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FEATURES OF THE PSYCHOLOGICAL STATE OF HIV-INFECTED PERSONS ACCORDING TO ANXIETY LEVEL

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From the first day of the diagnosis of "HIV infection" significant emotional experiences arise and pronounced deviations in the state of neuropsychological and somatic health of HIV-infected persons are registered. Moreover, the emotional experiences of an HIV-infected person are, in most cases, associated with the occurrence of suffering and require medical, social and psychohygienic correction [2, 3]. With any serious or incurable disease, there is a need to restructure the orientation of the individual. According to some authors, serious mental disorders appear in HIV-positive people. The pathological process creates conditions for the functioning of psychological mechanisms that have no place in "normal" mental development and can lead to distorted personality development [1, 2, 4, 5].

It should be noted that psychological symptom complexes in HIV-infected patients are insufficiently studied, and the information of scientists presented in the literature is contradictory.

The aim of study was to determine the main indicators of state and trait anxiety among HIV-infected persons.

Examinations were conducted using the psychological methodology State-Trait Anxiety Inventory for *Self-Evaluation Questionnaire* of Spielberger, modified by Khanin. The study included 30 HIV-infected patients (25 men and 25 women) who were undergoing inpatient treatment in the infectious disease department of the City Clinical Hospital. The age of the examined persons to be ranged from 24 to 55 years. All patients had a different degree of expression of the pathological process. Antibodies to HIV were detected in all of the above-mentioned patients during the study.

The first group included patients who systematically used narcotic substances before becoming infected with HIV and made up 16.6%; 23.3% of persons who continued to abuse narcotic drugs after establishing the fact of infection. The second group included patients infected with the human immunodeficiency virus who abused alcoholic beverages (domestic drunkenness), accounting for 36.6%. The third group includes HIV-infected persons who were in penitentiary institutions in the past and made up 16.6%. The fourth group consisted of patients in the group of disabilities not related to HIV/AIDS and made up 6.9%.

In HIV-infected patients of the first, second and third groups, the examination results were authentic. A consistently high level of state anxiety and a moderate level of trait anxiety was observed in these groups. It is known that situational anxiety is characterized by tension, embarrassment and nervousness that arise in response to

the influence of specific situations. In this case, HIV infection is a situation that can form psychological changes on the part of the individual.

In the fourth group, some differences were noted, which characterized the characteristics of the individual who were on disability. Among these patients, there was a trend towards an increased level of situational anxiety, but what was distinctive was that the level of personal anxiety was also high. Trait anxiety characterizes a persistent tendency of a person to perceive a wide range of situations as threatening and to react in response to their appearance with a state of anxiety and worry. That is why it is no coincidence that the level of state anxiety was high in the group of disabled people.

The data obtained in the course of research indicate changes in the mental state of HIV patients and may, as a result, lead to the occurrence of emotional disorders and neurotic breakdowns.

All of the above indicates the need for in-depth study of this problem, development and scientific justification of effective psychohygienic measures to correct changes in the psychological state of persons infected with the human immunodeficiency virus.

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