

ІСТОРІЯ ВИВЧЕННЯ ПИТАННЯ ЕПІДЕМІОЛОГІЇ РОЗЛАДІВ ПСИХІКИ ТА ПОВЕДІНКИ СЕРЕД ПІДЛІТКІВ ЧЕРНІВЕЦЬКОЇ ОБЛАСТІ

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THE HISTORY OF STUDYING THE ISSUE OF EPIDEMIOLOGY OF MENTAL AND BEHAVIORAL DISORDERS AMONG ADOLESCENTS OF CHERNIVTSI REGION

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Русіна Світлана, Нікоряк Руслана, Ткачук Наталія. Історія вивчення питання епідеміології розладів психіки та поведінки серед підлітків чернівецької області. Актуальність дослідження. Зважаючи на те, що в останні роки ситуація в Україні характеризується безперервно зростаючою вимогливістю і психологічною навантаженістю на підростаюче покоління, що означені дією різноманітних масових психогенних факторів, були проведені дослідження серед «соціально ізольованих» соціальних і біологічних сиріт, «соціально занедбаних» підлітків через «міграційний бум» та в асоціальних родин. **Мета** студії полягає в тому, щоб визначити і систематизувати фактори, які призвели до зростання порушень в психічній сфері. **Новизна праці** полягає в тому, щоб аргументувати механізм, що викликає зміни структури психічної діяльності індивіда, коли несформована особистість (підліток), залишаючись емоційно ізольованим у соціумі від близько йому людини (найчастіше матері), на різні за тривалістю в часі періоди свого життя, потрапляє в умови психологічного дискомфорту, що сприяє виникненню неспокійних і психотичних психічних порушень та розладів поведінки. **Висновок.** Враховуючи, що загальноновизнаних епідеміологічних даних щодо поширеності розладів соціального функціонування (МКХ-10. F 94) внаслідок: емоційно соціальної депривації (ЕСД), яка виникла у дітей позбавлених батьківського піклування; біологічної депривації (БД) через істинне сирітство; соціально-материнської депривації (СМД) через трудову міграцію емоційно важливої в їх житті людини, частіше мами; сімейної депривації (СД) через непорозуміння в родині та соціально-психологічної депривації (СПД) внаслідок порушення в інтерперсональних стосунках з однолітками чи старшими середдітей різного віку в Україні немає. Усе це визначило актуальність і перспективність проведених досліджень в динаміці (2002-2006 рр.)

Ключові слова: психічна депривація, поширеність, захворюваність, підлітки, історія епідеміології психічних розладів.

The purpose of our study was to investigate the dynamics of the spread of mental and behavioral disorders among the growing population of Ukrainians.

Introduction. Socio-economic changes in Ukraine in the last decades could not but affect the younger generation of the state, namely: Mental deprivation due to insufficient satisfaction of basic mental needs (for a long time and to a rather serious degree) in socially defared biological, social, migration orphans, in asocial families and adolescents with problems in interpersonal relationships, led to a lack of emotional warmth in relationships parents – children, teen – teen, teen – society¹

A scientifically based organization of the fight against mental and behavioral disorders is impossible without accurate data on their prevalence, incidence without analyzing risk factors that affect the occurrence and course of the disease, as well as without an effective assessment of therapeutic and preventive measures^{2,3}

Unlike previous studies of «mental deprivation», the development of various classification and diagnostic approaches to its assessment can be attributed to conditionally new and actively developing in our time branches of medicine. in particular, due to the impact of changes in social conditions of life, namely:- deprivation (lack of the most necessary in life-protection)^{4,5}

¹ Bulakhova L. A., Sahan O. M., Zinchenko S. N. *Detskaya psikhonevrologiya* [Child Psychoneurology], Kyiv: Zdorov'ya, 2001, 496 p. [in English].

² Pidkorytov V. S. *Nasyl'stvo u sim'yi yak faktor ryzyku formuvannya nevrotychnykh rozladiv u ditey* [Violence in the Family as a Risk Factor for the Development of Neurotic Disorders in Children], *Arkhiv psykhiiatrii* [Archives of Psychiatry], 2002, No. 1(28), P. 8-11.

³ Gure E. I. *Psykhichni ta povedinkovi rozlady u ditey pidlitkovoho viku, pozbavlenykh bat'kivs'koho pikluvannya (klinika, diagnostyka, reabilitatsiya)* [Mental and Behavioral Disorders in Adolescents Deprived of Parental Care (Clinical Features, Diagnosis, Rehabilitation)]: Abstract of Dissertation for the Degree of Candidate of Medical Sciences: Specialty 14.01.16, Kharkiv, 2008, 18 p.

⁴ Mikhaylova E. A., Proskurina T. Yu. *Sovremennyye aspekty okhrany psikhicheskogo zdorov'ya detey i podrostkov* [Modern Aspects of Mental Health Protection for Children and Adolescents], *Arkhiv psykhiiatrii* [Archives of Psychiatry], 2001, No. 4(27), P. 21-23.

⁵ Here and below, statistical and analytical data are presented according to the manuscript of the dissertation for the degree of Doctor of Medical Sciences by Rusin S. M. *Mental and behavioral disorders in adolescents with social deprivation (causes, clinic, diagnostics, treatment)*, 2009, Chernivtsi, 358 p.

The main part. In connection with the need to obtain sufficiently accurate and comparable data on the peculiarities of prevalence, incidence of adolescent population mental and behavioral disorders in different areas of Chernivtsi region and Chernivtsi, an analysis of appeals of the population of the region for medical help in the polyclinic and hospital of Chernivtsi Regional Psychiatric Hospital for 2002-2006 years was carried out.

The choice of areas for the study is due to the fact that the prevalence and incidence of non-psychotic mental disorders (NPR), psychotic mental disorders (PPR) and behavioral disorders (PR) in different areas of Chernivtsi region, including within Ukraine, are characterized by irregularity. Registration was subject to all new and repeated cases of mental and behavioral disorders that developed during the observation period in the permanent residents of the studied areas.

The studies were conducted according to the data of hospitalizations of mental and behavioral

disorders among teenagers in Chernivtsi regional psychoneurological hospital 6, 5 departments and taken into account daily consultations by psychiatrists over the past 5 years (2002-2006 years). Among the permanent residents of the Chernivtsi region for the period from 2002-2006 there were 10390 cases of mental and behavioral disorders among the adolescent contingent, which is 10 % of the total number of adolescents. Of these, the patients with PPR were 13 (0.13 %), with PPR – 2461 (23.69 %), with behavioral disorders were 3225 (31.04 %) and in combination of mental and behavioral disorders (PPR), namely: Mixed behavior and emotions disorder (PREIE) and emotional-unstable personality disorder (ENPO) – 4691 (45.15 %) person in the ratio of PPR: PR: PPR as 1:1.45:1.9 and significantly exceeded PPR. A comparative analysis of the prevalence of non-psychotic and psychotic mental disorders and behavioral disorders for the five-year period from 2002-2006 (Table 1) has been carried out⁶.

Table 1

Prevalence of mental and behavioral disorders in adolescents Chernivtsi region for 2002-2006 years

Nature of pathology		Frequency of cases per 10000 population per year					Average year	Dynamics of prevalence
		2002	2003	2004	2005	2006		% of average annual changes
I. mental disorders								
1. Severe depressive episode with psychotic symptoms		0,19	0,29	0,30	0,17	0,32	0,25	+17,1
2. non-psychotic mental disorders	A	18,39	23,99	24,48	17,71	26,95	22,30	+11,6
	TFR	4,38	6,68	6,47	4,90	7,80	6,05	+19,5
	ZTDR	13,34	19,16	18,40	13,15	21,50	17,11	+15,3
	Eurasthenia	1,91	2,90	2,59	1,89	3,32	2,52	+18,5
2ND. Behavioral disorders								
Socialized behavior disorder		2,95	3,10	2,79	2,49	4,29	3,12	+11,36
Disorder of behavior		58,61	58,53	58,70	51,14	70,58	59,51	+5,11
III Combination of mental and behavioral disorders								
Mixed disorder of behavior and emotions		81,10	90,85	91,14	79,16	107,26	89,90	+8,06
Emotionally unstable personality disorder		1,05	1,16	1,19	0,95	1,60	1,19	+13,1

The absolute number of cases with severe depressive episode with psychotic symptoms (TDEZPS) in 2002, 2003, 2004, 2005, 2006 were: 2, 3, 3, 2, 3, respectively, with an average annual – 0.25 per 10000 population per year.

The distribution of patients with NPR, namely: With an adaptation disorder (RA) in absolute numbers amounted to 2002-2006 respectively: 193, 248, 246, 206, 252 cases with an average annual – 22.30 cases per 10000 adolescent population per year in the Chernivtsi region.

Indicators of anxiety-phobic disorder (TFR) increased compared to 2002, respectively, with a frequency of 10000 adolescents from 4.38 to 7.80 with an average annual – 6.05 cases. The absolute rates of this non-psychotic mental disorder increased accordingly from 46 cases in 2002 to 69 in 2003 and 65 cases in 2004. In 2005, there was a slight decline in this pathology to 57 cases, and in 2006, respectively, the rise to 73 cases.

The distribution of patients with mixed anxiety-depressive disorder (MDR) in absolute figures was in 2002-2006 as: 140, 198, 185, 153, 201 with an average annual – 17.11 cases per 10000 population per year.

Neurasthenia (h) was observed in the smallest number of patients with neurotic, stress-related, and somatoform disorders mainly among older adolescents and was in 2002-2006, respectively: 20, 30, 26, 22, 31 case with an average annual – 2.52 cases per 10000 population.

In 2002 and 2003, socialized behavioral disorder increased with a frequency of 2, 95 to 3.10 with an absolute number of cases: 31, 32. In 2004-2005 the number of registered patients decreased slightly and amounted to absolute numbers: 28, 29 cases, and in 2006 – increased to 40 cases with a frequency of 4.29 per 10000 population, respectively, with an average annual 3.12 cases, which was 19 times less than behavioral disorders. The absolute number of cases of behavioral disorder (RP) in 2002, 2003, 2004, 2005, 2006 were: 615, 605, 590, 595, 660 with an average annual prevalence of 59, 51 cases per 10000 adolescent population per year.

The most common among mental disorders in adolescents were mixed behavioral and emotional disorder (RPPE), which grew steadily in this age group (12-18 years) with absolute numbers in 2002, 2003, 921, 2005, 916,

⁶ Here and below, statistical and analytical data are presented according to the manuscript of the dissertation for the degree of Doctor of Medical Sciences by Rusin S. M. Mental and behavioral disorders in adolescents with social deprivation (causes, clinic, diagnostics, treatment), 2009, Chernivtsi, 358 p.

respectively: 851, 1003, 2006, 2004, 939 with the highest average annual – 89, 90 cases per 10000 population per year.

In turn, emotional – unstable personality disorder (ENRO) with absolute chicloom cases in 2002, 2003, 2004, 2005, 2006 is respectively: 11, 12, 12, 11 and 15 cases with low average annual, which amounted to 1.19 cases per 10000 adolescent population per year.

As can be seen from the tabulation1 prevalence of PPR, NPR, behavioral disorders and in combination of behavioral and emotional disorders among the population of Chernivtsi region since 2002-2006 has changed unevenly.

The average annual prevalence of severe depressive episode with psychotic symptoms (TDEZPS), neurotic stress-related and somatoform disorders (NSAIDs), namely: Adaptation disorders (RA), anxiety-phobic disorders (TFR), mixed anxiety-phobic disorders (TSDR) and neurasthenia (h) increased by 17.19 3 %, 5 18.5 %, 1.11 %, 15 % and 6 %. That is, there was a general increase in non-psychotic and psychotic mental disorders in the Chernivtsi region among the adolescent population.

The average annual prevalence of socialized behavioral disorders (RPs) and behavioral disorders (RPs) increased by 11.36 % and 5.11 %, respectively. Among adolescents with disorders of behavior and emotions, namely, in patients with RPPE and ENPO, the average

annual changes were significant and increased accordingly by 8.06 % and 13.1 %.

Thus, in the Chernivtsi region there is a tendency of increasing the prevalence of mental and behavioral disorders among the adolescent population in the study periods, namely – from 2002-2006 years.

An analysis of the incidence rates of non-psychotic and psychotic mental disorders and behavioral disorders among the permanent residents of Chernivtsi region for the period from 2002-2006 inclusive was carried out.

1871 people were registered for the first time. Of these, patients with PPR amounted to 13 people (0.69 %), patients with NPR – 608 people (32.50 %), with behavioral disorders, namely: SPR, RP – 575 people (30.73 %) and patients with disorders of behavior and emotions of ZRPIE and ENRO – 675 people (36.08 %) in the ratio of NPR, PR, mental and behavioral disorders (PPR), as 1.1:1:1.7 and significantly exceeded the PPR.

The analysis of the incidence of psychotic mental disorders (PPR), non-psychotic mental disorders (PPR), behavioral disorders (PPR) and combined mental and behavioral disorders (PPR) for the five-year period from 2002-2006 included showed an increase in these disorders among adolescents of Chernivtsi region, as seen from the table 2.

Table 2.

Incidence of mental and behavioral disorders among adolescents of Chernivtsi region for 2002-2006 years

Nature of pathology		Frequency of cases per 10000 population per year					Average year	Dynamics of disease
		2002	2003	2004	2005	2006		% of average annual changes
I. mental disorders								
1. Severe depressive episode with psychotic symptoms		0,19	0,29	0,30	0,17	0,32	0,25	+17,1
2. non-psychotic mental disorders	PA	4,57	4,45	3,58	2,75	5,24	4,12	+3,67
	TFR	1,81	2,42	1,59	1,29	2,14	1,85	+4,56
	ZTDR	3,24	6,68	4,58	5,07	6,42	5,20	+24,54
	Neurasthenia	0,48	0,97	0,40	0,43	1,07	0,67	+30,73
2ND. Behavioral disorders								
Socialized behavior disorder		0,76	0,40	0,30	0,60	1,28	0,67	+17,11
Disorder of behavior		9,82	10,16	9,95	9,63	12,83	10,48	+7,66
III Combination of mental and behavioral disorders								
Mixed disorder of behavior and emotions		11,91	12,58	13,13	11,60	16,04	13,05	+8,67
Emotionally unstable personalitv disorder		-	0,19	-	0,09	-	0,14	-26,32

The absolute number of PPR cases was in 2002, 2003, 2004, 2005, 2006-2, 3, 3, 2, 3, respectively. The distribution of patients with RA in absolute figures for the years under consideration was: 48, 46, 36, 32,49 people, respectively, with an average annual 0.25.

The absolute number of cases with TFR (by years): 19, 25, 16, 15, 20 cases with the average annual – 1.85. The distribution of patients with ZTDR was significantly higher compared to previous diseases and amounted, respectively, from 2002-2006 years – 34, 60, 46, 59, 69 people (absolute numbers) with an average annual 5.20 cases per 10000 adolescent population per year.

Incidence of neurasthenia has doubled in comparison in 2002, 2003, 2004, 2005, 4 as 5, 10, 2006, 5, 10 cases, respectively, with the average annual rate of 0.67 per 10000 adolescent population.

Patients with SRP in accordance with the years considered were 8, 5, 3, 7, 12 people with an average annual – 0.67. The distribution of patients with RP in

absolute figures 2002, 2003, 2004, 2005, 2006 as 103, 120, 100, 112, 105 people, respectively, with an average annual – 10.48 cases per 10000 population per year.

The absolute number of cases of SLE was in 2002, 2003, 2004, 2005, 2006, respectively: 125, 130, 132, 135, 150 people with an average annual 13,05.

The number of patients with ENRO who fell ill for the first time in years, which are taken into account (2002-2006) was low and went down in 2005 compared to 2003 with the average annual – 0.14 cases per 10000 adolescent population.

As can be seen from Table 3.1.2, the lowest frequency of cases per 10000 population per year for PPR was in 2005, and the highest – in 2006 years. In relation to RA, the lowest rate was observed in 2005, and the highest in 2006 in the ratio of 1:1.5. A similar pattern was observed in all clinical forms, namely, the highest incidence of cases was in 2006, with the exception of the ENRO, which gave a negative value.

However, despite the individual decrease in morbidity in some years, the overall incidence rate has increased. The

average annual incidence of PPR (TDEZPS), NPR: RA, TFR, ZTDR, N increased by 17.1 %; 3,67 %; 4,56 %; 24,54 %; 30.73 %. The incidence of PSA, RP, and ZRPIE increased by 17.11 % on the average annual indicator; 7.66 % and 8.67 % respectively. The incidence of ENRO decreased by 26.32 %. Due to the significant fluctuations in the incidence among the population of rural areas and the city of Chernivtsi, there was a need to study the above indicators separately in the city and village. Among the permanent residents of Chernivtsi and rural areas of the region for the period from 2002-2006 inclusive, the average annual incidence of PPR was respectively 0.48 and 0.20 cases per 10000 inhabitants per year in a ratio of 2.4:1.

Of all reported cases with NPR, the average annual incidence was almost the same in Chernivtsi and rural areas of the region and was respectively 11.31 and 12.18

in almost the same ratio of 1:1.1. The incidence for the period from 2002-2006 in patients with PPR in the city of Chernivtsi and rural areas was 23.60 and 19.00 cases per 10000 inhabitants per year in the ratio of 1.2:1.

The dynamics of the average annual incidence of PPR, NPR and PPR was 36.36 % in Chernivtsi, respectively; 20.37 % and 8.02 %. In rural areas of the region there was an increase in the average annual incidence of PPR, NPR, PPR by 1.47 %; 7,77 %; 7.09 % respectively (table 3.).

Analyzing the obtained data, we can note that in Chernivtsi region there is a negative trend of growth of all indicators from 2002-2006 both in the city and in rural areas with a predominance of PR, PPR, which made up 42.23 cases per 10000 inhabitants to 35.03 in rural areas in the ratio of 1.2:1.

Table 3.

Incidence of mental and behavioral disorders among adolescents from rural areas and Chernivtsi for 2002-2006 years

Nature of pathology	Frequency of cases per 10000 population per year				Average year	Dynamics of disease	
	2002	2003	2004	2005		2006	% of average annual changes
C. Chernivtsi							
1. Psychotic mental disorders (Severe depressive episode with psychotic symptoms)	0,22	0,67	0,48	-	0,54	0,48	+36,36
2. Non-psychotic mental disorders (RA, TFR, ZTDR, N)	8,86	12,80	9,39	9,42	16,08	11,31	+20,37
3. Behavioral disorders (RPR, RP) The combination of mental and behavioral disorders (ZRPIE, ENRO)	31,97	20,43	22,87	0,48	42,23	23,60	+8,02
Rural areas							
1. Psychotic mental disorders (Severe depressive episode with psychotic symptoms)	0,17	-	0,17	0,27	0,18	0,20	+1,47
2. Non-psychotic mental disorders (RA, TFR, ZTDR, N)	10,74	15,81	10,68	9,61	14,08	12,18	+7,77
3. Behavioral disorders (RPR, RP) The combination of mental and behavioral disorders (ZRPIE, ENRO)	27,29	35,36	31,54	0,80	35,03	19,00	+7,09

In the same relationship, the NPR met more often. In turn, the incidence rate of PPR was three times higher in the city of Chernivtsi compared to the same indicator in rural areas and amounted to 0.54 and 0.18 cases per 10000 population per year. Thus, in Chernivtsi there is a noticeable prevalence of the incidence of PPR, NPR, PR and PPR in comparison with rural areas. For a more complete and objective study of the prevalence of non-psychotic and psychotic mental disorders and behavioral disorders, a comparable analysis of the indicators of hospitalization of disorders studied in the Chernivtsi region for 2002-2006 years was conducted. Of the 10390 cases of non-psychotic and psychotic mental disorders and behavioral disorders registered

in the 5-year period from 2002-2006 inclusive in Chernivtsi region, 861 (8.29 %) person was hospitalized in the regional psychiatric hospital against 9529 (91.71 %) people who were treated on an outpatient basis, which is a significantly greater proportion of patients, which psychiatric service Chernivtsi region are served on an outpatient basis.

Among the hospitalized 1.51 % were patients with PPR; 17.42 % – with NPR and the highest percentage – 81.07 % were teenagers with PR and PPR. Patients with psychotic mental disorder, namely – with a severe depressive episode with psychotic symptoms due to impaired consciousness were immediately hospitalized in the regional psychiatric hospital (Table 4).

Table 4

Trends in hospitalization of mental and behavioral disorders among teenagers of Chernivtsi region for 2002-2006 years

Nature of pathology	Frequency of cases per 10000 population per year					Average year	Dynamics of hospitalization % of average annual changes
	2002	2003	2004	2005	2006		
1. Psychotic mental disorders (Severe depressive episode with psychotic symptoms)	0,19	0,29	0,30	0,17	0,32	0,25	+17,1
2. non-psychotic mental disorders (RA, TFR, ZTDR, N)	2,29	3,48	2,98	2,58	3,21	2,91	+10,0
3. Behavioral disorders (RPR, RP) The combination of mental and behavioral disorders (ZRPIE, ENRO)	9,15	13,16	14,53	14,44	16,26	13,51	+19,43

Table 4 shows that the highest incidence of cases per 10000 population per year was observed among patients with PPR in 2006 and amounted to 0.32 in relation to 0.19 cases in 2002 in a ratio of 1.7:1 with an average annual rate of 0.25. There was also an increase in the average annual by 17.1 %.

The highest number of patients with NPD was admitted in 2003-36 people, and the lowest – in 2002-24 people, with a case frequency of 3.48 and 2.29 respectively. Despite fluctuations in the absolute dynamics of hospitalizations in 2002, 2003, 2004, 2005, 2006, namely: 24, 36, 30, 30, 30, the average annual rate was 2.91 cases per 10,000 population, thus indicating a 10 % increase in hospitalization.

The absolute number of cases of hospitalization of patients with PBD and combined mental and behavioral disorders (MBD) in 2002-2006 was 96, 136, 146, 168, 152, respectively, with an average annual rate of 13.51 cases per 10,000 adolescents per year.

Thus, the highest dynamics of hospitalisation (+19.43) was observed among patients with a combination of mental and behavioural disorders, namely, among patients with PID.

Analysing the data obtained, it can be noted that in the Chernivtsi region there is a general tendency to increase the prevalence, morbidity and hospitalisation of patients with complicated forms of mental and behavioural disorders due to acute or prolonged psych traumatic exposure, more often among adolescents with different forms of mental deprivation, namely adolescents with affective and behavioural disorders were mostly boarding school students, among whom 20 % (32) were adolescents with deprivation of parental rights due to migration, the second most frequent were adolescents from the group of social and maternal deprivation.

Unfortunately, the percentage of such adolescents seeking help from doctors is increasing.

The prevalence of mental deprivation among adolescents in the Chernivtsi region emphasizes the importance of a comprehensive approach to studying this problem, as the formation of mental functions in childhood is influenced by a powerful multifactorial factor, namely raising a child in a harmonious or disharmonious family (for adolescents with family deprivation), or outside the family, which includes social (ESD) and biological orphans (BA), adolescents temporarily living in dormitories due to study (SPD) and 'migration orphans' (MOR).

Conclusions. The growth of epidemiological indicators over the years under study is primarily associated with psycho-emotional tension in society among all segments of the population and has become the most common psychological problem of adolescents who are currently forming or are in the process of forming as a personality⁷.

Thus, knowledge of the true prevalence of mental and behavioural disorders among adolescents, the need for emergency hospitalisation and risk factors for these disorders in different regions of Ukraine, and in particular in Chernivtsi region, is necessary for effective prevention and treatment measures.

Prospects for further research. Given the burdens on the psyche of adolescents associated with hostilities on the territory of Ukraine, there is a need to study the current prevalence of mental pathology in the Chernivtsi region.

Світлана РУСИНА – кандидат медичних наук, доцент кафедри нервових хвороб з психіатрією та медичною психологією ім. В. П. Савенка Буковинського державного медичного університету. Сфера наукових інтересів: розлади психіки та поведінки у підлітків; психічні розлади внаслідок органічного ураження центральної нервової системи; психогенні неспихотичні та психотичні психічні розлади. Автор та співавтор понад 100 наукових праць, серед яких 3 монографії, 8 підручників та навчальних посібників, 90 статей та тез доповідей, 3 патенти, 3 інформаційні листи.

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Наталія ТКАЧУК – лікар-гінеколог дитячого та підліткового віку. Місце роботи. Міська дитяча поліклініка м. Чернівці. Сфера наукових інтересів: поведінкові розлади у дітей та підлітків жіночої статі. Автор та співавтор 5 наукових праць.

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⁷ Rusina S. M. Psyhichni ta povedinkovi rozlady u pidlitkiv iz socialnoyu deprivatsiyeu (prychyny, klinika, diagnostyka, likuvannya) [Mental and behavioral disorders in children with social deprivation (causes, clinic, diagnostics, treatment)], avtoref. doc. dys., 2009, P. 20 [in Ukrainian].