

PRISTUP U LEČENJU PSIHOTIČNIH POREMEĆAJA KOD MLADIH - PRIKAZ SLUČAJA

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Sažetak. Psihijatrijski poremećaji uzrokovani intrakranijalnim lezijama, česti su ordinaciji izabranog lekara. Oni se preklapaju sa mentalnim poremećajima zdravlja. Najčešći simptomi kod mladih su školska fobija, anksioznost, promene raspoloženja i psihomotorna retardacija. Posebno vulnerabilna grupa stanovništva za mentalne poremećaje su deca i maldi (od 15 do 24 godina). Pod dijagnozom nekog mentalnog poremećaja je 11,3% dece u našoj zemlji. Prikaz slučaja mlade žene, bez porodične anamneze psihijatrijskih bolesti, koji je počeo kao poremećaj ponašanja i emocija u adolescenciji i razvio se u psihotični poremećaj sa halucinacijama i pokušajem suicida, a za koji će se utvrditi da kao anatomsku osnovu ima pinealnu cistu. Cilj nam je centralizovati ulogu izabranog lekara u praćenju i kontroli ovog kompleksnog stanja. Izvor podataka je medicinska dokumentacija pacijentkinje korišćena uz informisani pristanak u skladu sa zakonima Republike Srbije. Upotrebili smo metod posmatranja, anamneze, heteroanamneze, kliničke preglede. Na osnovu ključnih reči pretražili smo elektronske baze podataka i ostalu relevantnu medicinsku literaturu. Pacijentkinja stara 23 godine, od perioda adolescencije počinje da ispoljava psihijatrijsku simptomatologiju, u vidu poremećaja ponašanja i emocija. Složenost stanja praćena je višestrukim hospitalizacijama, lošim terapijskim odgovorom i komplikacijom lečenja. Prisutno je samopovređivanje i pokušaj suicida predoziranje lekovima. Tokom lečenja javljaju se brojni neželjeni efekti primenjenih lekova u vidu: povećanja telesne mase, nevoljnih pokreta glave i lica, epileptičkih napada, galaktoreje, koji dodatno otežavaju lečenje. Kao anatomski supstrat dijagnostikovana je pinealna cista. Mere koje smo preduzeli, uticale su da se popravi funkcionalni status i poboljšale kvalitet života pacijentkinje i njene porodice. Naše iskustvo se poklapa sa rezultatima brojnih radova koje smo pregledali. Pristup ovakvim stanjima treba da bude individualan u skladu sa pacijentovim stanjem, doživljajem zdravlja i potrebama. Ujedno treba da je i holistički, multidisciplinarni, kako bi se sproveli svi aspekti lečenja i nege i popravio funkcionalni status i kvalitet života pacijenta. Izabrani lekar ima centralnu ulogu u praćenju toka bolesti, adherence terapije, neželjenih efekata lekova. Briga o zdravlju mladih i zdravstvenim uslugama koje dobijaju, treba da je stalni izazov i interes sistema zdravstvene zaštite i cele društvene zajednice.

Ključne reči: mentalni poremećaji, intrakranijalne lezije, emocionalno nestabilni poremećaj ličnosti

TREATMENT APPROACH TO PSYCHOTIC DISORDERS IN YOUNG ADULTS – A CASE REPORT

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Abstract. Psychiatric disorders caused by intracranial lesions are common in general practice. They overlap with mental health disorders. The most frequent symptoms among young people include school phobia, anxiety, mood swings and psychomotor retardation. Children and young adults (aged 15–24 years) represent a particularly vulnerable group for mental disorders. In Serbia, 11.3 % of children are diagnosed with a mental disorder. To report the case of a young woman without a family history of psychiatric disorders, who had a behavioural and emotional disorder during adolescence that later progressed into a psychotic disorder with hallucinations and a suicide attempt. The patient was ultimately found to have a pineal cyst as the anatomical substrate. The objective is to emphasize the central role of the general practitioner in the follow-up and monitoring of this complex condition. The source of data was the patient's medical record used with informed consent in accordance with the laws of the Republic of Serbia. Observation, medical history, heteroanamnesis and clinical examinations were performed. A keyword-based search was conducted in electronic databases and other relevant medical literature. A 23-year-old female patient presented with psychiatric symptoms that began in adolescence, initially in the form of behavioural and emotional disturbances. The complexity of her condition was reflected in multiple hospitalizations, poor therapeutic response and inadequate treatment adherence. Self-injurious behaviour and a suicide attempt by medication overdose were observed. Numerous treatment-related adverse effects of the administered drugs were noted, including weight gain, involuntary movements of the head and face, epileptic seizures and galactorrhea, which further complicated management. A pineal cyst was diagnosed as the anatomical substrate. The implemented measures improved the patient's functional status and the quality of life of both the patient and her family. This experience is consistent with the findings of numerous studies that were reviewed. The approach to such conditions should be individualised in accordance with the patient's condition, health perception and needs. At the same time, it should be holistic and multidisciplinary in order to address all aspects of treatment and care and to improve the patient's functional status and quality of life. The general practitioner has a central role in monitoring the course of the disease, treatment adherence and adverse drug effects. The health of young people and the health services they receive should remain a constant challenge and priority for the healthcare system and the wider community.

Key words: mental disorders, intracranial lesions, emotionally unstable (borderline) personality disorder