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  $25.2\pm3.8$  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.