

Aim of the study. The purpose of the research is to identify the social functionality and the needs of people suffering from severe mental illnesses, as well as to elaborate recommendations based on the detected needs.

Materials and methods. - Historical analyses of illnesses and care - Interview - Study and analysis of the scientific literature - Quantitative and qualitative processing of results

Conclusions. SMI is a current public health problem with a high incidence and prevalence. It leads to a high rate of disability which eventually leads to the disintegration of people within the society. Recovery requires great efforts, a multidisciplinary and holistic approach. It is a social, family and personal burden, which leads to financial, psychological and moral damage. People do not have friends and social network and the results showed this fact. People are rejected from family and society and they feel abandoned. So there is still a long way to go to rehabilitate people with SMI and integrate them into the community.

Key words: severe mental illnesses, mental health community, social functionality, social integration.

165. CLINICAL-PSYCHOLOGICAL STRUCTURE OF PERSONALITY DISORDERS

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Introduction. In recent decades there was considerable interest in psychiatrists, psychologists, and family physicians regarding personality disorders' (PD) problem. Recent researches estimate that PD are an widespread psychopathological condition (the prevalence being estimated between 7.3% and 15.7% in general population). PD always starts during a young adult age. PD is not responding well to medication and is more effectively treated by psychotherapy. Patients rarely come for getting help to a specialist. According to DSM-5, PD is an enduring pattern of inner experience and behavior that deviates markedly from the expectations of the individual's culture, is pervasive and inflexible, has an onset in adolescence or early adulthood, is stable over time, and leads to distress or impairment.

Aim of the study. To evaluate the clinical-psychological structure of some variants and PD (paranoid personality disorder, schizoid personality disorder, borderline personality disorder, avoidant personality disorder, compulsive-obsessive personality disorder) we intended an one year follow up.

Materials and methods. We proposed a study which includes these patients' clinic and the psychological tests applied in order to diagnose those patients (Rorschach Test; Minnesota Multiphysical Personality Inventory — MMPI abbreviated form; Symptom Evaluation after DSM V; Personality Test (ETP Duo)). We selected a batch of 7 persons out of 20 with suspicion of PD or other types of PD, all of them between the age of 20-40 years. The clinical data about the psychiatric patients included in the study were selected by working with patients from the Clinical Psychiatric Hospital, Chisinau, during the period of 2019-2020.

Results. Following the study we determinate 7 people with the following PD: one person with Paranoid PD (M, 30 years old), one person with schizoid PD (M, 20 years old), 2 people with borderline PD (M/F, 22/28 years old), 2 people with avoidant PD (M/F, 24/26 years old) one

person with compulsive-obsessive PD (F, 25 years old). Common features found in patients with PD would be: easy to get angry or jealous; disturbed social and occupational function; excessive dependence or independence; impulsive or compulsive; irritability; egocentrism; often resistant to treatment. Most types of PD that were included in the study co-exist with other disorders such as depression, anxiety, social dysfunction, sleep disorders, anger. From the clinical studies, stated by the patient, it was inferred that symptoms of a single disorder are primary and those of others' PD are secondary.

Conclusions. PD start in young adult (20-40 years). Also clinical observations prove that psychopathies are more pronounced in the relatively young periods of life, whereas with age there is remission. The number of patients with PD is bigger than the actual official registered, that's because these people can live with such a pathology until they encounter a social difficulty.

Key words: personality disorder, young adult, mental health, psychopathology

166. SOCIAL READJUSTMENT OF PATIENTS WITH EPILEPSY

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Introduction. In our publication we described the experience of a study in which we analyzed the social characteristics of patients with epilepsy. The conditions of the appearance of the pathology, the influence of different exogenous and endogenous factors on the manifestation of the pathology, the life conditions, level of education, the composition of the patient's family, the working conditions before and after the appearance of the pathology were, and of course the capacity of framing and interaction with the society. The study included 31 subjects age range 20 and 70 years, including 15 women and 16 men.

Aim of the study. To study the medical, social, psychological aspects, the degree of intensity and specificity of the epileptic manifestations, the risk of functional degradation of the patients with epilepsy and the level of their social rehabilitation.

Materials and methods. An inquiry was formulated including 149 questions regarding the conditions of the pathology, the influence of different exogenous and endogenous factors on the manifestation of the pathology, life conditions, level of education, the composition of the patient's family, the working conditions before and after the appearance of the pathology, and of course the capacity of framing and interaction with the company. The inquiries were completed in the presence of patients hospitalized to the sections of the Clinical Psychiatric Hospital from Chisinau.

Results. After analyzing the answers of the inquiries, we can make a characterization of the patients with epilepsy. In the occurrence of epilepsy in over 50% of the analyzed patients prevails the undetermined factors, in more than 30% prevails traumatic incidents, in about 15% the infections and the chronic intoxication. Complete higher education has 12.9% of the examined patients, incomplete - 9.6%, most of the patients had average (32.2%) and specialized studies (45.3%). 12 women and 11 men were married, or are married. Children have 11 women and 12 men.