Article: EPA-1164 Topic: EPW02 - Depression 1

CLINICAL DIFFERENTIATION OF REACTIVE DEPRESSIONS

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Introduction: The array of diagnostic criteria for reactive depression includes verification of psychogenic triggers, as well as definition of predisposing «soil» features [Schneider K., 1959], i.e. constitutional predisposition.

Objectives: Testing of hypothesis stating that personality disorders (PD) related to overvalued ideas take part in the development of reactive depressions (congruence model «personality–life event») and affect their further course and clinical prognosis.

Methods: The study included 25 subjects (5 male, 20 female). The age of patients varied extensively from 35 to 73 years ($54 \pm 10,6$ SD). The follow-up period of reactive disorder was 4 - 30 years ($16,6 \pm 8,4$ SD).

Results: The analysis of premorbid constitutional features demonstrated a major heterogenity of overvalued personal patterns (love, jealousy, etc.) related to the catathymic affect. Clinical findings were differentiated into two groups. The catathymic component of overvalued ideas in PD patients in the first group was characterized by *affective dissonance* with significant others (pretensions, egocentric nature of emotional bonds, litigiousness, etc.). Catathymic complexes in the second group were defined by phenomenon of *affective resonance* with significant others (altruistic ideas of devotion and self-sacrifice were dominant).

Conclusions: The structure of catathymic complex was found to be the marker of further progression of reactive depression. The catathymic complex incorporating features of *affective dissonance* was a predictor of phase-like dynamics of histrionic PD (hysterical psychopathy), while catathymic complex incorporating features of *affective resonance* was a prognostic marker of an affective disorder.

Keywords: reactive depression; constitutional predisposition; catathymic complex