

CLINICAL DEVELOPMENT OF COMORBIDITY IN SCHIZOPHRENIA WITH SUSTAINED HYPERTENSION. STATE INSTITUTION "CRIMEAN STATE MEDICAL UNIVERSITY NAMED AFTER S. GEORGIEVSKY" SIMFEROPOL, UKRAINE

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Comorbidity of psychic diseases with different somatic pathology is an essential causes for marking the pattern of the illness worse. Psychiatry stigma causes difficulty in getting adequate treatment of somatic pathology in schizophrenia patients.

The goal of the research: The studying of particularities in clinical development of comorbidity in schizophrenia with sustained hypertension.

Data and methods: 60 patients with paranoid form of schizophrenia accompanied with somatic pathology (sustained hypertension).

Use: Clinical-catamnesis, clinical- psychopathology methods, psychometry scale (PANSS, HARS, HDRS, ESRS).

Results: Clinical features of comorbidity in schizophrenia with sustained hypertension are characterized by structural particularities of productive and deficiency disorders. The depression with hypochondriasis and anxiety symptoms is more expressive. Neurocognitive symptoms and low quality remission are marked ($p < 0,01$). Male patients more often have negative symptoms of anxiety (46,7%), irritability and aggressive behavior (33,3%) were marked in comparison with the control group ($p < 0,05$). Were identified patients could endure psychic medications worse. Resistance and intolerance to psychotropic medicines were revealed. More corrector medicines in side effect of extrapyramidal symptoms were given ($p < 0,01$) total polypharmacy ($p < 0,01$) in patients with comorbidity in schizophrenia and sustained hypertension was marked.

Conclusions: Patients with comorbidity in schizophrenia and sustained hypertension developed more complex pattern of the disease. Patients were revealed to endure psychic medications worse. They were marked to have secondary resistance to psychotropic therapy.