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**PERSONALITY DIMENSIONS OF PATIENTS WITH PANIC DISORDER**

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The personality of patients with panic disorder has frequently been associated with the so-called anxious character - introversion, shyness, worry, feeling of insecurity, etc. Determining the 'anxious profile' has been more complex since personality traits may represent a complication of the primary anxious disorder, or a constituent part of the personality disorder characterised by anxiety. The study's objective was to elucidate the profile specificity of patients with panic disorder and 14 patients with panic disorder (ICD-10) were selected, and 34 healthy subjects as controls. Minnesota Multiphasic Personality Inventory (MMPI-201) and Tridimensional Personality Questionnaire (TPQ) were used for personality assessment. The MMPI-score profile of the personalities suffering from panic disorder corresponds to the healthy personality profile with the highest scores on Depression (D), Hypochondriasis (Hs) and Hysteria (Hy) scales. This indicates the so-called 'neurotic trend', i.e. the neurotic level of personality organisation. These patients are introverted, insecure socially, preoccupied by their illness, with symptoms of dysregulation of the autonomous nervous system. The TPQ scores of people with panic disorder showed elevated values of the 'Harm Avoidance' (HA) scale, indicating fearfulness, apprehension, passivity. The elevated values of the HAI subscale reflected the disposition to pessimistic anticipatory anxiety. The prominence of the HA dimension has also been associated with the development of the avoidant pattern of behaviour (secondary agoraphobia in panic disorders).

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**PERSONALITY DISORDERS AND COURSE OF DEPRESSION**

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**Objective:** Many empirical studies have documented the existence of personality disorders (PD) in depressed populations. PD are seen to be associated with poor response to pharmacotherapy and chronic course of depressive disorders.

**Method:** Using a naturalistic study design, 326 patients were examined with major depressive disorder (MDD) according to DSM-IV criteria. They were divided into 2 groups: those with episodic course of illness and those with chronic course with currently major depressive episode (double depression). Premorbid personality was studied on the basis of anamnestic data, clinical observation and MMPI profile.

**Results:** PD were more significant in the group with "double depression" 72% vs 33%. Among patients with PD the most numerous were those with "anxious" characteristics. The influence of PD to antidepressant pharmacotherapy response was also studied and among patients with PD there were significantly more non-reactors.

**Conclusions:** The coexistence of PD and MDD influence the course of depressive disorders and limit the response of psycho-pharmacotherapy

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**Objective:** 48 people with neurosis were examined and treated at the Railway Junction Policlinic N 1 of the North-Caucasian Railway over five years. All the patients were railwaymen. Their occupations and characteristics were as follows: 18 men were administrators with no fixed working hours and the conditions of their work involved a high intellectual and emotional load; 21 men were engineers; and 9 were technical workers. The characteristics of their neuroses were: 23 had neurosis (asthenic, hypochondric, depressive disorders); 8 had organic pathology of the brain; and 17 had vascular disorders of the brain. **Methods:** Cases were examined individually and complex therapies were prescribed. For one group medical treatment was prescribed; and the second were prescribed medical treatment and reflexological therapies plus physiotherapy (massage, balneological treatment). **Results:** 65% of patients in the first group responded positively, 25% responded satisfactorily and 12% of the patients did not respond. In the second group 82% responded positively and 18% responded satisfactorily. **Implementation:** of a complex examination for those railwaymen experiencing intellectual and emotional overwork based on prevention is carried out annually. A group of psychologists carrying out preventive work directing at early diagnosis of mental disorder has been formed.

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**PECULIARITIES OF DEPRESSION TREATMENT**

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The effectiveness of the use of a combination of psychotherapy and pharmacotherapy was studied in 66 patients with neurotic depression and recurrent depression (cyclothymic-type). The purpose of the study was to elaborate the principles of therapeutic correction and define the place of psychotherapy in the complex treatment of depressive patients. The investigation including clinico-psychopathological examinations, psychological testing with the MMPI test in the course of the therapeutic dynamics. The study of hypnotic susceptibility level using the Stanford Hypnotic Clinical Scale (SHCS, Form A) was carried out. Over 4 weeks, the patients received complex therapy including hypnosuggestion and antidepressants. The patients with neurotic depression had a high susceptibility to hypnosis than the cyclothymic patients. The level of hypnotic susceptibility was connected with the structure of the depression, its duration, personality traits and antidepressant side effects. The results of the investigation may be used also as predictors for the hypnotherapy efficacy for depressive patients.