

МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ



МАТЕРІАЛИ
106-ї підсумкової науково-практичної конференції
з міжнародною участю
професорсько-викладацького колективу
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Матеріали підсумкової 106-ї науково-практичної конференції з міжнародною участю професорсько-викладацького колективу Буковинського державного медичного університету (м. Чернівці, 03, 05, 10 лютого 2025 р.) – Чернівці: Медуніверситет, 2025. – 450 с. іл.

У збірнику представлені матеріали 106-ї науково-практичної конференції з міжнародною участю професорсько-викладацького колективу Буковинського державного медичного університету (м. Чернівці, 03, 05, 10 лютого 2025 р.) зі стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

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У I триместрі вагітності супроводжувалися децидуо-трофобластичними розладами на тлі відшарування хоріону, формування ретрохоріальної гематоми, низького розташування хоріону.

Встановлена залежність між розвитком децидуо-трофобластичних розладів та частотою асоційованих із плацентою гестаційних ускладнень, ПЕ (20,0%), передчасного відшарування нормально розташованої плаценти (17,5%), синдрому затримки росту плода (10,0%) і дистресу плода (27,5%). Передчасними пологами завершились кожна третя вагітність (32,5%). 62,5% жінок основної групи були розроджені шляхом кесарева розтину. Заслуговує на увагу, що кожен п'ятий новонароджений народжувався у стані асфікції.

Висновки. Проведені дослідження підтвердили, що у вагітних із загрозою аборту пограничний репродуктивний вік, ожиріння, поєдання декількох коморбідних екстрагенітальних патологій, гінекологічні захворювання та ранні репродуктивні втрати в анамнезі, децидуо-трофобластичні розлади в ранні терміни гестації є однією із причин розвитку асоційованих із плацентою великих акушерських синдромів (ПЕ (20,0%), передчасного відшарування нормально розташованої плаценти (17,5%), синдрому затримки росту плода (10,0%) і несприятливих перинатальних наслідків.

СЕКЦІЯ 12

СУЧАСНА ДІАГНОСТИКА ТА ЛІКУВАННЯ НЕВРОЛОГІЧНИХ ТА ПСИХІЧНИХ ЗАХВОРЮВАНЬ

Ivanova N.M.

THE TRANSFORMATION OF THE PERSONALITY STRUCTURE OF MILITARY PERSONNEL AS A RESULT OF COMBAT TRAUMA. DIAGNOSTIC APPROACHES

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Introduction. The issue of personality transformation in the process of overcoming life crises is quite relevant. It is considered in various aspects and manifestations. It is timely because of the tense economic, social and political situation in Ukraine. Individuals have to adapt to such changes. This leads to crisis situations, overcoming which launches the transformations of personality and influences the overall situation in society through individual changes. Particular attention should be paid to the transformation of the military's personality, which occurs as a result of the combat trauma.

The aim of the study. This research aims to study the personality profile of servicemen with personality disorders resulting from combat trauma in the projection of two different modern diagnostic classifications of mental disorders (ICD-11 and DSM-5) based on a systematic approach to the study of individual psychological, pathological and psychosocial characteristics and taking into account the pathogenetic and pathoplastic influence of premorbid personality structure on the formation of the syndrome complex, its transformation and the possibility of reverse development. The tasks of this research are to investigate the psychopathological structure of personality disorders of military personnel developed as a result of combat trauma and to study the personality predictors of the development of these mental phenomena.

Materials and methods. The main research methods used were clinical and psychopathological, and the method of psychoanalytic primary interview. Additional experimental psychological methods are: Symptom Checklist Scale SCS-90, self-esteem regulation questionnaire (Narcissistic Inventory by F.-W. Deneke & B. Hilgenstock), semi-structured clinical interview SCID II, questionnaire of accentuated personality traits by Leonhard-Schmiszek.

Results. As it turned out at the initial stage of the study of patients of the research group, the functional state of the Self system in servicemen with personality disorders that developed against the background of combat trauma, according to the results obtained using the Denecke-Hilgenstock method, was as follows: the highest indicators were on the scales - symbiotic protection - 62%, depersonalization-derealization - 70.6%, hypochondriac Self - 60.34%, powerless Self - 48.2% and

loss of affect and impulse control - 31.03%. Thus, the state of the Self system is directly related to the performance and quality of life of military personnel. Among patients in the control group, these indicators were lower mainly on all scales, symbiotic defense - 31.5%, depersonalization-derealization - 21%, powerless Self - 13.5%, and loss of affect and control impulse and hypochondriac Self had approximately the same values, respectively - 75.6% and 32.4%. Regarding the data obtained using SCID II, the following personality disorders were diagnosed in the main group of patients: borderline, obsessive-compulsive, dependent, antisocial, narcissistic. Among the manifestations of the mental state detected by using the SCL-90-R questionnaire, in the main group of patients, the highest indicators on the scales of somatization were 70.6%, interpersonal sensitivity - 58.6%, depression and phobic anxiety - 62%. In the control group, the indicators on the somatization scale were also the highest - 78.3%.

Conclusions. As a result of using this set of psychodiagnostic methods, it was possible to conduct a more detailed diagnosis of the psychoemotional state of servicemen with personality disorders, it was possible to determine the transformation of personality as a result of trauma and its impact on the course of the disease, which made it possible to improve the selection of methods of complex therapy of mental disorders in this group of patients.

Rusina S.M.

CAUSAL RELATIONSHIP OF ADAPTATION DISORDERS AMONG FORCED LABOR MIGRANTS

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Introduction. Since 1980 scientific literature has been describing adjustment disorder as an independent phenomenon of subjective distress which is classified in ICD-10 and that arises during the period of adaptation to stressful events and significant changes in lifestyle, interfering with the productivity of social functioning. Adaptation disorder is caused by emotional and stressful factors. These factors do not threaten the physical health of a person, but cause a negative emotional pathological state that disrupts the reaction of adaptation to psychologically changed circumstances, which narrows the person's living space, makes him or her uncomfortable and requires the help of a specialist due to painful emotional experiences and, correspondingly, harms mental health.

The aim of the study. The research aims to investigate the causes of mental disorders and non-psychotic mental disorders caused by them as an independent phenomenon, namely, adaptation disorder.

Materials and methods. Clinical, psychopathological and statistical methods were used.

Results. Among the 20 migrant workers studied, the reasons that led to the illness were emotional and psychological. For instance, lack of sleep was observed in 5 women, which constituted 25%, a sharp change in social status (people with higher education performed cleaning and nursing jobs) was observed in 7 people (35%), prolonged neuropsychological stress associated with constant round-the-clock care for patients with mental disorders was observed in 8 (40%) women.

Among the physiological causes, which were also present, the most common was malnutrition. It was observed in 15 (75%) women who saved money on food ($P<0.05$) and exacerbation of somatic diseases, which concerned 25% of the study subjects.

The consequence of the adaptation disorder was a short-term condition that was observed in two women, lasted three weeks and resolved on its own without treatment. 8 labor migrants had a prolonged adaptation disorder lasting more than 2 years, for which they sought help from a specialist.

The most common condition was asthenic, especially in the first months of work, which was observed in 100% of women. The main complaints were rapid fatigue with irritability, sleep disturbance, active attention, which exhausted the person and in 12 (60%) people there was a feeling of internal discomfort with anxious expectations, which provoked lack of sleep, decreased