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METHODS OF PSYCHOTHERAPY IN CASES OF FEAR-PANIC

Resume: The article discusses modern approaches to psychotherapy of neurotic anxiety disorders (anxiety-phobic, panic and generalized anxiety disorders) based on the study of evidence-based studies.

The algorithms of the main psychotherapeutic methods used for the treatment of patients with neurotic anxiety disorders (cognitive behavioral psychotherapy, interpersonal psychotherapy, personality-oriented (reconstructive) psychotherapy) are presented.

The degree of evidence of the effectiveness of the use of specific psychotherapeutic methods and the strength of recommendations are indicated.

Keywords: anxiety-phobic disorders, panic disorder, psychotherapy of anxiety disorders, cognitive behavioral psychotherapy, interpersonal psychotherapy, personality-oriented (reconstructive) psychotherapy.

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МЕТОДЫ ПСИХОТЕРАПИИ В СЛУЧАЯХ ВОЗНИКНОВЕНИЯ СТРАХА-ПАНИКИ

Резюме: В статье рассмотрены современные подходы к психотерапии тревожных расстройств невротического уровня (тревожно-

фобических, панического и генерализованного тревожного расстройств) на основе изучения доказательных исследований.

Представлены алгоритмы проведения основных психотерапевтических методов, применяемых для лечения пациентов с тревожными расстройствами невротического уровня (когнитивноповеденческая психотерапия, интерперсональная психотерапия, личностно-ориентированная (реконструктивная) психотерапия).

Указаны степень доказательности эффективности применений конкретных психотерапевтических методов и сила рекомендаций.

Ключевые слова: тревожно-фобические расстройства, паническое расстройство, психотерапия тревожных расстройств, когнитивно-поведенческая психотерапия, интерперсональная психотерапия, личностно-ориентированная (реконструктивная) психотерапия.

Relevance. The prevalence of panic disorder (PR) ranges from 1.5 to 3.5%, social anxiety disorder (STR) - from 2.4 to 13.3%, generalized anxiety disorder (GTR) - from 4.1 to 6.6% [2]. However, the problem of anxiety disorders of TR is not only in their high prevalence, but also in frequent (up to 75%) comorbidity with other mental disorders, and comorbidity in the case of TR is not limited to one disease.

Thus, comorbidity with three other mental disorders in the case of PR is 23.5%, with obsessive-compulsive disorder (OCD) - 23%, post-traumatic stress disorder (PTSD) - 27% [1].

Despite the high prevalence of TR, only about 30% of patients actively seek help. In addition, TRS are largely colored by ethnic and cultural characteristics, and therefore the standardization of their diagnosis and treatment is very difficult.

Patients suffering from TR rarely receive timely and adequate medical care. An important problem is also the fact that patients often turn not to

psychiatrists, but to general practitioners, who often do not have sufficient qualifications for the diagnosis and therapy of TR and do not perceive them as a serious medical disease [4,5].

The situation with people suffering from TR in our country is dramatically complicated by the fact that patients with severe and prolonged course of PR or OCD are diagnosed with sluggish schizophrenia and prescribed neuroleptic therapy. A serious problem of domestic psychiatry is the lag of our medical science in the adoption of psychotherapy as an effective and equitable method of treating anxiety spectrum disorders, as well as insufficient understanding of the importance of pharmacotherapy of anxiety disorders by specialists in the field of mental disorders who do not have medical education [3,6].

For half a century of the existence of psychopharmacotherapy, several classes of psychotropic drugs have proven themselves well in the treatment of TR. Therapy of anxiety spectrum disorders has general principles, since TR have a related pathogenesis (which, apparently, is due to the high comorbidity of these conditions) associated with damage to the serotonin and gabaergic systems of the brain.

The purpose of the study. The aim of the work was to develop principles and algorithms for psychotherapeutic treatment of neurotic anxiety disorders (anxiety-phobic, panic and generalized anxiety disorders) based on evidence-based research.

Materials and methods of research. The study included 112 patients who applied for outpatient care at the AOPND. Mixed anxiety and depressive disorder was determined in all patients who participated in the study, based on the criteria of ICD-10 (F41.2). All patients were diagnosed with "neurotic disorder" based on the criteria of positive and negative diagnosis of neurotic disorders.

The results of the study. It has been established that persons with anxiety disorders have a similar personality structure in the form of pronounced

hostility; negative (catastrophic) thinking, the desire to strictly follow generally accepted norms, while being characterized by different cognitive styles.

It is shown that in people with anxiety disorders, there is a decrease in the adaptive capabilities of the body, which is eliminated during psychotherapeutic influence aimed at changing the state of the functional reserves of the body.

It is shown that various types of psychotherapeutic effects are equally effective in the treatment of patients with anxiety disorders, both according to the examination data immediately after treatment and according to catamnestic observation, but this effectiveness is lower than in the case of a differentiated choice of psychotherapy method taking into account the parameters of the patient's cognitive style.

The effect of hypnotherapy is most associated with the breadth of the equivalence range, to a lesser extent the effect is associated with field independence and practically does not depend on the flexibility of cognitive control.;

The effect of gestalt therapy is most associated with the subjects' gender independence, while it is practically not associated with a narrow range of equivalence and does not depend on the rigidity or flexibility of cognitive control;

The effectiveness of cognitive-behavioral therapy is most associated with the narrowness of the equivalence range and to a lesser extent with utility dependence. There is also a pronounced tendency to link the effect of this type of psychotherapy with the flexibility of cognitive control;

The effectiveness of short-term psychodynamic psychotherapy is most associated with gender independence, somewhat less with the breadth of the equivalence range and practically does not depend on the rigidity of cognitive control.

During the catamnestic analysis of the results of psychotherapy, it was shown that the effect of psychotherapeutic influence is least stable in persons

with a high degree of usefulness and cognitive simplicity, regardless of the type of therapy.

Conclusion. The study of the indicators of the effectiveness of psychotherapy as the degree of compliance of the structuring of the material with the parameters of the cognitive sphere of the patient allows a more complete understanding of the mechanisms of psychotherapeutic influence.

The identification of variants of the organization of cognitive style - predictors of the effectiveness of certain psychotherapeutic techniques allows for a more differentiated psychotherapeutic correction of anxiety disorders.

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