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Clinical and Dynamic Features of Alcoholism at Different Ages

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STRACT

Personal psychological and socio-demographic factors premorbid or background psychopathological symptoms of the development of alcoholism in men and women reflect an important clinical feature. There is insufficient data on the clinical and dynamic aspects of pathology, taking into account the age and sex factors of alcoholism. The aim of the study was to investigate the gender clinical and dynamic characteristics of Alcohol Dependence in adults aged 25 years and over 60 years. For materials and methods clinical-anamnetic, clinical-psychopathological and clinical-dynamic examination of male and female patients treated in Samarkand regional Narcological hospitals and registered in dispensary was conducted. 4 observation groups were divided taking into account gender and age factors. In conclusion, the study made it possible to determine whether the dynamics of alcohol dependence formation in young and late-aged people had gender differences and general age characteristics. The formation of alcoholism in young and late-aged men is characterized by a low and moderate development of the disease and relatively preserved socio-psychological and family ties. The formation of Alcohol Dependence in women of this age group is dangerous and progressive, mainly with a violation of the socio-psychological and family background.

Keywords:

Male, female, age, sexual, alcoholism, psychological and social factors.

Introduction. Socio-economic changes in recent decades have led to an aggravation of the problem of alcohol dependence in young and late (over 60 years old) people [3, 5]. The gender aspect of alcoholism, according to a number of authors, is characterized by the universality of the painful process in both sexes and its specificity and uniqueness in women, taking into account the age factor [1, 7].

Structurally complex alcoholic psychoses occur in the form of alternation of various psychotic states. So, psychosis is defined by acute paranoid syndrome, then verbal hallucinosis develops, followed by delirium. Most often, there is an alternation of hallucinosis and delirious clouding of the state [4, 12, 17].

Many authors have studied the pathomorphosis, prevalence, clinic and course of structurally complex psychoses [2, 9], but there is not enough information about them. Recently, there has been a pathomorphosis of the clinical picture of the disease, and there is also an increase in the number of patients due to younger people [6, 14]. In addition, the frequency of alcoholic psychoses reflects the level of alcoholization of the population [8, 10, 15], and therefore the relevance of this study is very significant.

In domestic and foreign literature, various issues of alcoholism are actively discussed separately in men and women and at different ages. Individual psychological and socio-

demographic factors take part in the formation of alcohol dependence, taking into account premorbid or background psychopathological symptoms (personality disorder, affective pathology, residual cerebral insufficiency, etc.), which determine the clinical features of alcohol dependence [11, 13]. The data of clinical and epidemiological studies of recent years indicate an increase in the relative incidence of alcoholism among people of early and late ages, however, insufficient knowledge of the clinical and dynamic aspects of this pathology, taking into account age and gender factors [16, 18].

Purpose of the study: To study gender clinical and dynamic features of alcohol dependence in young (under 25 years) and late (over 60 years) age.

Material and methods. A comprehensive clinical (clinical-anamnestic. clinicalpsychopathological and clinical-dynamic) examination of 609 male and female patients treated in narcological hospitals of the region for 2019-2021 and registered at the dispensary with a diagnosis of "Mental and behavioral disorders associated with alcohol consumption (according to ICD-10 headings F 10.2-10.7) was conducted. Taking into account gender and age factors, 4 observation groups were identified: group 1 (n=115) - young men under 25 years of age (the average age was 23,5±1,5 years); Group 2 (n=32) - young women - average age 21.8 ± 3.2 years; group 3 (n=391) - men over 60 years old (average age 65,5±5,2 years) and group 4 (n=71) - late-aged women (average age 64.9±4.2 years).

Results and discussion: To identify the main clinical and dynamic features of alcohol dependence in young and late-aged people, taking into account the gender factor, among the patients of the observed groups, the age indicators of the first alcohol sample, the onset of systematic alcoholization, loss of quantitative control in intoxication, the formation of withdrawal syndrome and pseudo-drinking, as well as the age of the first visit to a narcologist were analyzed

The main clinical and dynamic indicators of alcoholism of early and late age

alco	alcoholism of early and late age				
The main	Young	people	Persons	of late	
clinical	(under	25	age (o	ver 60	
and	years old)		years old)		
dynamic	1	2	3	4	
indicator	групп	групп	группа	группа	
S	a	a	n=391	n=71	
	n=11	n=32	11 071		
	5	11 0 -			
	M±m	M±m	M±m	M±m	
Age at	23,5±	21,8±	65,3±5	64,9±4	
the time	1,5	3,2	,2	,2	
of the	1,0	3,2	,2	,2	
study					
Age of	12,3±	14,6±	16,1±2	18,7±2	
the first	2,3	2,7	,9	,9	
alcohol	2,3	2,7	, 9	,9	
sample					
	17,8±	16,3±	32,0±1	36,3±1	
	,			-	
onset of	1,8	2,3	2,7	0,0	
alcohol					
abuse	107.	170	27 (11	41.0.0	
Age of	18,7±	17,8±	37,6±1	41,9±8	
loss of	2,3	2,7	0,7	,5	
quantitat					
ive					
control	100	100	20 - 1	10.1.0	
Age of	18,8±	18,3±	38,7±1	43,1±9	
withdra	2,3	2,2	1,2	,3	
wal					
syndrom					
e					
formatio					
n					
The age	19,7±	16,6±	44,5±1	44,7±8	
of	2,4	2,5	1,0	,2	
pseudoz					
apoi					
formatio					
n					
Age of	22,3±	21,7±	59,3±9	60,7±5	
the first	1,6	2,1	,1	,6	
visit to					
the					
narcolog					
ist					
1		1	1		

A comparative analysis of the studied indicators among young men and women showed that the average age of the first alcohol sample in young men (group 1) corresponded to the early puberty period (12,3±2,3 years), while female patients (group2) began to drink alcohol at the end of the negative phase of puberty (14,6±2,7 years). Typical motives for drinking alcoholic beverages for males (group 1) were submissive attitudes under the influence of group pressure (52,2%, 21,9% for women; P<0,05), whereas in patients of group 2 in 46,9% of cases against 19,1% in group 1 (P<0,05), the motive for alcohol consumption was the desire to impress. Systematic (at least 1-2 times a week) consumption of alcoholic beverages in males accounted for an average age of 17,8 ± 1,8 years, and in women -16.3 ± 2.3 years.

In male patients, such indicators of the dynamics of the formation of alcohol dependence as the age of loss of quantitative control were observed later than in women (on average 18,7±2,3 years versus 17,8±2,7 years, respectively), withdrawal syndrome was formed on average at the age of 18,8±2,3 versus 18,3±2,2 in women. For the first time, men sought drug treatment at a later age than women (on average 22,3±1,6 years versus 21,7±2,1 years).

The form of alcohol consumption, significantly more often, became pseudo-binge in 67.8% of men from an average of 19.7 ± 2.4 years and in 87.5% of women from an average of 16.6 ± 2.5 years. Among other forms of alcohol abuse, young men are characterized by intermittent drunkenness (25.2% vs 12.5% in women; P<0.05) and constant alcohol consumption against the background of average tolerance (7.0% vs. 0% in women).

At the time of the examination, the progrediency of alcoholism in 88,7% of males was significantly more frequent than in women (25,0%) and varied in the age range from 7 to 15 years, whereas female patients were characterized by a high (up to 6 years) progrediency of the disease (75,0% vs 11,3% in men; P <0,05).

The data obtained indicate that, despite the fact that young women began to become alcoholized later than men, however, the dynamics of the formation of alcohol dependence had a high type of progrediency and by the end of the positive phase of puberty was accompanied mainly by a pseudo-binge form of alcohol consumption, whereas men of this age are characterized by an average progrediency of the disease and, along with pseudo-binge drinking, intermittent and constant alcohol consumption was noted against the background of average tolerance.

The age dynamics of addiction formation in men (group 3) and women (group 4) of late age is characterized by the following gender clinical and dynamic features.

Men (group 3) of late age, in contrast to women (group 4), are characterized by early initiation to alcoholic beverages (on average 16,1±2,3 years versus 18,7±2,9 years) and earlier onset of alcohol abuse (on average 32,0±12,7 years versus 36,3±10,0 years). Loss of quantitative control and the formation of withdrawal syndrome in male patients (37,6±10.7 years and 38,7±11.2 years) They were also observed at an earlier age than in women (41,9±8,5 years and 43,1±9.3 years, respectively).

The analysis of age indicators of various forms of alcohol abuse indicates that the pseudo-binge form of alcoholism, both in 40,4% of men and 36,6% of late-aged women, was observed at the same age $(44,5\pm11,0)$ years and $44,7\pm8,2$ years). However, true binge drinking was typical for male patients (16,2% vs 5,6%; P < 0,05),for women it whereas was constant consumption against a background of low tolerance (40,8% vs 28,6%; P < 0,05). Such forms of alcohol abuse as intermittent (8,7% vs 7.0%) and constant consumption against the background of average tolerance (6,1% and 9,9%, respectively) were not typical for men or women of late age.

The formation of late-age alcoholism in men in 52,2% of cases against 35,2% in women took from 7 to 15 years and in 22,8% of cases against 5,6% in women over 15 years, while for 59,2% of women against 25,0% of men of this age, a high (up to 6 years) is typical the type of progrediency of the disease. Both male and female patients, on average, turned to specialists for the first time by the age of 60.

An analysis of the frequency of hospitalizations showed that among young and late-aged people, men (25,2% and 32,2%, respectively) were significantly more likely than women (12,5% and 22,5%, respectively; P>0,05) to be hospitalized for the first time and, consequently, female patients were more often treated repeatedly.

Based on the data obtained, it can be concluded that alcohol dependence of late age in men begins to form 4-5 years earlier than in women, however, the latter are characterized by high progrediency of the disease and frequent repeated hospitalizations. Typical forms of alcohol abuse for males of this age group are true binge drinking, and for female patients, constant drunkenness against a background of low tolerance.

Conclusion. Thus, the study made it possible to establish that the dynamics of the formation of alcohol dependence in young and late-aged people has gender differences and common age characteristics. In young and late-aged men, the formation of alcoholism is characterized by low and medium progrediency of the disease and relatively preserved socio-psychological and family ties. In women of these age groups, the formation of alcohol dependence is mainly malignant and progressive with a violation of socio-psychological and family status. Pseudobinge drinking is dominant in all the studied groups. Alcoholism of early and late age is a negative medical, psychological and sociodemographic problem of our society in the coming years and requires the active introduction of differentiated preventive measures.

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