

the therapeutic outcome for the patient's benefit.

Objectives: to study the psychological profile of patients respondent and non-respondent to placebo; to study the factors that have an impact on the magnitude of placebo response; to study the autonomic profile of patients respondent and non-respondent to placebo; to determine sensitivity to placebo; to develop a screening test to estimate the sensitivity to placebo.

Materials and methods: Subjects: a group of 15 patients with chronic migraine, selected according to HIS 2004 criteria, with average age of 29.9 ± 2.6 years. Pain induction: pain was induced experimentally by means of the tourniquet technique. Drugs: for the placebo condition, calcium gluconate was administered; for analgesic control condition was used baralghetas.

Results: This group was divided into respondent and non respondent to placebo subgroups. As criterion of division had served the decrease of the pain reported degree between control condition of natural flow and the placebo condition, with at least 10%. In the group respondent to placebo (8 patients, 53.3%), during the placebo condition, pain decreased by 23.17% ($p < 0.001$) and pain tolerance value increased by 28.4% ($p < 0.05$) compared to control condition of natural flow. For the SCL90 questionnaire scale were obtained higher degrees of non-respondents to placebo in comparison with respondents to placebo for the following scale: depression (2.03 ± 0.01 in comparison with 1.35 ± 0.08 , $p < 0.001$), anxiety (1.7 ± 0.04 in comparison with 1.11 ± 0.24 , $p < 0.05$), psychotic scale (1.45 ± 0.06 in comparison with 0.98 ± 0.2 , $p < 0.05$). Higher degrees of non-respondents to placebo were obtained on the following scales of autonomic profile (Ion Moldovanu 2011): anxiety and panic attacks (16 ± 0 in comparison with 11.5 ± 1.4 , $p < 0.01$), thermoregulation (40.5 ± 5.9 in comparison with 20.33 ± 3.4 , $p < 0.05$). Degree of suggestibility was obtained higher among respondents to placebo compared to non-respondents.

Conclusion: In patients with chronic migraine the presence of placebo response depends on anxiety, depression and the degree of suggestibility. Thus it is possible to perform a screening test containing questions from the questionnaire scales used, where there have been registered statistically significant differences between the groups respondent and non-respondent to placebo.

Keywords: placebo effect, suggestibility, pain, chronic migraine.

MIGRAINE ASSOCIATED WITH SOMATOFORM DISORDERS – CLINICAL AND PSYCHOLOGICAL ASPECTS

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Introduction: Migraine is a common disorder that imposes a large personal burden on sufferers. According to the World Health Organisation, the prevalence of migraine in 2011 was estimated to be 11%. There is a great number of population-based studies that have reported an association between various psychiatric conditions and migraine. One of these psychiatric conditions is represented by the group of somatoform disorders. The coexistence of comorbid conditions lead to further disability of migraine sufferers in all aspects of their daily lives.

Objective: The goal of this study was to determine the cephalalgic, autonomic and psychological particularities of the patients that present migraine in association with somatoform disorders.

Methods: This was a case control study involving 32 migraine patients (mean age $44,13 \pm 1,39$ years), selected during the period of 2011 from the National Neurological and Neurosurgical Institute, Mol-

dova. Migraine was diagnosed using the International Headache Society criteria. Personality traits of the patients were analysed using the Symptom Checklist-90 questionnaire (SCL-90). Somatoform disorders were diagnosed using the DSM-IV TR criteria. In order to evaluate the autonomic disorders, a special questionnaire – The Autonomic Profile (Moldovanu, 2011) was performed. The total number of patients was divided in two groups, group I – the patients who presented a high level of somatoform disorders (12 persons) and group II – the patients who presented a minimal level of somatoform disorders (20 persons). Statistical analysis of data was performed in order to establish the difference between these two groups findings.

Results: The patients from group I showed significantly higher intensity of headache (measured on a 0–10 Numeric Pain Rating Scale) than the patients from group II ($7.83 \pm 0.39 - 9.42 \pm 0.18$ vs $4.70 \pm 0.34 - 7.15 \pm 0.35$, $p \leq 0.01$). Also, the migraine attack duration was different between the groups ($6.17 \pm 0.74 - 35.00 \pm 3.3$ hours vs $4.50 \pm 0.21 - 11.85 \pm 2.84$ hours, $p \leq 0.01$). Talking about psychological findings, the patients from group I showed higher SCL-90 scores than the patients from group II on the following personality traits: obsessive – compulsive (score 0.57 ± 0.07 vs 0.38 ± 0.05), depression (score 1.10 ± 0.14 vs 0.53 ± 0.06) and anxiety (score 1.03 ± 0.09 vs 0.58 ± 0.09) ($p \leq 0.01$). Regarding the autonomic disorders, they were certainly more expressed in the patients from group I, fact that caused a higher disability score for this group (8.92 ± 0.45 vs 4.35 ± 0.64 , $p \leq 0.01$).

Conclusions: There is a high influence of the somatoform disorders, as a comorbidity of migraine, on the cephalalgic, autonomic and psychological particularities of the patients, the final result of this association of diseases causing a significantly higher degree of disability.

Key-words: migraine, somatoform disorder, psychogenic symptoms.

ANXIETY IN PATIENTS AFTER CESAREAN SECTION

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Introduction: Depression is a frequent consequence of cesarean section. In the same time, even if some women don't suffer from post-cesarean depression, the majority of them present anxiety signs, especially in the immediate postoperative period.

Aims: to estimate the level of anxiety in patients with cesarean section. Evaluation of anxiety level in patients before cesarean section. Evaluation of anxiety level in patients with cesarean section in the confinement and late postoperative periods.

Methods: The study included 100 patients, who were submitted to cesarean section. The first part of the study was performed during the early postoperative period (confinement period) and the second part (late postoperative period) – 6 months later after the cesarean section.

Estimation of state and trait anxiety was performed by the means of Spielberger-Hanin test.

Results: Trait anxiety was light in $76,0\% \pm 4,27$ patients, moderate – in $23,0\% \pm 4,20$ cases and severe – in $1,0\% \pm 0,99$ cases.

Confinement period: The majority of patients presented a moderate ($58,0\% \pm 4,93$) and a severe state of anxiety ($14,0\% \pm 3,46$) during the first days after cesarean section.

It results that the level of state anxiety in the majority of cases depends directly upon postoperative stress and not upon by the level of trait anxiety.