

SPECIFIC FEATURES OF PSYCHO-EMOTIONAL DISORDERS IN MEN WITH
IMPAIRED FERTILITY

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ABSTRACT

Background: Infertility significantly affects the psycho-emotional status, causing chronic stress, serious personal, family and social maladjustment. **Objective:** In order to study the structure of psycho-emotional disorders by psychometric methods, 72 men aged 26 to 45 years with impaired fertility were examined. **Methods:** The diagnosis was verified on the basis of complaints, anamnesis and examination, clinical and instrumental research methods. The following psychometric methods were used in the work: the Spielberger-Khanin questionnaire of personal and situational anxiety; Hospital Anxiety and Depression Scale (HADS); scale for assessing emotional tone. **Result:** Psycho-emotional disorders were revealed, which are manifested in increased anxiety, disturbances in emotional tone, situational and personal anxiety. **Conclusion:** Summarizing the data presented, we can conclude that psycho-emotional disorders are expressed in men with infertility, which manifest themselves in increased anxiety, disturbances in emotional tone, situational and personal anxiety. Infertile respondents are more prone to manifestation of asthenic and phobic conditions, which are also accompanied by vegetative disorders, which requires psychological support of patients.

KEYWORDS: male infertility, psycho-emotional disorders, psychology.

INTRODUCTION

A sterile marriage is a serious traumatic factor affecting the quality of life of spouses, both socially and psychologically. Currently, there is an insufficient number of studies devoted to the study of psychological states and behavior patterns of men in infertile marriage. Infertile men define their condition as close to the loss of the meaning of life, while it is common for them to experience anxiety, depression, fear of failure as a successor of the family, a feeling of depression, aggressiveness. In men in infertile marriages, a significantly high level of asthenia is observed, where the severity of asthenic disorders increased with the duration of the treatment of infertility.^[1,3,9]

When analyzing the psychological status of infertility, it should be noted that an infertile marriage leads to severe moral trauma for the spouses themselves and their relatives, and causes serious personal, family and social maladjustment. In the psychological status, the affective sphere most often suffers. Infertility significantly affects psycho-emotional status, causing chronic stress. Additional traumatic factors are family, household and work difficulties due to the time spent visiting medical institutions and financial expenses. The quality of life of infertile men is deteriorating, a state of dominance of thoughts about failure in the reproductive sphere is

formed. The state of anxiety and depression is determined from the moment of realizing reproductive failure and lasts throughout all stages of infertility treatment.^[2,7,10]

The aim of the work was to study the structure of psycho-emotional disorders in men with impaired fertility.

MATERIALS AND RESEARCH METHODS

The results of examination of 72 men aged from 26 to 45 years (main group) with impaired fertility were analyzed. The men underwent a special urological examination. The diagnosis was verified on the basis of complaints, anamnesis and examination, clinical and instrumental research methods. The control group consisted of 20 apparently healthy men who are married and had children. When forming the sample group, the principle of voluntary participation in the study was implemented, which made it possible to reduce the possibility of motivational distortions. The following psychometric methods were used in the work: the Spielberger-Khanin questionnaire of personal and situational anxiety; Hospital Anxiety and Depression Scale (HADS); scale for assessing emotional tone. Mathematical processing of the data was carried out by the methods of variation statistics using standard mathematical software packages

on a personal computer with the determination of the mean, its error, and Student's t criterion.^[4,5]

RESULTS AND ITS DISCUSSION

At the initial stage of examination and treatment, the majority of the men of the main group examined by us (95.0%) had irascibility, irritability, conflict, sleep disturbances, and decreased working capacity. In the course of the study, we paid attention to the nature of the complaints associated with the psycho-emotional state of the surveyed men, among whom fatigue, tension, nervousness, lethargy, fear, depression, and dizziness were the most common. The most common symptoms in the subjects were rapid fatigue (61 people - 85.0%), general weakness (44 people - 62.0%).

The Spielberger-Khanin test allows differentiated measurement of anxiety as a personal property and as a state associated with the current situation. Personal anxiety is an acquired behavioral position. Very high anxiety (> 46 points) may be associated with the presence of emotional breakdowns and psychosomatic diseases. Determination of the level of personal and situational anxiety showed that there are statistically significant differences in the level of situational anxiety among the respondents of the main group and respondents of the control group. Thus, in the main group, high anxiety was detected in 34 (48.0%) men, while in the control group this indicator was 15.0% ($p < 0.01$). According to the Spielberger-Khanin test, in men with infertility duration of more than 10 years, a very high personal anxiety was revealed and amounted to 47.7 ± 6.0 points. According to the Spielberger-Khanin test, personal anxiety was manifested by anxiety about his future, fear of a negative treatment result, and a lowered mood.^[6,8]

Situational anxiety manifests itself in a specific situation associated with an assessment of the complexity and significance of an activity, as well as a real and expected assessment. Situational anxiety is characterized by subjectively experienced emotions: tension, anxiety, concern, nervousness. Reactive (situational) anxiety characterizes the state of the individual specifically at the present moment in time, which is characterized by tension, anxiety, concern, nervousness in a given specific situation. This state arises as an emotional reaction to an extreme or stressful situation, it can be different in intensity and dynamic over time. The concern and anxiety that manifests itself in people with infertility is explained by the constant feeling of tension and excitement, constant repeated attempts at fertilization, causing a feeling of constant monthly anxiety. Realization of one's own childlessness, social inferiority is in itself a powerful stress and is accompanied by increased anxiety. Staying in constant stress can lead to neurotic emotional reactions to external situational stimuli.

Also, according to the results of the study, it was found that in men of the main group the level of personal anxiety was also higher than in men from the control group (52.0% versus 20.0%; $p < 0.01$). Personal anxiety is characterized by a state of unaccountable fear, an indefinite sense of threat, a readiness to perceive any event as unfavorable and dangerous. A person susceptible to this condition is constantly in a depressed mood, which may be associated with constant fear and excessive worry about the situation of infertility in the family. Thus, we can say that men with impaired reproductive function are more likely to experience anxiety, regardless of situational external factors.

When determining the level of anxiety and depression according to the hospital anxiety and depression scale (HADS), it turned out that in men the levels of anxiety and depression were within the normal range in all the study groups. However, it should be noted that with the duration of infertility, the level of anxiety in men increases from 5.1 ± 3.2 to 5.7 ± 0.8 points.

When determining the level of emotional tone, it was revealed that in the group of men of the main group, a greater tendency to disturbances in emotional tone was revealed in comparison with men who had children ($p < 0.01$).

Next, we analyzed the differences in the methodology for assessing neurotic states. According to the results obtained, the group of men in the main group is more characterized by a tendency to anxiety (40 people-56.0%). Based on the above, it can be assumed that men who do not have children and cannot conceive, experience an increased level of anxiety, since they are constantly in a state of tension and stress, which they experience based on the current situation (Fig. 1).

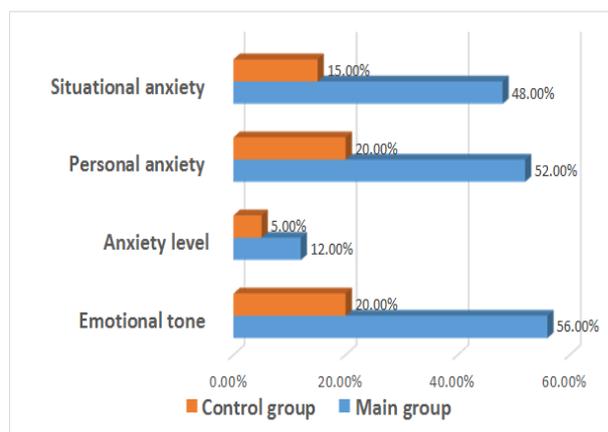


Fig. 1. Differences in the level of anxiety, depressive symptoms and emotional tone in the main and control groups.

According to the results of our study, the men of the main group are more likely to have symptoms of neurotic anxiety, asthenic weakness, fatigue of attention and lability of emotions with instability and significant mood

swings. Asthenized men in a situation of unsuccessful attempts to conceive are often weakened in self-control, they are impatient and often irritated due to the current situation and a lack of understanding of its causes.

Considering the above, men with infertility were generally characterized by a general low mood background, emotional instability, and anxiety. Such people were observed to concentrate on the idea of "parenting", which was closely related to the fear of not leaving behind offspring, and these fears constantly cause negative emotions in infertile people.

Summarizing the above data, we can conclude that in men with infertility psychoemotional disorders are expressed, which manifest themselves in increased anxiety, disturbances in emotional tone, situational and personal anxiety. Infertile respondents are more prone to manifestation of asthenic and phobic conditions, which are also accompanied by vegetative disorders, which requires psychological support of patients.

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