

ATYPICAL ANOREXIA NERVOSA: FEATURES OF PREPOSITION AND PREMORBID

¹Uskov Akram Ivanovich, ²Turayev Bobir Temirpulotovich, ³Sharapova Dilfuza
Nematillayevna, ⁴Shernazarov Farrux Farhod o'g'li,

¹Siberian State Medical University, Russian Federation city of Tomsk

²Assistant of the department of psychiatry, medical psychology and narcology, Samarkand State
Medical University

³Samarkand State Medical University Clinical ordenator in the direction of psychiatry

⁴608 group students of Samarkand State Medical University Faculty of Medicine

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Abstract. *Adolescence puts high demands on human adaptation in society, which affects the formation of stable mental response mechanisms that occur during this period of life. The problem of anorexia nervosa in teenage girls is very relevant not only with the durability and severity of the dysmorphomaniac idea, but also with severe somatic complications, including reproductive ones.*

Keywords: *adolescence, atypical anorexia nervosa, dysmorphomania, diagnosis and therapy.*

Introduction. Low curability and timely diagnosis, often associated with increased detection of atypical forms of anorexia nervosa, then lead to an unfavorable therapeutic prognosis. According to the authors, atypical eating disorders are associated with a significant negative impact on mental health and a risk of suicide [1-3]. According to modern data, the accumulation of pathological prepositional factors is associated with the characteristics of the clinic and the type of anorexia nervosa course. Thus, the identification of the characteristics of prepositional and premorbid personal qualities in anorexia nervosa makes it possible to diagnose the disease at an early stage, start timely treatment, as well as predict the effectiveness of therapy [4-7]. The problem of anorexia nervosa in girls occupies a leading place in both modern medicine and society and has a huge impact on the social circles of the population. Anorexia nervosa is a disease characterized by deliberate weight loss caused and supported by the patient himself [8-11].

Violation of the body image takes on a specific psychopathological form, in which the fear of obesity is maintained as an obsessive / extremely valuable idea, and the patient considers only low weight acceptable for himself. Body weight is at least 15% lower than expected, and body mass index is 17,5 or lower [12-15]. A general endocrine disease involving the axis of the hypothalamus-pituitary glands and manifested by amenorrhea in women is mandatory. The relevance of anorexia nervosa is due not only to the high prevalence - from 0,5 to 1%, but also to the rapid development of menstrual dysfunction, which leads to infertility in the reproductive period [16-19]. In addition, due to the increase in atypical forms, low curability and timely diagnosis lead to a negative life prognosis [20]. Criteria for atypical anorexia nervosa is the absence of one or more major symptoms of anorexia nervosa, such as amenorrhea, significant weight loss, or all major symptoms in mild form have been noted. Many attempts to identify developmental risk factors are based on the study of the preposition, including. According to modern data, the accumulation of pathological prepositional factors is directly related to the specifics of the clinic and the type of anorexia nervosa course [21-24] and 32-97% of patients with

anorexia nervosa are diagnosed with personality disorder [25-28]. Currently, researchers are trying to identify "too early" predictors of anorexia nervosa, which is developing complex measures for the diagnosis and Prevention of disease prevention [29-32]. Thus, the identification of the characteristics of prepositional and premorbid personal qualities in anorexia nervosa makes it possible to diagnose the disease at an early stage, start timely treatment, as well as predict the effectiveness of therapy and the possible outcome of the disease [33-37].

The purpose of the study. To optimize diagnosis and further therapy, identify prepositional factors in adolescent girls with anorexia nervosa.

Materials and methods. 70 girls aged 15 (17, 13) were tested with normal and secondary oligo-amenorrhea diagnoses. The study involved patients with atypical anorexia nervosa with normal anorexia nervosa and borderline mental disorders. The exclusion criteria were patients suffering from personality and behavioral disorders due to brain damage (F07); schizophrenia (F20); affective pathology (F30-33, history of moderate to severe and suicidal attempts); personality disorder (F60); also with the presence of primary somato-endocrine pathology. The core group (Group I) consisted of typical typical 42 patients according to the ICD-10 (F50.0) criteria and body mass index 15,7 (16,5; 14,7) kg/m². The comparative group (Group II) includes 28 teenage girls with atypical anorexia nervosa (F50.1) and a body mass index of 18.5 (19.7; 18) kg/m². All patients approached the gynecologist about secondary amenorrhea (N91.1 on ICD-10) (Group I) and secondary oligomenorrhea (N91.4 on ICD-10) (Group II). The control group included 20 healthy teenage girls with a normal body mass index of 18 (20; 17,8) kg/m² and a regular menstrual cycle. The main methods of research were: somatic, clinical and psychopathological with neurological examination. Experimental-psychological studies were carried out. The statistical justification of differences between selected patient groups was achieved using the Mann-Whitney U - test with a maximum first-round error probability of P=0,05. The calculations were carried out in the Statistics 6.0 software package environment.

Research results. An analysis of psychopathological heredity found that, in general, 14 (33,3%) patients reported the severity of mental disorders. Mental pathology was dominated by chronic alcoholism (17%) and endogenous diseases (14,3%) (schizophrenia, recurrent depressive disorder). Of the total number of patients with atypical anorexia nervosa, 20 (71,4%) had severe psychopathological inheritance. Of these, 39,3 percent were endogenous diseases and 24 percent were chronic alcoholism. The accumulation of mental pathology in the control group was observed in 1 (5%) cases with the severity of chronic alcoholism. Thus, the accumulation rate of mental disorders in atypical anorexia nervosa was 3 times higher than usual (p<0,05) and much higher than in the control group (p<0.05). The structure of somatic pathology of first-and second-degree relatives in Group I was determined mainly by the predominance of vascular (36%) and endocrine pathology (37%), expressed in hypertension and diabetes mellitus. In atypical anorexia nervosa, a predominance of endocrine pathology (70%), mainly diabetes mellitus, has been noted as part of the somatic pathology of relatives.

Chronic gastritis prevailed in the control group in the structure of somatic pathology of relatives-3 people (15%). Summarizing the total number of somatic pathologies of patients' relatives, we can say that with ana, these diseases were detected 1,7 times more often than with the usual (p<0,05) and much more often than with the control group (p<0,05). We found that 36,3% of the mothers of Group I patients and 50% of Group II had pregnancy and fertility pathologies, much higher than the control group 5% (p<0,05). A study of typical premorbid

personality traits found that the number of Group I Girls-30 patients (71,4%) - had an epileptoid personality radical. A small percentage of the group - 8 (19%) patients-identified anxious and suspicious character traits. The rest of the Group-4 (9,5%) patients-had equally distributed different personal radicals (hysterical and emotional-labile). In most cases with atypical anorexia nervosa – 18 (64,3%) patients-the individual's sensitive-schizoid radical was identified (isolation, lack of communication, increased sensitivity, predisposition to reflection). 6 (21,4%) patients were found to have pedantry and anxiety characteristics. The rest of the Group-4 (14,3%) of patients - had psychasthenic properties. In the control group, 13 (65%) of patients had a hyperthymic personality radical, while the remaining 7 (35%) girls were distributed as follows: 2 - with hysterical characteristics, 2 - psychasthenic, 2 – emotional-labile and one patient - anxious radical. The significant predominance of mental and somatic pathology in the research groups identified in our work, as well as the presence of a high percentage of pregnancy and fertility pathology in mothers of girls with a typical disease, are consistent with studies in recent years. The predominance of the epileptoid personality radical in Girls, which is usually typical, is confirmed by the data of the authors. In the case of atypical anorexia nervosa identified in the work, the sensitive-visoid radical of the individual, according to a number of researchers, mainly determines the clinical picture of the disease, dissimulatory behavior and leads to a deterioration in the effectiveness of therapy. No significant statistical differences have been recorded between values in the control group and in both groups ($p \leq 0,05$). The percentage of pregnancy before the age of 28 is the same in all groups. In the first Group, 9 patients (40,91%) were born from the first pregnancy, and in the second Group, 7 patients (38,89%) were born. In a typical group, the first half of pregnancy was complicated by gestosis in 5 people-in 22,73% of cases. In the second half of pregnancy, gestosis was detected in 3 pregnant women-13,6%. In this group, the birth process was complicated by 3 cases – 13,63% prenatal leakage of amniotic fluid and 4 cases - weakness of Labor – 18,18%. In the atypical typical group, the first half of pregnancy was complicated by gestosis in 7 people-in 38,89% of cases. In the second half of pregnancy, gestosis was detected in 2 pregnant women-11,11%. The birth rate in mothers of patients in this group was complicated by the prenatal discharge of amniotic fluid in 2 cases – 11,11%, the weakness of the birth forces – in 3 cases – 16,67%.

Consequently, the overall pathology of pregnancy and childbirth was found in 36,33% of Group 1 patients and 50% of Group 2, which is much higher (5%) than in the control group. When studying typical premorbid personality traits, it was found that patients with normal typical (16 patients – 72,7%) are characterized by politeness, activity, purposefulness, stenic character traits, pronounced "perfectionism" and responsibility for everything related to the implementation of life goals. it is slightly affected by the microsocial group in this group. the epileptoid radicals of the individual predominated. A small part of this group-4 patients (18,2%) - identified anxious and suspicious character traits, the girls became compulsive, executive and responsible and sought to communicate. The rest of the group had 2 girls (9,09%) with equally distributed different personal radicals (hysterical, asthenic). In most cases, with atypical typical characteristic features of patients (12 patients – 66,6%) – isolation, increased sensitivity, predisposition to reflection, responsibility, suspicion, dissatisfaction. In the smaller part - 4 girls (22,2%) - the desire to communicate, hypersensitivity, anxiety, irritability, emotional lability, agility were noted. There were also features of pedantry, disgust. The rest of the group - 2 girls (11,1%) - had psychasthenic properties. It should be noted that the personal characteristics of all girls, as a rule, did not exceed the level of

accentuation and did not interfere with the adaptation of patients in society. 6 months after the start of therapy, patients' catamnesis showed that treatment was effective in 75% of normal typical and 55% atypical typical patients, leading to normalization of eating behavior, affective state, and somatic state.

According to literary data, the premorbid characteristics of patients are excessive accuracy, accuracy, rigor, emotional maturity with increased dependence on parents, a tendency to obsessive doubts, a desire for self-affirmation in combination with the inability to make independent decisions, as well as a tendency to eat alone and attitudes practiced in the family limit its size. In our study, atypical typics, unlike the usual type premorbid, where the specific strain in the study coincided with epileptoid and hysterical radicals, the sensitive individual radical dominated in combination with more irritability, a predisposition to an intrapunitive reaction. This combination largely determined the clinical picture of the disease, dissimulatory behavior and, accordingly, a deterioration in the effectiveness of therapy and an unfavorable prognosis of the disease. Currently, for the early diagnosis of eating disorders, predictors of eating disorders are being studied, psychological risk factors for the onset of eating disorders are being evaluated, as well as the prevalence of anorectic training among young women.

The authors carried out work that determined the connection between the accumulation of pathological prepositional factors and the course of the disease, the peculiarities of the clinical picture. Our study determines the exact severity of heredity in normally suffering patients, which confirms this hypothesis.

Genetic and Neuroimaging analysis conducted in recent years reveals phenotypic traits and neuropsychological traits that precede the manifestation of symptoms in children with a higher risk of habitual. In our opinion, the above studies, as well as the identification of prepositional factors and risk factors, help to make a typical and atypical typical early diagnosis and prevent complications associated with this disease.

Thus, in patients with a typical form in the premorbid, epileptoid and hysterical personality traits prevailed, and among the prepositional factors were found mental disorders of the endogenous circle (schizophrenia, recurrent depression) and chronic alcoholism, as well as somatic pathology - diabetes mellitus and pronounced severity of arterial hypertension. With an atypical typical in the premorbid, in most cases, a sensitive radical of the individual was detected, in the preposition mental disorders – schizophrenia, mental retardation, chronic alcoholism, as well as somatic pathology – hypothyroidism, diabetes, lung cancer was aggravated.

Conclusions. Thus, an important role in the development of normal and atypical anorexia nervosa is played by prepositional factors in the form of severe psychopathological and somatic heredity, pathology of pregnancy and childbirth in mothers of girls, as well as premorbid personality traits in the form of epileptoid and sensitive-schizoid radicals. The latter can be considered a negative factor that helps to form atypical manifestations of the usual clinical picture.

According to the results of the study, we can conclude that a sensitive person with an intrapunitive reaction is not very prognostically favorable in terms of the effectiveness of radical therapy. According to the results of the study, due to the premorbid properties of the epileptoid personality radical, a high effectiveness of treatment was achieved in patients with a typical form, which is most likely associated with early diagnosis. The results obtained indicate the need to further study predilection, personality traits in order to diagnose this disorder in a timely manner.

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