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# Studying the Features of the Clinic Postabstinent Neurosis - Like States with Heroin Addiction

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**ABSTRACT:** Currently, patients in this article very definitely complain about the "craving" for heroin, vividly and in detail describe the attraction to the drug, ask for help, they are dominated by unconscious anxiety, vivid pictures of drug use appear in their dreams. Increased anxiety acted as the main and non-specific psychopathological marker of the general deterioration of the mental state. Withdrawal phobia was found in almost all clinical observations, depending on the dose of heroin used.

KEYWORDS: patients, subdepressive-prehistoric, human, neurosis-like, regime, aggressiveness, rudeness, egocentrism.

A significant increase in the incidence of heroin addiction in the last decade has led to the appearance of numerous works devoted to the study of various aspects of this problem. Classical and modern descriptions of mental disorders in patients, first of all, represent an analysis of affective and personality disorders in individuals, while neurosis-like disorders in individuals suffering from opioid addiction remain practically unexplored. Taking into account The purpose of this study is to study the features of the clinic of postabstinent neurosis-like states in heroin addiction.

The objective of the study is to study the features of neurosis-like disorders with heroin addiction in the post-withdrawal period. We examined 92 patients with heroin addiction who are on inpatient treatment. Structural-syndromic differences between the groups consisted in the proportions of severity of allergic, affective, somatovegetative, senesto-hypochondriac, anxiety, behavioral disorders.

Depending on the presence and predominance of psychopathological symptoms in the clinical picture, we identified 3 variants of neurosis like disorder in patients with heroin addiction in the post-withdrawal period:

- 1) astheno-adynamic variant
- 2) anxiety-phobic variant
- 3) subdepressive-dysphoric variant.

The asthenoadynamic variant, manifested by increased fatigue, as well as irritable weakness, unstable, usually low mood, was detected in 34 patients. Patients are characterized by hyperesthesia – intolerance to common irritants, headaches, sleep disorders, vegetative disorders. In severe cases, they can be accompanied by passivity and apathy. It should be noted that in the postabstinent period, type 1 of neurosis-like disorders mainly included clinical manifestations of type 1 AS. Remission up to 7-8 months formed in 13 people, the rest resumed anesthesia immediately in the PASS after coming out of acute withdrawal syndrome.

The anxiety-phobic variant was detected in 22 patients. Patients very definitely complain about the "craving" for heroin, vividly and in detail describe the attraction to the drug, ask for help, they are dominated by unconscious anxiety, vivid pictures of drug use appear in their dreams. Increased anxiety acted as the main and non-specific psychopathological marker of the general deterioration of the mental state.

Withdrawal phobia was found in almost all clinical observations, depending on the dose of heroin used. Subdepressive-dysphoric variant in the postabstinent period was noted in 36 patients. On the 14th-19th days of treatment in the hospital, patients begin to complain of weakness and malaise, are burdened by staying in the clinic, feel depressed, a sense of unbearability of existence, avoid contacts, are indifferent to the environment. Some patients were they tend to conflict with others, constantly expressed dissatisfaction with treatment, procedures, staff, the behavior of relatives, were in a depressed mood, they responded to them with bitterness. At the same time, the patients denied that they had a craving for the drug. This condition was manifested by psychopathic behavior – insubordination to the regime, aggressiveness, rudeness, egocentrism, excessive ambitions, indifference to the opinions of others, lack of sympathy for the tears of relatives. Reduction of depressive symptoms and explosive reactions occurred by the 20-22 day of drug withdrawal. Thus, neurosis-like disorders in he post-withdrawal period of heroin addiction are the main link in the formation of remission.

Our data showed that, in the asthenoadynamic variant, symptoms quickly regressed, and in the anxiety-phobic variant, symptoms manifested moderately with long-term obsessive-compulsive disorders, and in the subdepressive-dysphoric variant, neurosis-like disorders had a more pronounced and prolonged character.

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