PATHOMORPHISM OF COMORBID PATHOLOGICAL DRIVES IN ED

Marina S. Artemieva, A. Arseniev, A. Lazukova & D. Shumeyko

Psychiatry and medical psychology, RUDN University, Moscow, Russia

Introduction: The topic of research was the phenomenon of pathological drives in Eating Disorder patients. Objectives To explore the syndrome of pathological drives in Eating Disorders through a comparison over a period of 35 years.

Methods: The study sample was comprised of 281 patients with Eating Disorders AN (F50.0) and BN (F50.2) comorbid with latent schizophrenia (pseudoneurotic (F21.3), cenesthopathic (F20.8) and pseudopsychopathic (F21.4)) aged 14-30 (average 20.1 years old) for 1985-2019. A follow-up, experimental psychological and clinical study was conducted.

Results: A total of 140 women were examined over the period 1985-1990 and 141 over the period 2014-2019. The prevalence of pathological drives and comorbidity were examined. All examined patients presented with pathology of will and emotion during psychological examination (Obozoda volitional disorder scale, Barratt impulsiveness scale, and Hamilton depression and anxiety scales). Additionally, the scope of pathological drives increased in the 21st century with the advent of communication technologies (internet addiction, the exchange of pathological drives and advice about their implementation through the internet), the availability of information of the illness, methods of losing weight. The combination of ED with schizophrenia led to bizarre methods of weight loss, explicit tales of purging behavior, recklessness concerning purging, and persistence of symptoms.

Conclusions: The pathomorphism of comorbid pathological drives in ED during the 35 years of observation of these patients was revealed. It was caused by social, biological, psychopharmacology factors. In 1985-1990 restrictive type of AN were observed more frequently, in 2014-2019 – purging type of AN and BN. The phenomenon of pathological drives in ED in the 21st century expanded in their manifestations to include Internet addiction, nicotine addiction, suicidal tendencies, sexual perversion, substance abuse, alcohol addiction, non-substance abuse, body modification. Pathological drives replaced each other during the course of illness or existed concurrently, exacerbating clinical presentation. BN is comorbid to more pathological drives than AN and often there are change from Eating Disorders on some other pathological drives.

* * * * *

THE INFLUENCE OF COMORBID ENDEMIC GOITER ON THE QUALITY OF LIFE OF PATIENTS WITH GASTROINTESTINAL PATHOLOGY

Marina S. Artemieva, V.I. Kuznetsov, I.S. Manyakin, E.A. Basova & L.I. Kuznetsova

Peoples' Friendship University of Russia (RUDN University), Moscow, Russia

The impairment of adaptive mechanisms of functional systems of the body plays an important role in the occurrence of gastrointestinal diseases. This impairment is caused by unfavorable ecological and radiation conditions, external stress factors, food containing carcinogens, macro - and microelements deficiency. Technogenic environmental pollution contributes to decrease in the level of iodine in the body and more severe course of thyroid pathology. Diseases of the digestive and endocrine systems and their combination will occupy one of the leading places among the existing pathologies according to the forecasts of WHO experts in the XXI century. Adaptation of the body to various environmental influences is the most important factor in the quality of life. The relevance of the study was determined by the high incidence of psychological disadaptation, borderline personality disorders and, as a consequence, decrease in the quality of life in patients with gastrointestinal pathology and hypothyroidism. The article presents the results of comparative analysis of the quality of life indications of patients with gastric ulcer and / or gastroesophageal reflux disease in combination with hypothyroidism. The Russian-language analogue of the international questionnaire SF36 was used to analyze the indicatoions of patients' quality of life. The results of the study will allow to formulate the diagnosis exactly and organize adequate, comprehensive multidisciplinary treatment.

Key words: quality of life - gastric ulcer - gastroesophageal reflux disease - thyroid gland - questionnaire SF 36

* * * * *

ADOLESCENT DRUG USE, RELATIONAL VARIABLES AND PERSONALITY FACTORS

Zsuzsanna Mirnics[1], Zsuzsanna Kövi[2], Zsuzsanna Tanyi[1] & F. Grezsa[3]

[1]Institute of Psychology, Department of Personality and Health Psychology, Károli Gáspár University of the Reformed Church, Budapest, Hungary
[2]Institute of Psychology, Department of General Psychology and Methodology, Károli Gáspár University of the Reformed Church, Budapest, Hungary
[3]Institute of Psychology, Department of Postgraduate Education, Károli Gáspár University of the Reformed Church, Budapest, Hungary

Objective: An ongoing issue in the study of adolescent drug use is the impact of family and the peer group on the problem of adolescent substance use. The present study has examined relative effects of these contexts as well as personality variables on drug use outcomes.

Method: A test battery measuring various psychological variables was administered to a representative sample of 1652 secondary school students (grades 9 and 11), 876 male(mean age=17,61, SD=0.99) and 789 female (mean age=16.73, SD=1.31). Data about relationship to parents and association with deviant peers were collected, personality dimensions such as Neuroticism and Sensation Seeking were measured. Regressional and discriminant analyses were conducted, then a decision tree model was created.

Results: Sensation seeking arose as the most significant predictor of substance use. Fatheradolescent relationship had the highest predictive value primarily in male sensation seekers. Peer effects were stronger in comparison to parental influences. In adolescent boys, contact with deviant friends and sensation seeking constituted two independent pathways to drug use.

Conclusions: Our study highlights the necessity to give consideration to sensationseeking in prevention initiatives during adolescence, as well as the need for education of parents about parenting techniques recommended during adolescence.

* * * * *

AWARENESS OF RARE DISEASES IN CHILDREN WITH NEURODEVELOPMENTAL DISORDERS: REVIEW OF PRESENT GUIDELINES AND OPPORTUNITIES FOR IMPROVEMENT

N. Ustinova[1,2], L. Namazova-Baranova[1], M. Bebchuk[2], V. Albitskiy[1], E. Vishneva[1] & G. Karkashadze[1]

[1]Research Department, Research Institute of Pediatrics and Children's Health of Central Clinical Hospital, Moscow, Russia
[2]Research Department, Research and Practical Center for the Mental Health of Children and Adolescents named after G.E. Sukhareva, Moscow, Russia

Introduction: Pediatric rare diseases (RD) have received increased attention in recent years due to greater public awareness, significantly improved understanding and new opportunities for treatment for some of them. According to international research rare diseases can be identified in 30 - 60% of children with neurodevelopmental disorders (ND): autism spectrum disorders (ASD) and disorders of intellectual development (ID). In this paper we discussthe gaps in clinical guidelines for the identification, evaluation and management of children with ND associated with RD.

Methods: Review of the Russian federal guidelines for ASD (2015; 2020) and ID (2019). Review of the Russian federal guidelines for 22q11.2 deletion syndrome (2015), 17p11.2 deletion syndrome (2015) and Smith-Lemli-Opitz syndrome (2015) that were randomly selected from RD with clinical features of ND.

Results: There are no references to RD for the management of ASD in both guidelines (2015; 2020) and only few mentions of some RD in guideline for ID. On the other side, descriptions of ND as RD manifestation are very poor and incomplete in guidelines for RD management. There are no appropriate recommendations for ND cure in these guides. The problem is that guidelines were developed by monodisciplinary working groups (ASD or ID by psychiatrists, del(22q11.2) by hematologists, del(17p11.2) by geneticists). As a result, in some cases patients with complex needs cannot receive appropriate health care.

Conclusions: Diagnosis of ND should be accepted as red flag indicator for searching of underlying RD that can be cured or treated in some cases. Awareness of health care professionals about association of ND and RD is important for early identification and appropriate health care. Multidisciplinary working groups could overcome the gap in guidelines for the management of ND and RD.

* * * * *