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DEPRESSION AND ALCOHOL ABUSE IN COMBATANTS OF ANTITERRORIST OPERATION AND RADIATION EMERGENCY SURVIVORS

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Background and Aims. Depression and alcohol abuse are widespread among combatants of Antiterrorist operation / Joint Forces Operation (ATO/JFO) in Donbass and Chornobyl catastrophe survivors. Objectives are to optimize the psychiatric care for ATO/JFO combatants and Chornobyl liquidators with depression and alcohol abuse through theoretical substantiation, development and implementation new principles and algorithms for diagnosis, treatment and prevention.

Methods. 160 ATO/JFO combatants and 81 Chornobyl catastrophe survivors with depression associated with alcohol abuse were comprehensively examined with clinical-anamnestic, socio-demographic, clinical psychopathological and somatoneurological, psychodiagnostic, neurophysiological and neuroimaging methods at 5 stages: 1) screening; 2) inclusion; 3) randomization; 4) treatment and 5) catamnestic (follow-up) observation.

Results. In combatants depressive-hypochondric, asthenic-depressive, and anxiety-depressive syndromes dominated. They had personality deformation, irritative changes on EEG, and cerebral vessels changes. In survivors there is an excess of depression with progressive course, personality changes with psychosomatic pre-disposition, comorbidity with cerebrovascular pathology, neurocognitive deficits and high frequency (24%) of secondary alcohol abuse. Comprehensive social, psychological-psychiatric, medication and somatoneurological help on the basis of a biopsychosocial paradigm was elaborated and successfully implemented.

Average scores of depressive symptoms as assessed by the Hamilton Rating Scale for Depression (HRSD)

Symptoms	n=160
Depressive mood	2.36
Feeling guilty	2.11
Suicidal intentions	0.87
Early insomnia	1.81
Middle insomnia	1.70
Late insomnia	0.12
Working capacity and activity	2.85
Delay	2.00
Agitation	0.83
Mental anxiety	1.16
Somatic anxiety	2.66
Gastrointestinal symptoms	0.54
General somatic symptoms	0.48
Genital symptoms	0.11
Hypochondria	2.11
Weight loss A	1.45
Weight loss B	0.12
Criticism (insight)	0.20
Daily oscillations A	1.31
Daily oscillations B	0.13
Depersonalization and derealisation	0.14
Paranoid symptoms	0.09
Obsessive and compulsive symptoms	1.23
Total average score	26.38



Conclusions. The depression and alcohol abuse comorbidity in combatants and Chornobyl catastrophe survivors dramatically decreased their quality of life, increase the working days lost, disability and suicidal risk. The proposed diagnostic complex and differentiated approaches to treatment, prevention and medical and social rehabilitation may increase the level of medical care for the ATO /JFO combatants and Chornobyl catastrophe survivors with depression associated with alcohol abuse.