

On materials of posthumous forensic psychiatry evolutions we have analyzed 16 cases of suicides of teenagers (11 girls and 5 boys) at the age from 12 till 16 years made in 2011-2019 in Smolensk region.

All children were brought up in incomplete families. Financial positions of families were sufficient. Earlier nobody from these persons who committed a suicide asked for the psychiatric help. The suicide conflict lasted for almost 6 months (only some hours in one case) which, as a rule, had the interpersonal or mixed character. The analysis of teenager's motives of suicides revealed out a tendency to their combination that complicated diagnostics of degree of expressiveness of suicide risk. Characteristic combinations of motives were the following: an avoiding appeal and a protest appeal, not typical for the teenager's suicides, there were motives of refusal of life and motives of self-punishment. In the presuicide period in all studied cases verbal and nonverbal signs of accruing suicide intentions (donation of personally significant things, writing of farewell notes, drawings, messages in social networks, the "last" calls by the mobile phone) were noted. In 30% of cases suicides were made in alcoholic intoxication. All teenagers had affective frustration of easy and moderate degree the expressiveness allowing in sufficient volume to carry out the daily duties before a suicide. The lost girls tried to involve in the suicide act their girlfriends that refused to carry out the suicide plans in the last minute.

Studying the age features of formation of suicide behavior, the all-round analysis of suicides of teenagers and children is necessary for the development of organizational forms and methods of their prevention, the differentiated tactics of early prevention, for the correction of mental disorders, being accompanied by the development of suicide behavior, and also for the prevention of incorrect reflection of a subject of suicides in mass media and in the Internet.

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INTEGRATIVE GROUP PSYCHOTHERAPY FOR PANIC DISORDER IN THE STATIONARY

Dmitry Tsygankov & Tatiana Lebedeva

Institute of Mental Health and Addictology, Moscow, Russia

Panic disorder is considered to affect from 2 to 6 percent of population at some point of their life. In many ways, the decreasing life standards often play a key role in diagnosing panic disorder. For instance, the unemployment rate among people with PD amounted to 25 per cent.

A comprehensive treatment of panic disorder involves not only an appropriate pharmacologic treatment but also a wide array of psychotherapy such as sessions of family, behavioral therapy and relaxation.

However, cognitive behavioral therapy (CBT) is considered to be the most essential option.

The Research purpose: To determine the efficiency of integrative group therapy in a comprehensive treatment of PD in the stationary with different variations signs and symptoms.

Summary:

- Integrative group therapy improved the efficiency of psychopharmacologic therapy in the stationary.
- Integrative group therapy accurately improved the efficiency of psychopharmacologic therapy, related to restructuring of catastrophic cognitive distortions and decreasing anxiety, measured by the Anxiety Control Questionnaire and the Anxiety Sensitivity Index.
- Integrative group therapy improved the efficiency in treating agoraphobia, measured by the Mobility Inventory.
- The patients, treated by Cognitive behavioral and, in addition, pharmacologic therapy, showed more stable effects in their anamnesis than the patients, treated by pharma only. Moreover, cognitive behavioral therapy minimized relapses of the first group after abolishing of medical treatment up 80% in comparison with 60% in the second group.