



DEPRESSION IN PRESCHOOL CHILDREN WITH BEHAVIORAL DISORDERS

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Depressive and behavioral disorders in preschool children represent a frequently underdiagnosed comorbidity with substantial implications for emotional development and social adaptation. The atypical clinical presentation and symptom overlap hinder early diagnosis and delay adequate therapeutic intervention. The study investigates the prevalence of depressive episodes in preschoolers with behavioral disorders, correlating findings with specific psychosocial and clinical risk determinants. The study included 50 children aged 5–8 years, hospitalized in the pediatric psychiatry department of SCP Codru. Diagnoses of depression and behavioral disorders were established per DSM-5/ICD-10 criteria. Assessment tools included CDRS-R/QUIDS. A mixed-methods approach involved clinical evaluation, statistical analysis, and caregiver interviews. Within the studied cohort, 62% of children exhibited clinically significant depressive symptoms, while 84% presented oppositional or aggressive behaviors, reflecting a high prevalence of these disorders. Comorbidity between depression and behavioral disturbances was notably higher in boys, affecting 76% of cases, as well as in children from socioeconomically vulnerable backgrounds, 28% demonstrated moderate to severe risk of social withdrawal and self-deprecating ideation, underscoring the critical need for timely, targeted psychosocial and clinical interventions to enhance prognosis and developmental outcomes in this vulnerable population. Depression linked to behavioral disorders in early childhood is a significant clinical issue requiring multidisciplinary approaches. Screening and early psychotherapeutic interventions (CBT, family therapy, psychoanalysis) are essential to prevent chronic symptoms and support social integration.

PROTECTING NEUROLOGICAL PATIENT CONFIDENTIALITY IN THE DIGITAL ERA: BETWEEN INCREASED VULNERABILITY AND ETHICAL RESPONSIBILITY

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In today's digital era, technological progress has greatly advanced neurology, but also introduced concerns about safeguarding patient data privacy. Such data is extremely sensitive, making its protection vital is crucial to avoid discrimination and preserve confidence in medical services. Identifying the ethical and legal challenges related to protection of neurological patient data in the context of digitalization, with a focus on confidentiality and the doctor–patient relationship. The study consists of a detailed analysis of about 20 scientific materials in the field of bioethics and medicine, selected from international databases such as PubMed, Google Scholar and IBN. The sources were chosen based on relevance and timeliness, using the keywords: "bioethics", "neurological patient", "confidentiality", "digital era". The neurological patient may present cognitive, language, or consciousness impairments, requiring a cautious approach to data. Otherwise, lack of protection may lead to labeling, affecting employment, social integration, dignity, and the doctor–patient relationship. Such a patient may raise doubts about informed consent, involving the legal representative person or family. Medical staff must respect confidentiality under the General Regulation on Data Protection, Health Protection Law No. 411-XVI/1995, and Law No. 263-XII/2005 of Republic of Moldova. Access to data is allowed only to authorized persons and only as needed for care. 1. The sensitive nature of neurological patient data requires strengthening protection through anonymization techniques to prevent stigmatization and harm to the doctor-patient relationship. 2. Confidentiality is both a legal right and a moral duty to respect patient autonomy and dignity.