



under the influence of stress factors. Psychological stress affects the disease in 80% of cases, and every 3rd patient considers the emotional factor as the main cause of the disease (Leblanc-Trudeau C., 2015). About 90% of patients relapse or associate debut of illness with acute or traumatic situation, and 10% - from chronic.

There were 60 patients with the diagnosis of rheumatoid arthritis reliable under our supervision. The group consisted of 53 women (88%) and 7 men (12%) of II and III level of process activity. According to the age the patients were distributed in the following way: 5 patients 21-30 years (8%), 31-40 years - 16 patients (27%), 41-50 - 18 patients (30%), 51-60 - 15 patients (25%) and 61-70 - 6 patients (10%). By educational level the patients were distributed: with secondary education - 15 patients (25%), vocational - 31 (52%), the higher - 14 (23%), by marital status: 43 (72%) patients were married, 10 (17%) - single, 5 (8%) - spouses and 2 (3%) - divorced. By occupational criterion: 8 people did not have a specific profession (13%), 22 - were workers (37%), 7 - civil servants (12%), 4 - entrepreneurs (7%) 2 - research workers (3%) and 17 - retirees (28%). Disability group included 17 people (28%), 14 (24%) - the third and 3 (4%) - the second). The lowest RA disease duration (1-5 years) was observed in 24 patients (40%), 6-10 years - in 5 patients (8%), 11-15 years - 14 patients (23%), 16-20 years - 15 patients (25%) 20 years and over - in 2 patients (3%). Joint-visceral form of RA motion was found in 25 patients (42%), 35 (58%) - impressions of the internal organs. Functional disorders of joints (FBS) I degree were detected with 10 (17%), II-III degree - 50 (83%) patients.

This patient population was examined in several stages. There were conducted phase studies of emotional state and personality characteristics of patients with RA and their degree of adaptation by means of reduced research of individual mini-cartoon methods, and then conducted a survey on the methods of diagnosis character accentuations by Leonhard-Shmishec to identify the type of character accentuations, considered as extreme variants of normal was conducted. We used diagnostic techniques of social frustration by L.I. Wasserman in modification of V. Boyko at the final stage of examination of these patients, which captures the degree of dissatisfaction major achievements. At the final stage, it was performed a comparison of the leading psychopathological syndrome bordered with mental disorders of patients RA was performed, scales describing personality traits which were studied and the level of frustration. It showed individual psychological predictors of forming non-psychotic mental disorders in these patients.

According to the studies, patients inherited a personal profile. Thus, 42 (70%) patients experienced higher scoring scales for hypochondria, depression, psychasthenia, schizoid. These changes indicate the presence of psychopathological personality changes (hipostenic type of response, depressive and anxiety disorders, hypochondriacal tendencies of anxiety somatization). 18 (30%) patients' personal profile was within the regulatory curve (T less than 70 points), which may indicate a lack of sufficient psychopathological changes and social adaptation of patients. Premorbid individually-typological features of individual patients with RA appear as accentuations and were found in 36 patients (60%).

There were identified the following types of accentuations: disturbing - 7 patients (19%), emotional - 6 (17%), distimic - 5 (14%), pedantic - 4 (11%), demonstrative, stuck and exciting - 3 (8%) and hipertym and ecstatic - 2 (6%). Social frustration of L.I. Wasserman method in V. Boyko's modification is found in 42 patients (70%), namely, a high level of frustration - 25 patients (60%); increased level of frustration - 9 (20%); moderate level of frustration 8 (20%). Nonpsychotic mental disorder that included emotionally labile (asthenic) was found with 36 patients (60%), anxiety, depressive disorders, which are characterized by the following syndromes: antenna-depressive, anxiety and depression and hypochondria (Roubille C., 2015). Among non-psychotic mental disorders more common are: emotionally labile (asthenic) disorders of 18 people (48%), anxiety disorders - 11 (32%), depression - 7 (20%).

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THE ISSUE OF NEUROPROTECTION IN TREATMENT OF ENCEPHALOPATHIES CAUSED BY ENDOCRINE DISORDERS

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Diabetic encephalopathy is a complex multi-pathological process, which is involved in the formation of various components. But the pathogenesis of these components has a number of common units. The pathogenesis of diabetic encephalopathy includes current metabolic changes, circulatory disorders, autoimmune processes, endocrine effects, leading to effects at the level of neuron damage to their death, which is the basis of diabetic encephalopathy.

The continuous research found that the processes of free radical oxidation of lipids in the body is controlled by a complex multifactorial antioxidant system (AOS), which includes a variety of enzymatic and non-enzymatic levels of protection. Lack of a mechanism of antioxidant protection can lead to peroxidation syndrome, imbalance between oxidative stress system and antioxidant protection. The research of some indices of antioxidant protection (superoxide dismutase, catalase, peroxidase) in patients with various forms of stroke has been performed. However, when studying this issue inconsistent data makes it difficult to conduct a comprehensive analysis of the nature of changes in the system POL - AOS with hemorrhagic and ischemic stroke, studies some of the individual indicators of antioxidant and lipid peroxidation in the specific forms of insufficient cerebral blood flow in patients.

Nowadays, neuropharmacology is experiencing the fastest development in its history. It is due primarily to the increasing number of progressive neurological disorders, it's further mainstreaming as one of the leading factors of morbidity, disability and mortality. According to the WHO, more than 30% of world population uses some or other neurotropic medications, and if we take into account only the EU and North America, this figure reaches 45-50%.



The problem is in the combination of efficacy and safety, but practical application of neurotropic drugs is particularly important, since the object of pharmacological intervention is the human brain - the most complicated and mysterious structure of the human body. Therefore, relatively wide range of modern neurotropic drugs, including not so many drugs that completely meet the most stringent criteria are used in neurology. This fact should be considered primarily in the development and implementation in practice of new drugs of this type of action.

Among a wide range of modern facilities neurotropic agents in recent years have attracted increasing attention of scientists. The main feature of these means is the impact on intellectual and memory functions and cerebroprotective performance. According to modern concepts, nootropics are substances of neurometabolic type of action, able to activate plastic processes in the CNS, improve energy supply of nerve cells, increase their resistance to negative factors of different etiology and positive impact on higher mental functions.

The unique pharmacological spectrum of nootropic drugs is the exceptional diversity of opportunities and prospects for their use in different areas of medicine. So this largely explains an extremely high interest in them by pharmacologists and clinicians. Piracetam has been used recently as a "gold standard". Today drugs like piracetam are up to more than half of the range of the European market nootropics, and their list continues to expand steadily. Such popularity is due primarily to the fact that it is now piracetam as compared to other drugs in this group has a maximum width of the range of neuroprotective pharmacological activity, thus provided an exceptional variety of clinical applications.

First of all we should discuss membranoprotective effects of piracetam, which are strengthened in combined medications "Thiocetam". This drug has a strong membrane stabilizing effect on the neurons of the brain. In particular, it normalizes the permeability of phospholipid layer and the ratio of cholesterol/phospholipids. As a result we can observe the increased membrane resistance of neurons to oxidative stress and pathogenic effects of free radicals. Thus, the most important clinical and pharmacological effects of "Thiocetam", as neuroprotective and antioxidant is realized. It is important that, lipid spectrum of neuronal membranes is the basis of pathological processes associated with aging brain (senile dementia, parkinsonism, etc.) A negative impact of free radical reactions is significantly increased as a result of cerebral hypoxia due to various cerebrovascular diseases. However, "Thiocetam" has a direct antioxidant effect, which is based on the activation of enzymes such as superoxidedismutase and catalase that play a key role in natural antioxidant system of the organism. Antihypoxic properties of "Thiocetam" are associated with stimulation of geksozo-phosphate and pentoso-phosphate metabolic pathways that are alternative mechanisms to support energy metabolism. The most important aspect of "Thiocetam" should be a stimulating effect on protein-synthesizing processes, which directly determines the impact of the drug on intellectual and memory functions. We know, for instance, it activates steroid-dependent transcription of genes which are responsible for protein synthesis in neurons. Effects associated with activation of exchanging information between the hemispheres of the brain, and in particular, the development of interneuron connections lead to the formation of long-term memory and learning ability. Finally, it should be noted that the comprehensive and versatile "Thiocetam" has effect on neurotransmitter processes in particular, cholinergic and glutamatergic effects, playing a key role in the intellectual and mental functions.

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STUDENTS' LEVEL OF PERSONALITY AND SITUATION ANXIETY

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Health is the main value of the human, it describes not only the condition but also the strategy of life. Mental health depends not only on the way of life, the environment and the person's attitude to his or her individual health, medicine and all factors that affect health generally.

Social educational school provides a central role of anxiety in the socialization of the person. Underlying this view it is noticed that neutral stimulation can become emotional and anxious to acquire properties through reinforcement and learning. As a result, easy arising anxiety is very stable with great difficulties in future. It can contribute to the development of both positive and negative qualities, such as aggression or excessive dependence.

It should be noted that the distribution of the state of anxiety (situational anxiety) and property of the individual (personal) is most evident in the works of C. Spielberger and R. Cattell. According to Charles Spielberger, situational anxiety occurs when an individual perceives a stimulus or situation as one that contains the actual or potential elements of danger, threat or harm. Personal anxiety does not appear directly in behavior, but the level can be determined based on how often and intensely alarm condition occurs.

Psychological studies indicate the existence of these kinds of anxiety as mobilizing and demobilizing anxiety. Mobilizing kind of anxiety is manifested in the increased activity of up to aggression; in increased appetite. Demobilizing kind of anxiety is particularly evident in the process of a stable anxiety.

The aim of this work is to study the levels of trait anxiety and situational students anxiety. The study was conducted in 2015-2016. In general 327 university students were examined. There were no significant differences by sex and age composition, place of residence, learning.

The degree of expression of anxious symptoms was studied using the Spielberger-Hanin test. It consists of 20 statements that consist of both state anxiety (anxiety, reactive or situational anxiety) and 20 to determine the expression of anxiety as dispositions, personality characteristics (property anxiety). Scale of personal anxiety and reactive anxiety