

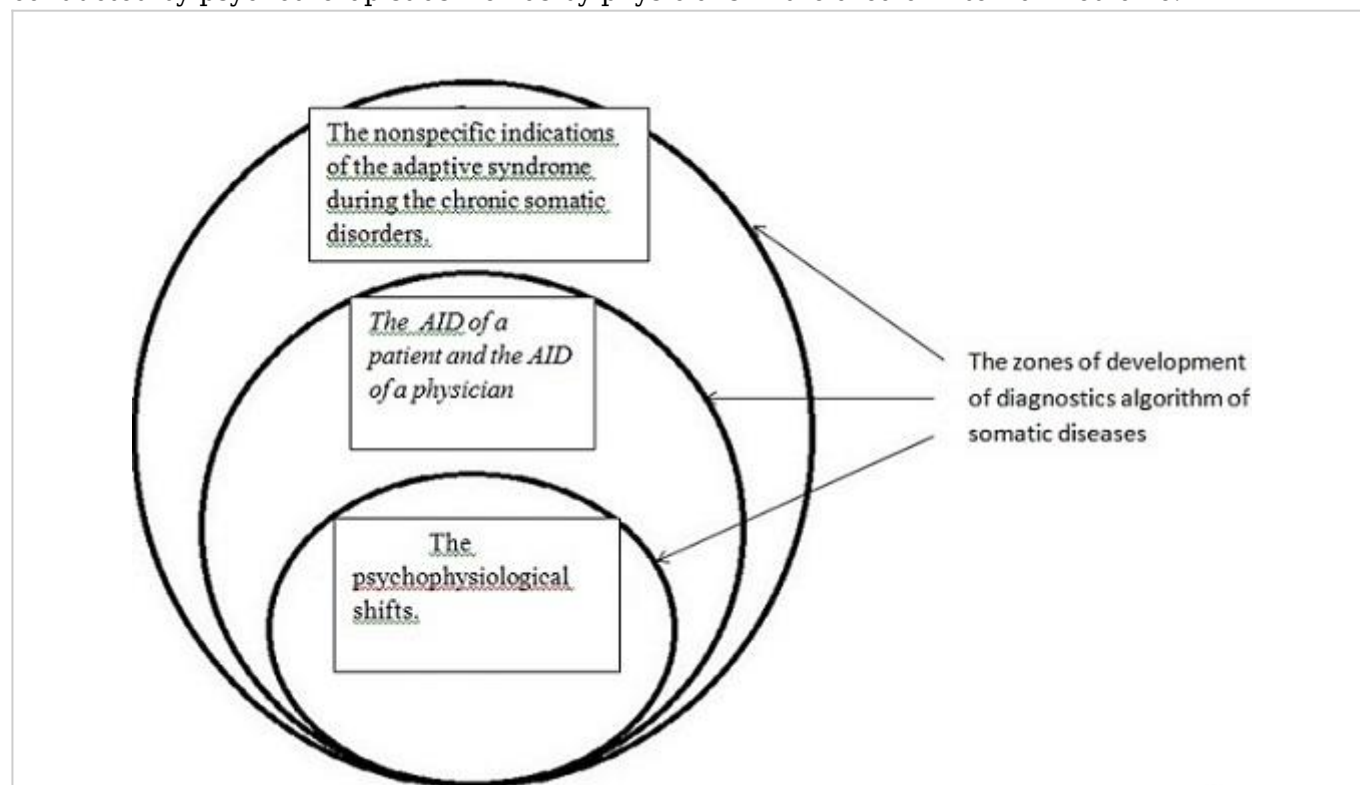
P-1170 - THE UNIFYING MODEL OF DIAGNOSTICS AND THERAPY (UMDT)

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We suppose that UMDT for comorbid statuses shall consist of three zones of development of the diagnostic algorithm of somatic diseases:

1. The zone of psychophysiological shifts: somatic abnormalities => interpretation of somatic shifts => symptom => syndrome. A physician interprets the complaints of the patient, which point to the physiological shifts, confirmed by the paraclinic methods of examination. Anxiously depressive abnormalities are diagnosed as natural personal reactions for disease.
 2. The zone of the adaptive image of the disease (AID) of a patient and the AID of a physician - the zone of the psychophysiological symptomological indications (the symptom - syndrome /clinical diagnosis). The physician shall pay attention to the subjective interpretation of the symptoms by the patient, considering the domination of the "somatized" call for help, and to his own interpretation of symptomatology, considering the domination of the somatocentered approach used by physicians with narrow specialization.
 3. The zone of nonspecific indications of the adaptive syndrome during the chronic somatic disorders. The main therapeutic targets: the somatic pathology, the AID, the types of interaction with a disease, the work with the adaptive syndrome within the Comorbid Phenomenon structure.
- This model is focused on the differentiated approaches to diagnostics, therapy, communications conducted by psychotherapist as well as by physicians in the area of internal medicine.



[UMDT]