

adaptation to fixed orthodontic equipment, multiple regression analysis was used. The value according to the AKOL questionnaire was selected as the dependent variable, the values of the scales of the Cattell questionnaire, the SAN questionnaire and the Spilberger-Khanin anxiety questionnaire were taken as predictors capable of predicting the value of the dependent variable. As a result, a multiple linear regression model was constructed, which with 75 percent probability predicted the quality of adaptation in patients. Statistically significant predictors of the regression model were Kettell's questionnaires «E», «I», «Q3». The estimated potential predictors of the questionnaires used were not statistically significant.

Conclusions: This study was devoted to assessing the relationship of the clinical and psychological characteristics of adolescents undergoing orthodontic treatment, and the degree of adaptation to fixed orthodontic equipment. The findings of the study indicate that the quality of adaptation of adolescents is predominantly linearly dependent on their personal characteristics, which were determined using the Cattell questionnaire. Understanding the psychological characteristics that make it possible to predict the adaptation potential of a teenager to fixed orthodontic equipment will allow the orthodontist to take a more differentiated approach to providing quality orthodontic care to each teenager, depending on his personal characteristics.

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IMPORTANCE OF THE VOCATIONAL EDUCATION AND COMPETENCES OF PARENTS IN THE RECOGNITION PSYCHOGENIC PSYCHIATRIC DISORDERS AMONG CHILDREN

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Background: Research, set in different countries, shows a lower coverage level of diagnostic and curative assistance of juvenile patients with psychiatric disorders than in adults, and also problems with professional training of child mental health specialist. The results of epidemiological research-based studies were compared with the level of registered prevalence of PTSD (Posttraumatic Stress Disorder) of children in the Sverdlovsk region, this comparison showed a significant (by a thousand) difference. The Factor of parental competence needs to be studied, since parents often minimize the symptoms of PTSD of their children.

The aim of the research is to investigate the ability of specialists from mental hospitals and ability of parents to correctly recognize the PTSD in children.

Subjects and methods: We investigated 55 specialists from mental hospitals (age 43.314 ± 2.978 , 16 male, 39 female). It was 13 psychotherapists, 11 clinical psychologists, 31 psychiatrists. 26 specialists had training in PTSD before this research (10 male, 16 female, age 40.464 ± 3.105). Control group consisted of 29 specialists (6 male, 23 female, age 46.783 ± 5.471).

Also we investigated 109 parents of adolescents (age of adolescents 15.7 ± 1.02). Had been surveyed 50 parents of patients of the Child Psychiatric Clinic and 59 parents of healthy students of school №138 of Ekaterinburg. Main group consisted of 59 parents (7 male, 52 female, age 40.21 ± 1.04). Control group consisted of 50 parents (7 male, 52 female, age 40.21 ± 1.04). We used the semistructured inquirer. The ability to correctly recognize the disorders was revealed using the amount of right answer. We gave every answer mark "correct/incorrect". It was made correlation analysis of obtained data (answers, socio-demographic features, and professional qualities).

Results and discussions: We revealed that level of identification of PTSD among others disorders had low result (level of identification of PTSD in young children was 65.4%, in adolescent - 67.3%). We didn't reveal significant correlation between correct identification of PTSD and socio-demographic features of specialists ($p > 0.05$).

We revealed that psychiatrists have low level of identification of PTSD in young children (V Cramer = 0.485, $p < 0.05$). But psychologists have high level of identification of PTSD in young children (V Cramer = 0.363, $p < 0.05$). It was revealed that there is significant correlation between experience in training in PTSD and level of correct identification of PTSD in young children (V Cramer = 0.614, $p < 0.05$).

Consequently, psychiatrists have low level of identification of PTSD in young children in comparison to psychologists. We assume that the reason of this is the predominance of biomedical model in psychiatrists as opposed to biopsychosocial model. Psychiatrists demonstrate the improvements of ability in identification of PTSD after thematic training. So they have low level of competence in clinical features of PTSD in children.

Psychologists demonstrate high ability in identification of PTSD. It is possible that the reason of this is that they have specific education that pays attention to the impact of psychosocial factors on mental health.

We revealed that parents of healthy children have low level of identification of PTSD (72.9% for children and 67.8% for adolescents). Parents of healthy children have lower level for children (V Cramer = 0.277, $p < 0.05$) and have lower level of identification of PTSD in adolescents (V Cramer = 0.263, $p < 0.05$) in compared to parents of mentally disabled children. This may reflect that competences and psychological awareness among parents have a major impact on the recognition psychiatric disorders among children.

Conclusions: In this research subjective factors of under-diagnosis of PTSD were found in children, which caused insufficient medical care for juvenile patients in more than half of the cases. Professional training and instruction in PTSD for child mental health specialists and for parents is able to improve in the recognition of PTSD in children, pointing to the need for educational activities.

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ANXIETY DISORDERS IN WOMEN OF ELDER REPRODUCTIVE AGE IN THE PROGRAMME OF ASSISTED REPRODUCTIVE TECHNOLOGIES (IVF, ICSI)

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Background: Anxiety disorders represent the most widespread group of neurotic disorders among women suffering from infertility thus placing this problem to one of the leading places for the investigation in the clinic of assisted reproductive technologies. The combination of two and more factors of infertility happens in more than 60 to 70 per cent. However, in the modern society more than one third of women older than 40 years apply for ART (Assisted Reproductive Technologies).

The aim of the investigation: To reveal the level of anxiety disorders in infertile women of the elder age group in the in vitro fertilization (IVF) programme. The experimental group included 24 women 35.2±4.3 years old having the tube-and-peritoneal factor of infertility. The control group: 22 healthy 34.8±4.2 years old women who applied to the clinic for the annual dispensary observation.

Methods: The psycho-diagnostic tests: The Spilberger-Khanin method for revealing the level of anxiety, the Beck test for the diagnostics of the depression, the Toronto scale of alexetimia. The patients were examined at the stage before joining the IVF programme. The statistical processing was carried out using the standard package of statistical programmes Windows 2000. The reliability of differences was evaluated with the help of the Student criteria and the determination of the Fischer angular coefficient. Differences at $p < 0.01$ were considered reliable.

Results: 56 per cent of 24 women of the examined group suffered from boundary psychic disorders. The portion of anxiety-depressive disorders was 34.2 per cent. Indices of personal and situative anxiety (in points) in the basic group of women during the first testing were 46/44, the second testing - 48/46. They were 34/32 and 32/30 in the control group. Women of the basic group using the points of the Beck scale evaluated their condition at 25.2±3.8 points. The scale of alexetimia revealed its manifestation in almost 82 per cent of the patients. When asked about the possible use of donor oocytes the response was harshly negative in 98 per cent of 23 patients investigated by the authors. As a result of their investigation the authors conducted a cognitive-behavioral psychotherapy that consisted of 6 sessions during 3 weeks.

Discussion: Women of the elder age group undergoing the treatment of the infertility with the help of IVF suffer from anxiety-depressive disorders more often when compared with the control group of fertile women. Besides the revealed psycho-pathological symptomatics within the framework of the border psychic disorder is in conformance with the generally declared world data. A considerable reduction of the cortisol of the plasma was noted in the cognitive-behavioral group where $p = 0.018$ was noted and this was not the case for the remaining part of the patients who did not undergo the psycho-therapeutic correction.