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Depressive disorders (DD) occur in 0,5-2,5% of children and adolescents. The causes are various; but genetic factors are among the major risk factors.

The main objective was to study familiar and cytogenetic risk factors of depressive disorders in children.

Patients and methods. Genealogical and cytogenetic analysis has been carried out in 50 children and adolescents with depressive disorders, aged 6 to 16 years. Statistical treatment: Excel, SPSS Statistics 17,0.

Results. It has been found that 48% of the patients' families had DD cases among relatives to the third degree. Non-infectious diseases such as mental disorders, DD included, were more frequent in the first-degree relatives (17,2%) as compared to the second- and third-degree relatives (4,3% and 2,6%, ?<0,001). Neurological diseases also prevailed in the first-degree relatives (19,7%) as compared to second- (8,7%) and third-(0,8%) degree relatives. Endocrine diseases (thyroid gland pathology, diabetes mellitus type 1 and type 2, obesity) and oncopathology (lung, stomach, uterine, breast cancer) occurred with the same frequency. Cytogenetic analysis has shown that the occurrence of chromosomal abnormalities in the patients with DD is 13,1% which is 6,7-fold as

Cytogenetic analysis has shown that the occurrence of chromosomal abnormalities in the patients with DD is 13,1% which is 6,7-fold as compared to the level of spontaneous mutations in healthy peers (1,95%). The occurrence of chromatid (6,9%) and chromosomal (3,4%) aberrations was higher than their level in healthy peers (1,5% and 1,2%).