



War in Ukraine: Psychiatry from the frontline

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This text contains information about new data from the National Military Medical Clinical Center "Main Military Clinical Hospital"

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A retrospective analysis of of medical history data from Military Medical Clinical Center of the Northern Region (Ukraine) has showed a 7-fold increase in the number of hospitalizations during active hostilities. Anxiety, dissociative, stress-related, somatoform and other non-psychotic disorders (F40 - F48) were the most common mental health issues, accounting for 76.1% of cases of hospitalization. (Hydabrus, 2022). Phenomena of alexithymia was quite common among active servicemembers, and could be an predictor of early onset of PTSD and prevent patients from service usage due to lack of insight of mental health symptoms (Chaban et a.l, 2018, Frankova et al., 2019). The main characteristics of alexithymia are marked dysfunction of emotional awareness, social attachment and interpersonal relationships.

Current assessment tools for PTSD, for example CAPS-5 or PCL-5 do not evaluate the degree of alexithymia. Untimely detected PTSD combined with alexithymia leads to the phenomenon of "rapid aging" after the war. The rapid aging is a syndrome composed of progressive asthenia (rapid aging, weight loss, mental weakness and the desire to have rest); post-traumatic rent-seeking behavior (aquired disability with benefits and privileges provided, transition to a passive life position), and a complex of "militarized psyche" characterized by desire to be understood, despite the fact that alexithymia also manifests itself in ineffective decoding of the emotions of others. All this causes an increase in cruelty, intransigence, rigidity to the moral guidelines of society, a decrease in thresholds of sensitivity to social influences, etc.

Phenomenon of alexithymia is an important prognostic factor and psychotherapeutic targets in effective management of a patient with PTSD.

References

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