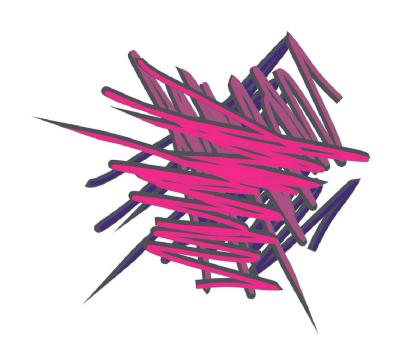
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PSYCHOTHERAPY OF PATIENTS WITH HYPOCHONDRIAC AND OBSESSIVE-COMPULSIVE DISORDERS DUE TO PERINATAL CEREBROVASCULAR LESIONS

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Abstract

Perinatal cerebrovascular lesions represent one of the important causes of the onset of mental disorders. The research addresses specific psychic pathologies of this type such as hypochondriac and obsessive-compulsive disorders. The main focus of the research is the psychotherapy for that contingent of patients. Tests and statistical trials were conducted for groups composed of persons suffering from the said disorders. Based on the results of data analysis the research reviews specific recommendations for using psychotherapeutic techniques considering their influence on clinical manifestations of hypochondria and obsessive-compulsive disorder.

Keywords: perinatal cerebrovascular lesions, obsessive-compulsive disorder, psychotherapy.

Introduction

Along with environmental factors and genetic factors, whose role in the development of psychopathology is becoming more clearly delineated, it is also impossible to exclude the importance of perinatal hemorrhagic and hypoxic-ischemic cerebrovascular lesions. The rate of the latter on average reaches 40% and progressively increases to 80-85% inversely proportional to the gestational age of babies (American Psychiatric Association, 2000; Brugha, 1995; Bustillo, Lauriello, Horan, & Keith, 2001; Fergus & Valentiner, 2009).

By directly influencing neural systems, such brain damage can be the root cause of mental disorders (Amir, Freshman, & Foa, 2000; Fontenelle et al., 2006; Hollander & Benzaquen, 1997; Ristner, Modai, & Endicott, 2000; Gonchar, 2011; Gurovich, Shmukler, & Strojakova, 2004).

Children who survive acute perinatal pathology are later considered healthy, because after a certain period of time they do not show any indicators of encephalopathic damage. However, at later stages of development disturbances of mental type may become more and more noticeable and pronounced (Anthony, Cohen, Frakas, & Gagne, 2002; Creed & Barsky, 2004; Fink,