



**ECNP**

*neuroscience applied*

# Regional Seminar in Neuropsychopharmacology

Odessa, Ukraine,  
09-11 October, 2015

Local organizers:

Human Ecological Health, NGO

Scientific Society of Neurologists, Psychiatrists and  
Narcologists of Ukraine



succession and phasing. The program was based on the elements of rational and behavioral psychotherapy. The patients under study successfully internalized relaxation and desensitization techniques, learnt how to express their feelings and objectively evaluate environmental factors that may influence the course of their illness and treatment of it.

**Bukanova, Tetiana**

**Shupyk National Medical Academy of Postgraduate Education, Kyiv**

**Complex treatment of asthenic, phobic anxiety and depressive symptoms in the structure of neurotic disorders**

The actuality of the planned work is conditioned by the constant increase in the incidence of nonpsychotic mental disorders, including neurotic, which combine asthenic, phobic anxiety and depressive symptoms. However, the treatment of such disorders according to many studies is not effective enough, including at the stage of hospital treatment. It is not just the presence of residual asthenic, phobic anxiety or depressive symptoms, but, above all, the delayed functional, including social recovery of these patients. However, up to the present day the solution of these tasks is not very good and complete.

The scientific novelty of this work is that for the first time there will be studied the relationship between clinical and psychopathological features and psychopathologic mechanisms of the formation of some neurotic disorders (Category F4); features of disadaptative processes with further identification of focus-targets of psychotherapeutic intervention. The implementation of the algorithm of specialized psychological educational and psychotherapeutic correction in treatment of patients with these disorders at the stage of standard treatment in hospital is of great practical importance.

The aim of the research is to improve the efficiency of treatment of patients with neurotic disorders based on studying their clinical and psychopathologic features with further identification of focus-targets of psychotherapeutic intervention by means of adding psychological educational and psychotherapeutic complex to the standard treatment in hospital. Thus, the planned thesis will contribute to solving the new problem of clinical psychiatry i.e. a quick recovery of patients with neurotic disorders at the stage of hospital treatment by adding psychological educational and psychotherapeutic complex to the standard treatment.

**Danilevskaya, Natalia**

**Zaporizhzhya state medical University**

**Subthreshold verbal suggestion for treatment PTSD patients**

This work is dedicated to study of therapeutic effectiveness and vitality of new method – subthreshold verbal suggestion for treatment patients with PTSD. The choice of therapeutic verbal formulas is conducted according to specific psychological trauma. Also the audio recording of chosen formulas is conducted; sound parameters are subthreshold – not audible – to human perception. These subthreshold verbal guidelines are layed on audio line with neutral content. Patients listen to the aforecited soundtrack with hidden subthreshold verbal formulas. One does not hear verbal guidelines, but perceive them on subconscious level. It allows preventing the induction of flashbacks. Thus patients get therapeutic effect without being reminded about psychological trauma.

**Driuchenko, Maiia**



### **Transcarpathian Regional Narcology Dispensary, Uzhhorod**

#### **Clinical observation: PTSD as a factor of affective disorders**

Clinical case. A patient is a migrant from Donetsk. Reason of a force migration in Zakarpattia - tragic death of husband as a result of battle actions. Remained with two minor children and aged parents. Migration took place 4 months after a tragedy and patient got in the situation of low level of domestic comfort, unemployment and foreign surroundings, having an own house prior to that and stable work with a sufficient income. On this background for a patient insomnia, anxiety and opinions of hypochondria maintenance began to show up. Abnormal psychology symptomatology made progress and purchased the clinically expressed forms; appeared suicidal thoughts. Ambulatory treatment by antidepressants (Paroxetine 40mg), it appeared tranquilizers (Gidazepam 100mg) ineffective. In October, 2014 a patient is hospitalized in psychiatric permanent establishment, the diagnosis of PTSD is set, through a month written in the satisfactory state (desintoxication therapy, Mianserin 60mg, quetiron 400mg). In April 2015 during a routine consultation the patient revealed a steady decline in mood, pessimistic thoughts, anhedonia and reconstruction suicidal disposition. Since depressive disorder patient repeatedly hospitalized, but during the holiday made suicide attempts (poisoning medicines). After resuscitation, activities all returned to the psychiatric hospital for two months of treatment. Psychodiagnostics depression scales revealed severe depressive disorder with psychotic symptoms. The treatment included desintoxication therapy, symptomatic therapy, restorative therapy, Amitriptyline 100mg, Gidazepam 100mg, Amisulpride 400mg, Mianserin 60mg, psychotherapeutic correction. In the process of hospital treatment the patient's condition improved significantly and independently discharged from the recommended outpatient treatment. Successfully continues outpatient treatment (Mianserin 30mg, quetiron 200mg).

### **Dymshyts, Dmytro**

#### **Karazin Kharkiv national university**

Patient T., a 52-year-old ATO combatant. The case history includes ischemic stroke, after which T. became vulnerable, prone to hysterical reactions. In 2014 witnessed his fellow-combatant's death in battle. This resulted in the development of affective-shock reaction with hysterical-depressive stupor: total weakness, shallow breathing, moaning. No somatic neurological damage has been detected. The treatment was inefficient during the first week, but subsequently rapid recovery of speech and motor functions was observed. On hearing about deaths and injuries of colleagues, T. instantly experiences dizziness, weakness, shortness of breath, and death premonitions. Diagnosis: acute reaction to combat stress developed into PTSD.

### **Fedchenko, Viktoriya**

#### **Institute of Neurology, Psychiatry and Narcology of the National Academy of Medical Science of Ukraine, Kharkiv**

A comprehensive examination of 79 persons with posttraumatic stress disorder (PTSD) was performed: 47 employees of internal affairs (IA) and 32 antiterrorist operation (ATO) combatants (military of the armed forces of Ukraine and National Guard fighters). Clinical variants of PTSD and types of disease course were determined. In employees of IA authentically prevailed asthenic, hypochondriacal and somatoform variants of PTSD and regressive type of disease course. In ATO fighters it was noted the prevalence of anxiety, dysphoric