

Features of Personality Disorder in Adulthood

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Annotation: Personality disorders are a complex of deeply rooted rigid and maladaptive personality traits that cause specific perceptions and attitudes towards oneself and others, decreased social adjustment and, as a rule, emotional discomfort and subjective distress. They most often occur in adolescence or even childhood, and each type of disorder has its own characteristic age of formation. From the beginning of their emergence, these maladaptive personality traits are no longer defined in time and permeate the entire period of adult life. Their manifestations are not limited to any aspect of functioning, but affect all areas of the personality - emotional-volitional, thinking, style of interpersonal behavior.

Relevance. Classification of personality disorders. Classifications of personality disorders are varied; this article discusses the main types included in the ICD-10. It must be remembered that in practice there are no pure psychopathic groups; the doctor more often deals with mixed types.

Paranoid personality disorder

A person suffering from this disorder tends to attribute evil intentions to others; a tendency to form highly valuable ideas, the most important of which is the thought of the special significance of one's own personality. The patient himself rarely seeks help, and if he is referred by relatives, then when talking with a doctor he denies the manifestation of personality disorders. Such people are overly sensitive to criticism and are constantly dissatisfied with someone. Suspicion and a general tendency to distort facts by misinterpreting neutral or friendly actions of others as hostile, often lead to unfounded thoughts of conspiracies that subjectively explain events in the social environment.

Schizoid personality disorder

It is characterized by isolation, unsociability, inability to have warm emotional relationships with others, decreased interest in sexual communication, a tendency to autistic fantasies, introverted attitudes, difficulty in understanding and assimilating generally accepted norms of behavior, which manifests itself in eccentric actions. People suffering from schizoid personality disorder usually live by their own unusual interests and hobbies, in which they can achieve great success. They are often characterized by a passion for various philosophies, ideas for improving life, schemes for building a healthy lifestyle through unusual diets or sports activities, especially if this does not require direct dealing with other people. Schizoids may have a fairly high risk of becoming addicted to drugs or alcohol in order to gain pleasure or improve contacts with other people.

Dissocial personality disorder

Characterized by a noticeable gross discrepancy between behavior and prevailing social norms. Patients can have a specific superficial charm and make an impression (usually on doctors of the opposite sex). The main feature is the desire to continuously have fun, avoiding work as much as possible. Starting from childhood, their life is a rich history of antisocial behavior: deceit, truancy, running away from home, involvement in criminal groups, fights, alcoholism, drug addiction, theft, manipulating others in their own interests. According to P.B. Gannushkin, all this forms a kind of psychological complex, referred to in everyday life as "unscrupulousness." Antisocial behavior peaks in late adolescence (16–18 years).

Emotionally unstable personality disorder predominantly affects men, its manifestations are noted at the age of 20-40 years.

Emotionally unstable personality disorder

With this pathology, along with mood instability, there is a pronounced tendency to act impulsively, without taking into account the consequences. This type of disorder predominantly affects men. Manifestations are observed at the age of 20-40 years, with the achievement of middle age the severity of symptoms smoothes out. The main manifestation of this disorder is individual episodes of loss of control over one's aggressive impulses, which is expressed in attacks on others and damage to property. This is combined with a discrepancy between the level of aggressiveness exhibited and the triggering factor for the episode. After the burst of explosiveness has passed, manifestations of anxiety and depressive symptoms are observed - the person experiences a feeling of guilt and regrets what he has done. It is important to emphasize that outside of these episodes, manifestations of impulsivity and aggressiveness are not typical for the patient.

The prevalence of histrionic personality disorder in the population is 2-3%, with a predominance in women.

Histrionic personality disorder

Characterized by excessive emotionality and a desire to attract attention, which manifest themselves in various life situations. The prevalence of histrionic personality disorder in the population is 2-3%, with a predominance in women. It is often combined with somatization disorder and alcoholism. Let us list the main features characteristic of this disorder: seeking the attention of others towards oneself, inconstancy in affection, capriciousness, an irresistible desire to always be the center of attention, to arouse sympathy or surprise (no matter for what reason). The latter can be achieved not only by extravagant appearance, boasting, deceit, fantasy, but also by the presence of "mysterious diseases", which can be accompanied by pronounced vegetative paroxysms (spasms, a feeling of suffocation during excitement, nausea, aphonia, numbness of the limbs and other sensitivity disorders). The most intolerable thing for patients is indifference on the part of others; in this case, even the role of a "negative hero" is preferred.

Anancastic personality disorder (obsessive-compulsive)

Such people are characterized by a preoccupation with order, a desire for perfection, control over mental activity and interpersonal relationships to the detriment of their own flexibility and productivity. All this significantly narrows their adaptive capabilities to the surrounding world. Patients are deprived of one of the most important mechanisms for adapting to the world around them - a sense of humor. Always serious, they are intolerant of anything that threatens order and perfection. Constant doubts in making decisions, caused by the fear of making a mistake, poison their joy from work, but the same fear prevents them from changing their place of activity. In adulthood, when it becomes obvious that the professional success they have achieved does not correspond to their initial expectations and efforts, the risk of developing depressive episodes and somatoform disorders is increased.

Anxious (avoidant) personality disorder

They are characterized by limited social contacts, a feeling of inferiority and increased sensitivity to negative evaluations. Already in early childhood, these patients are characterized as excessively timid and shy; they perceive attitudes towards themselves distortedly, exaggerating its negativity, as well as the risk and danger of everyday life. They find it difficult to speak in public or simply address someone. Loss of social support can lead to anxiety-depressive and dysphoric symptoms.

Narcissistic personality disorder

The most clearly manifested ideas from adolescence are ideas about one's own greatness, the need for admiration from others and the impossibility of experiencing. A person does not admit that he can become the object of criticism - he either indifferently denies it or becomes furious. It is worth emphasizing the features that occupy a special place in the mental life of a person with narcissistic personality disorder: an unfounded idea of one's right to a privileged position, automatic satisfaction

of desires; the tendency to exploit, to use others to achieve one's own goals; envy of others or the belief in an envious attitude towards oneself.

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