person has performed throughout life. Factors that determine the cognitive reserve, acquired factors that are implemented during the life of the individual and biological factors, one of which is the "gender" factor. The "gender" factor has a certain effect on the risk of developing late dementia. The proven Polo-specific differences in the structure of the brain, the dynamics of cognitive functions, which are implemented differently in men and women in ontogenesis, suggest the need for different approaches to the formation and maintenance of the cognitive reserve in men and women.

Key words: cognitive reserve - cognitive aging - aging - intellectual longevity

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NEUROFUNCTIONAL FOUNDATIONS OF NARCISSISM AS A PREDICTOR OF THE DEVELOPMENT OF PERSONALITY DISORDERS

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The term "narcissism" was introduced by Z. Freud in 1914 and originally denoted the orientation of the libido cathexis to the personality itself. Subsequently, the conceptual framework of narcissism was constantly changing. At present, the range of meanings of this concept is extremely wide: on the one hand, it is regarded as a synonym for the term "autism" (Bleiler 1911), on the other hand, it denotes a property of the psyche that is close to the concept of "field independence". Accordingly, the spectrum of possibilities for using narcissism as a diagnostic unit in the clinic is extremely wide. Moreover, due to the lack of a clear definition, this possibility is not realized at all. As a solution to this problem, in our opinion, there is only one way - an interdisciplinary approach to the study of this phenomenon. Thus, the aim of our work is to justify the presence of a morphofunctional basis of narcissism, formed on the basis of its study using pathopsychological and neurophysiological methods. Materials and methods: as an object of study, 183 people were selected with the presence of Icarus syndrome (Murray 1936), which is part of many common personality disorders (dissocial, borderline, etc.) and whose obligate sign is pronounced narcissism. All these individuals were examined by both cognitive and personal pathopsychological techniques. In addition, a cross-correlation analysis of the electroencephalogram was performed in order to determine the functional activity of the brain and the connections of its individual regions. The results of the pathopsychological examination indicate a violation in the examined group of integration of emotional and cognitive processes in the personality structure. Data of a neurophysiological examination demonstrate the presence of a predominant disruption of the right parietal lobe of the brain in the selected group of individuals. Taking into consideration that this area is the main associative zone of the II functional side according to A.R. Luria, it forms the neurobase of narcissism.

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CHARLES BONNET SYNDROME PREVALENCE IN A YOUNGER OPHTALMOLOGY OUTPATIENT POPULATION

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Background: In the literature, most of the studies on Charles Bonnet Syndrome (CBS) were performed on older populations. This study aims to determine the prevalence and epidemiology of CBS and the nature of the hallucinations of the younger group of patients from an ophthalmology outpatient clinic of a university hospital.

Subjects and methods: Twenty-eight patients were randomly chosen from the outpatient ophthalmology clinic of a university hospital, and those who agreed to participate in the study were included. First, the patients were asked if they had ever seen visions that other people cannot when they were fully awake. The patients who were experiencing this symptom were given sociodemographic questionnaire and Psychiatry Institute Visual Hallucination Questionnaire, and asked to explain their hallucinations in detail. To exclude a psychiatric disorder, the participants were made a psychiatric interview as well.

Results: The study included 19 female (67.9%) and 9 male (32.1%) participants. Five patients (17.9%) were diagnosed with CBS. Average age of the patients diagnosed with CBS was 39.4 (min.31-max.48). Three of the 5 patients (60%) with CBS noted negative emotions (fear, wince and bewilderment) about their hallucinations.

Conclusions: The prevalence of CBS (17.9%) we've found is compatible with the medical literature. CBS may also be accompanied by "relatively milder" ophthalmologic problems (myopia, astigmatism, etc.). The hallucinations which CBS patients experience could be quite distressing, and the individuals might have hard times to reveal their complaints because of the apprehension of stigmatization. To inquire this symptom during clinical examination may be the first step to help these individuals.

Key words: signs and symptoms - perceptual disturbances - hallucinations - Charles Bonnet Syndrome

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MENTAL DISORDERS AS INFLUENCING FACTORS FOR DISCORDANCES IN THE SIGNS AND SYMPTOMS OF DRY EYE DISEASE

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Dry eye disease (DED) is a multifactorial disease of the tear film and ocular surface representing one of the most common problems in ophthalmological practice. Characteristic symptoms of DED include gritty, sandy foreign body sensation as well as visual disturbances that have a negative impact on the patient's daily activities and social life. It is often assumed that the symptoms of dry eye are the main features of this disease, however, the symptoms do not always coincide with the signs and the results of diagnostic tests and the cause of this discordance in perception is still unclear. Numerous studies have been conducted in order to determine the cause of these discrepancies. Mental health disorders may be one of considerable contributing factors for dry eye symptoms and undiagnosed mental health conditions can be an influencing element for unexplained levels of DED symptoms. Depression, anxiety, stress, hypochondriasis, neuroticism, sleep and mood disorders may be associated with the exacerbation of symptoms to degrees that are not consistent with the objective signs related to tear dysfunction as well as changes in the anterior surface of the eye. Thus, a detailed medical history, thorough ophthalmological examination and referral to a psychologist or psychiatrist may be essential in the treatment of patients whose symptoms do not correlate with objective evidence of DED

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FEAR OF BLINDNESS IN PATIENTS UNDERGOING CATARACT SURGERY

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Background: Fear is a negative emotion induced by the threat of danger, pain and harm. Cataract surgery is one of the most performed surgeries in the world. The aim of this study was to investigate and analyze the predominant fears in patients undergoing cataract surgery.