CLINICAL PHENOMENOLOGY OF ADAPTATION DISORDERS IN PEOPLE WITH COMPUTER DEPENDENCY

Starodubtseva Yu.

Kharkiv National Medical University

Summary. The purpose of the study comprehensive study of clinical-psychopathological and pathopsychological peculiarities of adaptation disorders in persons with computer dependence. Materials and methods. 147 patients with adaptive disorders (F43.21, F43.22). The main group consisted of 85 patients with signs of computer dependence according to the results of AUDIT-like tests, the control group included 62 patients without signs of addictive behavior. The average age of the examined people was 27.0 ± 3.0 years. Clinical-psychopathological, clinical-anamnestic pathopsychological, psychodiagnostic and statistical methods were used. The results of the study. The structure of computer dependence in the surveyed people of the main group consisted of obsessive surfing (46.2%); computer games (22.3%); virtual dating (6.4%); passion for online gambling (13.7%); cybersex (1.4%). In clinical adaptation disorders, people with computer dependence are dominated by reduced mood; internal stress with inability to relax; increased susceptibility to previously neutral stimuli; irritability; asthenic symptoms; loss of interest in work or study, family and friends; violation of the sleep-wake cycle. According to the psychodiagnostic survey data, the examined people of the main group are characterized by anxiety and depression manifestations by the Hospital scale; severe depressive and anxiety episodes by the Hamilton scale; high levels of situational and personal anxiety by the method of Ch. D. Spielberger, high level of expressiveness of the psychological stress by the scale of T. A. Nemchin. Conclusions. The clinical image of adaptation disorders in persons with computer dependence is characterized by reduced mood background; predilection, predisposition to affectus; alarming manifestations; hyperesthesia; violation of the sleep-wake cycle; clinical manifestations of anxiety and depression by the HADS scale; heavy depressive and anxious episodes by the HDRS scale; high levels of situational and personality anxiety; excessive psychological stress.

Key words: adaptation disorders, computer dependence, anxiety, depression, psychological stress, asthenia.

Introduction. The situation in Ukraine has recently been characterized by continuously increasing demands and psychological pressure on the population due to the effect of various mass psychogenic factors, which leads to human maladaptation in the conditions of the social crisis and the spread of behavioral disorders, first of all, illnesses of dependence [1–3].

The situation associated with addictive behavior is quite problematic for many countries in the world, including Ukraine. The reason is the radical difference between the stereotypes of thinking and the outlook of successive generations brought up in different socio-economic conditions, as well as through a protracted political, economic and social crisis [4, 5].

The medical and psychological preconditions affecting the growth of the number of persons with addictive behavior are exacerbated by the informational, technical and economic globalization and significant deformation of socio-economic relations, the formation of a prolonged stressful situation in society during the period of the global crisis. The results of scientific research show a fairly large prevalence chemical addiction associated with non-chemical one (tobacco use, alcohol consumption, etc.) with a wide range of polymorphic clinical manifestations [6, 7].

It is noted that comorbid psychiatric disorders (affective, stressful, personality) are found in 80% of patients and more. Addictive behavior in young people is of particular concern in society [8, 9].
Without access to the field of vision of specialists (psychiatrists, narcologists, psychotherapists) in the early stages of the disease, patients with neurotic disorders and addictions seek specialized assistance in situations of chronic, relapse, complications, the formation of temporary and permanent disability, delictual and suicidal behavior that contributes to the violation of social functioning, the quality of life of the patient and his micro-social environment [10–13].

The foregoing stipulated the relevance and necessity of this study.

2. Purposes, subjects and methods:

2.1. Purpose a comprehensive study of clinical-psychopathological and pathopsychological features of adaptation disorders in people with computer dependence.

2.2. Subjects & Methods for achievement of the set purpose with observance of principles of bioethics and deontology during 2016–2018 on the basis of Kharkov Regional Clinical Psychiatric Hospital No. 3 and in the Military Medical Clinical Center of the Northern region, the complex examination of 147 patients with adaptive disorders was performed (F43.21, F43.22).

The main group consisted of 85 patients with signs of computer dependence according to the results of AUDIT-like tests, the control group included 62 patients with no signs of addictive behavior. Among the surveyed main group, 43.5% were women and 56.5% were men, among patients in the control group, these figures were 53.2% and 46.7% respectively.

The average age of the examined people of the main group amounted to 27.0 ± 3.0 years, the control group – 27.1 ± 3.0 years.

In this work, clinical-psychopathological, clinical-anamnestic patho-psychological, psychodiagnostic and statistical methods of research were used.

Conflict of interests. There is no conflict of interests.

3. Results and discussion. The structure of computer dependence in the examined people of the main group consisted of obsessive surfing (Internet surfing, search for information on databases and search sites) – 45.8% of the surveyed, 22.3 ± 1.2% computer games; 5.8 ± 0.4% virtual dating; 14.1% passion for online gambling; 1.2% cybersex (using porn sites).

As the results of the clinical anamnestic study showed, the duration of the addiction in the examined people is the following: up to one year – 45.8%, 1–3 years – 36.4%, more than 3 years – 17.6%.

In the clinical picture of the adaptation violations in the examined patients, there was decreased mood (72.9% of the examined people of the main group and 74.1% of the control group); perversity, unbalance, propensity for short-term violent reactions (52.7% and 38.7% of the examined patients respectively); a feeling of anxiety, internal tension with the inability to relax (69.4% of the surveyed of the main group and 51.6% of the control group); increased vulnerability, susceptibility (32.9% and 35.4%); confusion (55.3% of the examined people of the main group and 53.2% of the control group); sensitization to external stimuli, especially during sleep and hibernation (78.8% and 74.1% respectively); asthenic symptom (84.7% and 82.3% respectively), increased weakness and fatigue under physical stress (49.1% and 54.2% respectively).

Based on clinical and psychopathological data, the following variants of adaptation disorders were identified: anxiety (47.1% of the examined people of the main group and 40.4% of the control group), neurasthenic (39.9% and 40.1% respectively), asthenic-apathetic (9.7% and 11.4%) and melancholic (3.3% and 8.1% respectively).

Regarding the data of the psychodiagnostic study for the examined patients, the clinical manifestations of anxiety and depression on the HADS scale – 71.7% of the examined people of the main group and 66.1% of the control group; severe depression (48.2% of the main group and 40.3% of the control group) and anxiety (54.1% and 43.5% respectively) on the HDRS scale; high levels of situational anxiety (44.7% of the surveyed people of the main group and 40.3% of the control group) and personal anxiety (52.9% and 50.0% respectively); excessive nervous-psychic tension (70.5% of the main group and 66.1% of the control group).

For the clinical picture of the adaptation disorders in the examined patients of the main group, vegetative-vascular paroxysms were obligatory, vegetative lability was also observed in the examined people of the control group, however, the expressed vascular crises were characteristic only for anxiety and neurasthenic variants of adaptation disorders.

For those with adaptive disorders, the most typical of the following personality traits are increased excitability and disequilibrium, proneness to conflict in relationships, vulnerability and maltreatment, lability of emotions, demonstration of emotional manifestations, anxiety, efficacy of behavior. At the same time,
for the surveyed people of the main group in the situation of impossibility of using the Internet, there were affective reactions in the form of bursts of rage, vulnerability, demonstrability, threats and image.

**Conclusions.** Thus, according to the results of the study, in clinical disorders of adaptation in people with computer dependence mood depression; internal tension with inability to relax; increased susceptibility to previously neutral stimuli; irritability; asthenic symptoms; loss of interest in work or study, family and friends; violation of the sleep-wake cycle are dominated.

The study of the features of the relationship and the interaction of addictions and neurotic pathology is important for the practical work of psychiatrists, narcologists and general practitioners as it allows differentially predict the possibility of occurrence and the degree of gravity of emotional disorders and adaptation disorders to determine the optimal scheme for their correction and prevention.

**References:**


Received: 19-Sep. – 2018
Accepted: 09-Dec. – 2018