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## **PSYCHOLOGICAL PECULIARITIES OF THE FORMATION AND THE COURSE OF MALADAPTIVE STATES OF INTERNSHIP DOCTORS IN THE ASPECT OF THEIR PSYCHOCORRECTION**

**V. V. Vyun**

**Kharkiv National Medical University**

### **Abstract**

Tense working conditions unfavorably affect not only the somatic, but also the mental health of people working in conditions of constant neuropsychic and physical stress. The presence of signs of maladaptation (decrease in the level of professional capacity, violation of behavioral regulation, increased conflict with others, tendency to addictive and delictual behavior) leads to lack of adequate and purposeful response of such individuals, becomes individual and extreme, and contributes to erroneous actions in the process of professional activity, professional mistakes, and also contributes to further transformation into mental and behavioral disorders. Changes in higher medical education, its integration into the European educational space requires new approaches to postgraduate medical training of a doctor. Conditions for modernization of postgraduate medical education have been created. Therefore, the main tasks of postgraduate education of doctors, especially during the reform period, are to ensure both the improvement of the professional training of internship doctors and the provision of medical and psychological support to the doctors during the period of adaptation to professional activity. on the basis of a systematic approach to the study of mechanisms for the formation of maladaptive states of internship doctors to professional activity, to develop a system of their psychotherapeutic correction. three main levels of

adaptation of a doctor to professional activity are identified: The high level (20.1% of men and 13.1% of women) is characterized by the high level of work capacity, psychological comfort, availability of reserves for overcoming critical situations, objective difficulties associated with disadvantages in the modern organization of the medical process. The average level (15.4% and 12.2% respectively) is characterized by a decrease in the level of efficiency and psychological comfort in crisis situations and in the presence of shortcomings in the organization of the medical process, with a rapid recovery in their solution and the preservation of psychological comfort outside the work process. The low level (8.8% of men and 6.1% of women) is characterized by the development of maladaptation, psychological discomfort in everyday life. Constant feeling of dissatisfaction with themselves and their professional activities. In 55.7% of men and 68.6% of women, maladaptation was detected. Namely, the high level of maladaptation requiring the use of urgent measures (psychological and medical) was found in 9,2% of men and 12,5% of women; the significant level of maladaptation requiring mandatory intervention by psychologists, the conduction of a rehabilitation program – in 10.3% of men, 14.0% of women; the average level of maladaptation, when it is useful to carry out the advisory work of specialists – in 36,2% and 42,1% respectively. In order to prevent and correct the disorders of adaptation to the professional activities of internship doctors, we have developed a system of medical and psychological support during the professional training period, which involves the use of integrated psychotherapeutic and psychoeducational effects; establishment of the purpose of psychotherapy as an effect on pathogenetically significant biopsychosocial factors of the development of maladaptation; differentiation of tasks and amount of psychotherapy and psychocorrection according to the type of maladaptation. It should be noted that the effectiveness of psychotherapeutic influence is possible only in conjunction with the organizational and pedagogical plan.

**Keywords: psychocorrection, maladaptation states, physical stress, medical education**

The issue of influence of emotional stress on a human is one of the leading medical and social problems of our time. The most relevant question arises in the system of professional selection and further medical and psychological support of the official activities of representatives of occupations associated with constant neuropsychic and physical stress. The main task in this case is to ensure the high efficiency of official activity and the

prevention of occupational diseases, that is, to preserve health and prolong labor longevity [1, 2].

Tense working conditions unfavorably affect not only the somatic, but also the mental health of people working in conditions of constant neuropsychic and physical stress. The presence of signs of maladaptation (decrease in the level of professional capacity, violation of behavioral regulation, increased conflict with others, tendency to addictive and delictual behavior) leads to lack of adequate and purposeful response of such individuals, becomes individual and extreme, and contributes to erroneous actions in the process of professional activity, professional mistakes, and also contributes to further transformation into mental and behavioral disorders [3, 4, 5].

Changes in higher medical education, its integration into the European educational space requires new approaches to postgraduate medical training of a doctor. Conditions for modernization of postgraduate medical education have been created. Therefore, the main tasks of postgraduate education of doctors, especially during the reform period, are to ensure both the improvement of the professional training of internship doctors and the provision of medical and psychological support to the doctors during the period of adaptation to professional activity [6, 7, 8, 9].

The foregoing stipulated the relevance and necessity of this study.

The purpose of the work: on the basis of a systematic approach to the study of mechanisms for the formation of maladaptive states of internship doctors to professional activity, to develop a system of their psychotherapeutic correction.

Materials and methods of the study: In order to achieve the set purpose, in compliance with the principles of bioethics and medical deontology, it was carried out a comprehensive clinical and anamnestic and psychodiagnostic examination of 213 doctors of Kharkiv National Medical University, including 116 women and 97 men aged 22-25 years.

In the course of study, the following research methods were used: clinical and anamnestic, socio-demographic; clinical and psychological; psychodiagnostic and statistical.

The study took place in three stages. The first stage included screening of adaptation levels among internship doctors. The main group (internship doctors of with signs of maladaptation) and control (internship doctors with a sufficient level of adaptation) were allocated.

At the second stage, it was carried out a comprehensive analysis of clinical manifestations and mechanisms of the formation of adaptation disorders among internship doctors.

At the third stage, the developed system of complex psychocorrection and psychoprophylaxis influences was tested and a comparative evaluation of their effectiveness was conducted.

Results and discussion: Based on the data obtained during the study, three main levels of adaptation of a doctor to professional activity are identified:

The high level (20.1% of men and 13.1% of women) is characterized by the high level of work capacity, psychological comfort, availability of reserves for overcoming critical situations, objective difficulties associated with disadvantages in the modern organization of the medical process.

The average level (15.4% and 12.2% respectively) is characterized by a decrease in the level of efficiency and psychological comfort in crisis situations and in the presence of shortcomings in the organization of the medical process, with a rapid recovery in their solution and the preservation of psychological comfort outside the work process.

The low level (8.8% of men and 6.1% of women) is characterized by the development of maladaptation, psychological discomfort in everyday life. Constant feeling of dissatisfaction with themselves and their professional activities (Table 1).

Table 1

Levels of adaptation of internship doctors

Levels of adaptation	Men		Women	
	Modulus	%	Modulus	%
High	24	24,2	15	12,3
Medium	19	20,1	22	19,1
Low	54	55,7	79	68,6

In 55.7% of men and 68.6% of women, maladaptation was detected. Namely, the high level of maladaptation requiring the use of urgent measures (psychological and medical) was found in 9,2% of men and 12,5% of women; the significant level of maladaptation requiring mandatory intervention by psychologists, the conduction of a rehabilitation program – in 10.3% of men, 14.0% of women; the average level of maladaptation, when it is useful to carry out the advisory work of specialists – in 36,2% and 42,1% respectively.

The risk factors for the development of adaptation disorders of internship doctors include: difficult working conditions, a lack of positive emotions at and off work; awareness of inadequate level of competence; low level of motivation, lack of economic incentives;

imperfection of the mechanisms of psychological protection; lack of self-regulation skills; conflicts in the medical environment; lack of professional communication.

According to the results of the research of socio-psychological factors of the formation of adaptation disorders, 49.5% of internship doctors are not satisfied with their working conditions, 75.6% believe that the medical institutions are not fully provided with the necessary pharmaceutical products and medical devices, 36.4% think that some aspects of their work are devoid of content, and only 4.2% of the surveyed people consider their wages as sizeable and appropriate to the applied efforts.

The examined internship doctors with adaptive disorders note a deficit of positive emotions at and off work (69.2%); awareness of inadequate level of competence (75.4%); low motivation, lack of economic incentives (82.1%); imperfection of the mechanisms of psychological protection (52.7%); lack of self-regulation skills (55.2%); conflicts in the medical environment (27.4%); lack of professional communication (42.5%).

As shown by the results of the study, for internship doctors with states of maladaptation, the most typical personality traits are the following: increased excitability and imbalance, conflict in relationships, vulnerability and maladministration, lability of emotions, demonstration of emotional manifestations, anxiety, and efficacy of behavior.

Psychological manifestations of adaptation disorder were characterized by complaints of constant distress, dissatisfaction with the level of achievement of life goals, the lack of desire to communicate with others, the difficulties of establishing communicative contact with strangers, conflicts in the work team and in the family, reducing motivation to professional activity.

In order to prevent and correct the disorders of adaptation to the professional activities of internship doctors, we have developed a system of medical and psychological support during the professional training period, which involves the use of integrated psychotherapeutic and psychoeducational effects; establishment of the purpose of psychotherapy as an effect on pathogenetically significant biopsychosocial factors of the development of maladaptation; differentiation of tasks and amount of psychotherapy and psychocorrection according to the type of maladaptation.

Psychotherapeutic programs provided the phased introduction of psychotherapeutic techniques, depending on the individual characteristics of patients and the content of psychotherapy. At the same time, the tasks of the content part of psychotherapy included the principle of mutual potentiation, regardless of the application of psychotherapy methods.

Psychotherapeutic complex in internship doctors with asthenic and asthenic-apatetic types of maladaptation included the use of rational psychotherapy, autogenous training (psychotonic version of Shogham-Mirovsky) and art therapy (drawing techniques).

In case of hyperesthesia, the short-term psychodynamic psychotherapy Karvasarsky, cognitive training, progressive muscle relaxation developed by Jacobson, art therapy were used.

The main forms of psychotherapeutic influence with anxiety-depressive variant were personality-oriented psychotherapy, cognitive-behavioral therapy of Beck, autogenous training in the modification of Lebedinsky-Bortnik, art therapy.

In the psychosomatic variant, McCullough's cognitive-behavioral analytical psychotherapy was used, as a method of psychic self-regulation it was used V. I. Sukhorukov's method of segment training. When addictive variant, psychotherapeutic program included indirect psychotherapy of Velvovsky, existential psychotherapy and autogenous training in the modification of Lebedinsky-Bortnik.

An integral part of the psychotherapeutic program developed by us is psychoeducational trainings, which include the use of information modules, positive self-perception training, the formation of communicative skills and abilities, the solution of interpersonal interaction problems and problem-oriented discussions.

It should be noted that the effectiveness of psychotherapeutic influence is possible only in conjunction with the organizational and pedagogical plan.

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