 ± 0.22 points respectively; Global Severity Index: 1.31 ± 0.25 points, 1.51 ± 0.35 points and 1.95 ± 0.39 points respectively;

Positive Symptom Total: 49.20 ± 7.07 points, 53.34 ± 8.36 points and 62.09 ± 7.94 points respectively; Positive Symptom Distress Index: 2.39 ± 0.19 points, 2.52 ± 0.24 points and 2.82 ± 0.22 points respectively.

In addition to high rates of depression, the examined patients showed increased levels of anxiety, obsessive-compulsive symptoms, and somatization. These manifestations determine the specificity of the modern pathomorphosis of depressive disorders with an increase in the clinical picture of manifestations of anxiety and somatic symptoms.

The general trend is the increase in psychopathological manifestations with age. So, in the youngest age groups (M1 and W1), the level of indicators of all psychopathological symptoms, except for psychoticism, and in women – also paranoid symptoms, is significantly ($p < 0,05$ or less) lower than in the middle age groups (M2 and W2) and in the older ones (M3 and W3). In middle age groups, men are significantly lower indicators of depression and hostility than in older groups, and women – all psychopathological symptoms, except for paranoid symptomatology.

Gender differences consist in significantly ($p < 0.05$) higher rates in men of depression, hostility (in all age groups) and paranoid symptoms (in M2 and W2, M3 and W3 groups), and in women – somatization, obsessive-compulsive symptoms, interpersonal sensitivity, anxiety and phobic anxiety (in all age groups). The most significant differences in indicators between men and women were found in the older age group (45 years and older), and the least significant – in the young (up to 30 years old).

The patterns we identified indicate a significant role in the structure of modern depressive disorders of anxiety, somatic, and obsessive-compulsive symptoms. The tendency for an increase in psychopathological symptoms with age reflects the natural progression of a depressive disorder, age-related decompensation of adaptive psychological mechanisms, as well as the addition of involutionary affective manifestations. At the same time, the severity of individual symptoms increases unevenly with age. Thus, hostility is increasing at the fastest rate, and in men it especially increases after 45 years, while in women the increase in the indicator of hostility with age is more uniform. In men, obsessive-compulsive and paranoid symptoms increase mainly in middle age, and in women – in older age. The least pronounced change with age in indicators of depression, anxiety and interpersonal sensitivity. Gender characteristics of psychopathological symptoms, in our opinion, are primarily associated with various psychological models in men and women.

These features require further deeper study of the pathomorphosis of depressive disorders, taking into account gender and age factors.

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