



MENTAL HEALTH ASPECTS IN THE CONTEXT OF ORGAN TRANSPLANTATION IN THE REPUBLIC OF MOLDOVA

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Transplant medicine in the Republic of Moldova involves numerous psychological challenges for patients, involving significant risks of depression, anxiety and post-traumatic stress, which influence psychosocial adaptation and therapeutic outcomes with the need for specialized psychological support. The study purpose is to evaluate psychological problems in transplant patients from the Republic of Moldova and determine their impact on therapeutic adherence and post-operation quality of life. The analysis is based on the specialized literature of mental health and on the available information on patients who have benefited from kidney and liver transplantation in the Republic of Moldova. The parameters included the prevalence of depression, anxiety and cognitive disorders. The analysis was performed using descriptive statistics. A detailed review of the literature revealed that depression is a significant challenge, manifested by loss of interest in daily activities and feelings of worthlessness. The anxiety is manifested by persistent fear of rejections of the transplanted organ and excessive concerns about health. Cognitive disorders, such as difficulty concentrating, impaired memory, and periodic confusion, have been identified as factors that compromise the appropriate management of postoperative treatment. All of these psychological problems negatively influence therapeutic adherence, social integration, and overall quality of life. The hypothesis regarding the negative influence of psychological disorders on transplant outcomes and treatment adherence was validated. It is imperative to integrate organized psychological support into current medical practice for transplant patients in the Republic of Moldova.

DEFICIT SYMPTOMS IN SCHIZOPHRENIA - MECHANISMS, ASSESSMENT, AND THERAPEUTIC INTERVENTIONS

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Schizophrenia is a complex neuropsychiatric disorder with severe functional impact. Deficit symptoms, such as affective flattening, anhedonia, and avolition, profoundly affect patients' quality of life and respond poorly to standard treatments, requiring increased attention in clinical management. The study examines negative symptoms in schizophrenia: neurobiological mechanisms, assessment, and treatment options, highlighting their impact on patients' functioning and prognosis. The study examines assessment tools for negative symptoms (PANSS, SANS, NSA-16, BNSS, CAINS), the efficacy of atypical antipsychotics, adjuvant treatments (antidepressants, modafinil), and psychosocial interventions (cognitive-behavioral therapy, cognitive remediation), based on clinical guidelines and recent studies. Negative symptoms have a complex neurobiological basis, involving fronto-striatal dysfunction and structural abnormalities in frontal and temporal regions. Conventional antipsychotics show limited efficacy, but cariprazine has proven superior to risperidone in alleviating persistent negative symptoms. Adjuvant treatments (antidepressants, glutamatergic agonists) may provide moderate but inconsistent benefits. Psychosocial interventions (cognitive-behavioral therapy, social skills training), combined with pharmacotherapy, improve social functioning, motivation, and quality of life, reducing the overall disease burden. Negative symptoms - a major therapeutic challenge in schizophrenia. An integrated approach combining pharmacotherapy with personalized psychosocial interventions can improve functioning and quality of life. Family involvement and continuous monitoring are essential. Better therapies are needed.