

3 КЛИНИЧЕСКАЯ И СПЕЦИАЛЬНАЯ ПСИХОЛОГИЯ

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PSYCHOSOMATIC ASPECTS DURING THE COVID-19 PANDEMIC

Abstract

The article presents an analysis of studies of psychosomatic aspects during the COVID-19 pandemic in relation to somatoperception and bodily manifestations of the disease. The aim of the study is to study conceptual approaches to the concept of psychosomatic disorders, to determine its relationship with COVID-19 as a trigger of complications; to investigate the severity of psychosomatic disorders in various degrees of the course of the disease and by analyzing the features of the course of COVID-19 as a factor of psychosomatic disorders. The psychosomatic manifestations of the new COVID-19 coronavirus infection caused by the SARS-CoV-2 coronavirus are extremely diverse. At the same time, there is currently very little data on psychosomatic complications of COVID-19. There are more and more publications about the presence of such a complication as psychosomatic disorders. Psychosomatic disorders in patients with COVID-19 during hospital stay and in the future are analyzed. Possible mechanisms that may play a role in the development of psychosomatic disorders in patients with COVID-19 are discussed. Prospects for further research of psychosomatic disorders of COVID-19 are determined.

Key words: COVID-19, pandemic, psychosomatics, somatoperception, somatization.

Introduction

The pandemic as a psychosomatic significant stressor extends its influence not only to the sick and recovered, but also to other categories of persons. The condition of those who have encountered coronavirus directly should be considered taking into account the complex combination of somatogenic and nosogenic influences COVID-19. Changes in the work of the central nervous system caused by intoxication and other pathological mechanisms cause asthenization, disorders of emotional vegetative regulation and other somatogenic phenomena. This is accompanied by the processes of responding to the situation of the disease, which acts as an independent stressor. The neurophysiological foundations of the nosogenic effect of COVID-19 are attracting more and more attention of specialists; for example, the role of hyperactivation of the hypothalamic-pituitary-adrenal system, disorders of the expression of stress-dependent genes, etc. [1].

In addition to the “psychosomatic hyper-vigilance” induced by infodemia, it is necessary to take into account the mechanisms of somatization of unprocessed negative experiences (both directly related to the coronavirus threat and having a different nature). According to S.N. Enikolopov and colleagues, the growth of somatization is accompanied by a weakening of the ability to objectively assess the coronavirus threat and to maintain one’s emotional state on a comfortable level [7].

Studies of coping with stress in a pandemic revealed a direct relationship between manifestations of somatization both with concentration on emotions and the search for social support, and with the use of psychoactive substances, and the use of such substances, as well as denial and withdrawal to religion, were significantly more often recorded against the background of self-isolation in survivors of domestic violence and practically did not occur in owners of healthy family relations [10, 12].

The assessment of one’s own physical well-being during the period of self-isolation was in direct connection not only with the emotional background and the harmony of personal functioning, but also with the quality of communication, and the most psychologically vulnerable were persons with high

interpersonal sensitivity [16]. These data show that when studying the relationship of somatization with the nature of coping behavior against the background of a pandemic, one should take into account not only the macro-social context, but also the peculiarities of interpersonal relationships in the immediate environment.

Materials and methods

It seems relevant to clarify how people's perception of their own physicality and specifically the functioning of different levels of somatoperception change in today's conditions. The starting point for our analysis was the classical definition, according to which the internal picture of the disease is considered as a multilevel product of the sociogenesis of physicality, which determines the success of a person's coping with the effects of the disease [20].

In the structure of the internal picture of the disease, it is possible to distinguish sensitive, emotional, intellectual and motivational (personal-semantic) levels. Becoming the internal picture of the disease as an act of somatoperception usually represents a transition from the sensory tissue of the disease to its semantic perception (i.e. from the first level to the fourth), but under certain conditions it can occur in reverse order. Let us consider the psychological content of the listed levels and try describing them in relation to the "internal picture of COVID-19", as far as the literature data allow.

Sensations and states caused by the disease and forming its sensory the tissue forms the first level of the internal picture of the disease [14]. These phenomena, which have not yet received their meaning, are subjectively presented as diffuse discomfort. Trying to fix bodily signals of changes in homeostasis, a person describes his condition as "malaise", "poor health", and sometimes does not find a suitable characteristic at all, but his behavior undergoes changes, evidence of the discomfort that has arisen. Full – fledged application the corresponding experiences (verbal or figurative) can be observed only starting from the second level of the internal picture of the disease, which makes it problematic to study somatoperception at the first level.

Therefore, the level under discussion remains the least illuminated part of the structure of the internal picture of the disease, but obtaining indirect data about it is still feasible if we take into account the characteristic behavioral changes. However, one should be sure that the mechanisms of higher-order levels have not yet come into effect and could not affect the behavior of the patient. Conducting this kind of research, including in the problem field of the pandemic, would allow us to obtain information that is important both theoretically and practically.

When the experience of malaise is replaced by "listening" to oneself in order to determine the nature of the existing physical sensations and states, we can talk about the formation of the second level of the internal picture of the disease, the functional meaning of which consists in the primary meaning of the phenomena of the previous level [14, 20].

Person acquires the ability to find the area that bothers him on the body diagram and accurately describe what is happening, indicating the intensity, modality, duration, periodicity and other characteristics of sensations. They turn out to be for example, such formulations as "throbbing in the temples", "back ache", "cutting abdominal pain", "stiffness in the joints" are available. Since direct emotional reactions to sensations, body conditions and the consequences of illness for human life are formed here, this level is traditionally called emotional.

In the language of stress psychology, what is happening can be described as an assessment of the degree of negative valence of the stressor, which is a disease with accompanying physical changes. If actual experiences of this level cannot be stopped with the help of habitual or newly built coping strategies, a subjective perception of the situation as insurmountable is formed, and oneself as untenable and helpless, as a result of which the probability of maladaptation increases according to the type of "going into illness" [5]. The toolkit, which occupies a central place in the diagnosis of the features of the emotional level of the internal picture of the disease, is represented by various variations of the test "Choice of descriptors of interceptive sensations" [20].

Since this level acquires hypertrophied form in cases of dysmorphic phobia, alexithymia and in the presence of hypochondriacal traits, some information about it can also be obtained using techniques of the appropriate orientation.

Main provisions

Somatoperception against the background of a pandemic can be determined solely by informational influence and proceed in the absence of sensory tissue, which gives system-forming importance to the third level of the internal picture of COVID 19. The described process is difficult to predict, because even representatives of the professional medical community do not have exhaustive information about the new coronavirus infection.

On the other hand, the level under discussion may be counter-influenced by other components of the structure of the internal picture of COVID-19 [15, 17]. For example, intense anxiety in connection with the threat of infection can not only increase a person's sensitivity to the state of their body, but also cause or enhance cognitive distortions when processing incoming information; the search and discussion of information about the coronavirus then become peculiar ways of emotional self-regulation and gaining a sense of control over what is happening.

Looking for the necessary guidelines in the array of data obtained before the pandemic, it is impossible not to mention the study of the differences between collective and individual mental traumas.

It is shown that personal experience of a life-threatening disease causes more pronounced post-traumatic stress compared to situations of similar diseases in relatives and with natural disasters, but with pronounced identification with other victims or in the absence of the possibility of implementing "collective coping" these differences leveled [20].

The experience of differentiated stress assessment has been accumulated, N.E. Kharlamenkova and D.A. Nikitina showed that its most important psychopathological markers should be sought in the emotional (depression, anxiety) and interpersonal (increased sensitivity, paranoia) spheres. A comparison of these data with the results of studies on the topic of the pandemic will be possible, although not without reservations, when it will be possible to judge the long-term consequences of the transferred COVID-19 and the stress of the pandemic as such.

We add to the above that the mechanisms of the third level of the internal picture of the disease are more prominent they manifest themselves in chronic diseases compared to acute ones and acquire special practical significance if they are considered in the context of compliance problems (both in relation to COVID-19 and in relation to previously acquired chronic diseases).

Information impact is mediated, of course, by individual psychological characteristics of a person, his life experience and many other factors. A differentiated analysis of the third level of the internal picture of COVID-19 and the nature of its interrelationships with other levels in individuals who subjectively assess their awareness of coronavirus infection and pandemic in different ways seems promising, especially since such awareness is being studied more and more widely. Respondents interviewed by T.V. Malikova [13] rated themselves as informed about COVID-19 on a satisfactory level and reported that this state of affairs mostly suits them.

The more understandable COVID-19 and the pandemic seem to respondents, the more calmly they are perceived. By reducing the level of anxiety and stress, such "understanding" leads to less careful compliance with security measures. Is worth it should be noted that the level of subjective explainability and control of the situation with coronavirus is higher in the male part of the population, while women (especially young and those with insufficient income) perceive what is happening rather as an unclear threat [15].

The role of "clarity" of what is happening should probably be considered from the point of view of the completeness of the experience of the coronavirus threat. By comparison with the death of a loved one, the situation of his life-threatening disease may have greater stress precisely because of its incompleteness. Even before the pandemic, it was shown that experiencing such uncertainty often leads to the formation of post-stress disorders and pronounced maladaptation in the long term [9].

With a high level of post-traumatic stress, related to dangerous diseases, it does not matter significantly whether the respondent himself or someone close to him is ill. Psychopathological symptoms in women then acquire depressive, asthenopathic coloration, and in men, anxiety states with obsessive compulsive components or paranoid states come to the fore [20]. The results of such work are legitimate, if not directly extrapolated to the current situation, and then at least compared with it.

There is a distinction between non – specific (for example, headache, and weakness) and specific (for example, convulsions) neurological symptoms; a separate place is occupied by the aggravation of symptoms of chronic neurological diseases that already existed on the moment of infection. Another reason for the formation of neurological and psychopathological symptoms in coronavirus infection is side effect of pharmacotherapy. The given information gives grounds to refer people who have suffered from coronavirus disease to the group of special attention in relation not only to somatogenies, but also to concomitant distortions of the motivational level of the internal picture of COVID-19, which are subject to further study.

Literature review

A.Sh. Thostov and E.I. Rasskazova in “Psychological content of anxiety and prevention in the situation of infectors: protection against coronavirus or vicious circle anxiety?” state that looking for the necessary landmarks in the array of data obtained before the pandemic, it is impossible not to mention the research of the differences between collective and individual mental traumas.

According to N.E Kharlamenkova in “Intensive stressors and psychological consequences of their experience in youth and early adulthood” personal experience of a life-threatening disease causes more pronounced post-traumatic stress compared to situations of similar diseases in relatives and with natural disasters, but with pronounced identification with other victims or in the absence of the possibility of implementing “collective coping” these differences leveled.

N.E. Kharlamenkova and D.A. Nikitina in “Natural disasters and life-threatening diseases: Psychological consequences and features of consolation” showed that the most important psychopathological markers of it should be sought in the emotional (depression, anxiety) and interpersonal (increased sensitivity, paranoia) spheres.

V.V. Nikolaeva in “The effect of chronic sickness on the psyche” considering the fourth level of the internal picture of COVID-19, it should also be taken into account that the impoverishment of the target structure of activity is most pronounced in the presence of background neurodynamic changes.

As stated by Yu.E. Konyukhovskaya in “Stress funnel – Psychological consequences for patients who survived COVID-19”, summarizing the results of previously published works on severe acute respiratory syndrome, indicates that in a third of cases somatogenic cognitive disorders persist in patients even after a year after the cure.

I.I. Shepeleva in “COVID-19: The defeat of the nervous system and psychological and psychiatric complications” considers another reason for the formation of neurological and psychopathological symptoms in coronavirus infection as side effect of pharmacotherapy.

According to Jingqi Zhou in “Cognitive disorders associated with hospitalization of COVID-19: Results from an observational cohort study” unbiased and extensive search identified pre-existing Alzheimer’s disease and dementia as top risk factors for hospital admission due to COVID-19, highlighting the importance of providing special protective care for patients with cognitive disorders during this pandemic.

As specified by A.Sh. Thostov in “Psychology of physicality” motives related to labor, educational, creative activity, as well as communication, become less significant, yielding the leading role to the desire for recovery (or, on the contrary, to the aggravation of symptoms, as it happens with conversion).

According to Yu.E. Konyukhovskaya in “Stress funnel – Psychological consequences for patients who survived COVID-19” the data of modern studies allow us to conclude that the pandemic significantly changes the subjective values interaction with other people, one’s own body, health and many other values, regardless of whether a person has personally encountered coronavirus disease.

L.I. Vasserman in “The ratio of subjective and objective factors in the process of forming an inner picture of the disease and coping behavior” states that the type of attitude largely depends on the content of the fourth level of the internal picture of the disease to the disease.

Results and discussion

Speaking about the pandemic situation, researchers define the prevailing type of attitude to the disease as anosognosic, and this is typical not only for those who have suffered from coronavirus disease, but also for the population as a whole. But denial and avoidance were not among the prevailing

strategies coping neither immediately after the introduction of the self-isolation regime, nor later, which could well be expected; the first positions in the ranking of coping strategies were taken by adoption, active coping, positive reassessment and planning [6, 15]. These results are consistent with the data of the above-mentioned study by E.P. Belinskaya and colleagues [2], who found a predominance of interest in positive Internet content over negative against the background of the spread of coronavirus and the introduction of restrictive measures.

Regarding the sexual patterns of the alarming response to the pandemic, it can be said that women are more prone to it than men [15]. Studies of the psychological effects of everyday stress, published before the outbreak of the pandemic, have provided similar data. Women really perceive stressors related to well-being and health, as more subjectively significant, and their coping behavior is more associated with ideas about universal values (in particular, about mutual support) [19]. According to some data [3] pregnancy turns out to be a condition that reduces the significance of the influence of the information flow about the coronavirus and changing the structure of causes for alarm. Women expecting a child choose preventive measures based on their own considerations and are more concerned about the socio-economic consequences of the pandemic than about their own health and the course of pregnancy.

Conclusions

Like any other mass-scale stressor, the pandemic has a pathogenic effect on the psychosomatic sphere of almost every person. The need to cover not only patients and recovered, but also actually healthy individuals determines the complexity of studying the problem of COVID-19 in a psychosomatic way and sets promising directions for further development of this problem. The first (sensitive) level of the internal picture of COVID-19 remains the least diagnostic — it is possible to judge its content and dynamics only indirectly, based on behavioral signs.

The remaining levels, the study of which is well provided methodically, receive more and more detailed characteristics in modern publications. Therefore, studies that would shed light on the specifics of the first level of the internal picture of COVID-19 and clarify the nature of mutual influence are promising to determine its structural and dynamic characteristics in the presence of their own experience of overcoming coronavirus disease and in the absence of such.

REFERENCES

- 1 Алёхин А.Н., Дубинина Е.А. Пандемия: клиничко-психологический аспект // Артериальная гипертензия. – 2020. – Том 26. – № 3. – С. 312–316.
- 2 Белинская Е.П., Столбова Е.А., Цикина Е.О. Динамика информационных поисковых запросов о COVID-19 на этапе самоизоляции // Социальная психология и общество. 2020.
- 3 Блох М.Е., Аникина В.О., Савеньшева С.С. Стресс и беременность в условиях пандемии COVID-19 // Зейгарниковские чтения. Диагностика и психологическая помощь в современной клинической психологии: проблема научных и этических оснований / Материалы международной научно-практической конференции. – Москва, 18–19 ноября 2020 г.
- 4 Бойко О.М., Медведева Т.Ю., Ениколопов С.Н. и др. Психопатологические факторы нарушения сна в пандемию COVID-19 // Зейгарниковские чтения. Диагностика и психологическая помощь в современной клинической психологии: проблема научных и этических оснований / Материалы международной научно-практической конференции. Под ред. А.Б. Холмогоровой. – Москва, 18–19 ноября 2020 г.
- 5 Вассерман Л.И., Чугунов Д.Н., Щелкова О.Ю. Соотношение субъективных и объективных факторов в процессе формирования внутренней картины болезни и совладающего поведения // Консультативная психология и психотерапия. – 2019.
- 6 Ельникова О.Е. Концепт «отношение к болезни» как научная проблема. Обзор литературы // Комплексные исследования детства. – Том 2. – № 4. – С. 292–304.
- 7 Ениколопов С.Н., Бойко О.М., Медведева Т.И. и др. Динамика психологических реакций на начальном этапе пандемии COVID-19 // Психолого-педагогические исследования. – 2020. – Том 12. – № 2. – С. 108–126.
- 8 Жернов С.В., Ичитовкина Е.Г., Соловьев А.Г. и др. Особенности формирования психологической травматизации у сотрудников органов внутренних дел в период пандемии COVID-19 // Психопедагогика в правоохранительных органах. – 2020. – Том 25. – № 4(83). – С. 410–414.

- 9 Казымова Н.Н., Харламенкова Н.Е., Никитина Д.А. Тяжелые жизненные события и их психологические последствия: утрата или угроза потери близкого // Вестник Костромского государственного университета. Серия: Педагогика. Психология. Социокинетика. – 2019. – № 2.
- 10 Карнелович М.М. Связь психосоматических симптомов и копинг-стратегий личности в период пандемии COVID-19 // Зейгарниковские чтения. Диагностика и психологическая помощь в современной клинической психологии: проблема научных и этических оснований: Материалы международной научно-практической конференции. – Москва, 18–19 ноября 2020 г.
- 11 Конюховская Ю.Е. Воронка стресса – психологические последствия для пациентов, переболевших (переживших) COVID-19 // Астма и аллергия. – 2020. – № 2. – С. 8–12.
- 12 Крюкова Т.Л., Екимчик О.А., Опекина Т.П. и др. Стресс и совладание в семье в период самоизоляции во время пандемии COVID-19 // Социальная психология и общество. – 2020. – Том 11. – № 4. – С. 120–134.
- 13 Маликова Т.В., Новикова Т.О., Пирогов Д.Г. и др. Отчет по результатам опроса «Социокультурные представления о коронавирусной инфекции (COVID-19)» // Психология человека в образовании. – 2020. – Том 2. – № 1.
- 14 Николаева В.В. Влияние хронической болезни на психику. – М.: изд-во Московского университета, 1987. – 168 с.
- 15 Первичко Е.И., Митина О.В., Степанова О.Б. и др. Восприятие COVID-19 населением России в условиях пандемии 2020 года // Клиническая и специальная психология. – 2020. – Том 9. – № 2. – С. 119–146.
- 16 Польская Н.А., Разваляева А.Ю. Межличностная чувствительность в период самоизоляции: роль в выборе мер социального дистанцирования // Психологическая наука и образование. – 2020. – Том 25. – № 6. – С. 63–76.
- 17 Рассказова Е.И. Психологические и поведенческие факторы ипохондрических расстройств // Вестник Московского университета. Серия 14. Психология. – 2013. – № 3. – С. 83–101.
- 18 Рассказова Е.И., Емелин В.А., Тхостов А.Ш. Категоричные представления о причинах, проявлениях и последствиях коронавируса: психологическое содержание и связь с поведением // Вестник Московского университета. Серия 14. Психология. – 2020. – № 2. – С. 62–82.
- 19 Савенышева С.С., Головей Л.А., Петраш М.Д., Стрижицкая О.Ю. Самоактуализация, психологическое благополучие и повседневный стресс в период взрослости // Вестник КемГУ. – 2019. – Том 21.
- 20 Тхостов А.Ш. Психология телесности. – М.: Смысл, 2002. – 287 с.

REFERENCES

- 1 Aljohin A.N., Dubinina E.A. (2020) Pandemija: kliniko-psihologičeskij aspekt // Arterial'naja gipertenzija. V. 26. No. 3. P. 312–316. (In Russian).
- 2 Belinskaja E.P., Stolbova E.A., Cikina E.O. (2020) Dinamika informacionnyh poiskovyh zaprosov o COVID-19 na jetape samoizoljacji // Social'naja psihologija i obshhestvo. (In Russian).
- 3 Bloh M.E., Anikina V.O., Savenysheva S.S. (2020) Stress i beremennost' v uslovijah pandemii COVID-19 // Zeygarnikovskie chtenija. Diagnostika i psihologičeskaja pomoshh' v sovremennoj kliničeskoj psihologii: problema nauchnyh i jetičeskikh osnovanij / Materialy mezhdunarodnoj nauchno-praktičeskoj konferencii. – Moskva, 18–19 nojabrja 2020 g. (In Russian).
- 4 Bojko O.M., Medvedeva T.Ju., Enikolopov S.N. i dr. (2020) Psihopatologičeskie faktory narušenija sna v pandemiju COVID-19 // Zeygarnikovskie chtenija. Diagnostika i psihologičeskaja pomoshh' v sovremennoj kliničeskoj psihologii: problema nauchnyh i jetičeskikh osnovanij / Materialy mezhdunarodnoj nauchno-praktičeskoj konferencii. Pod red. A.B. Holmogorovoj. Moskva, 18–19 nojabrja 2020 g. (In Russian).
- 5 Vasserman L.I., Chugunov D.N., Shhelkova O.Ju. (2019) Sootnoshenie sub#ektivnyh i ob#ektivnyh faktorov v processe formirovanija vnutrennej kartiny bolezni i sovladajushhego povedenija // Konsul'tativnaja psihologija i psihoterapija. (In Russian).
- 6 El'nikova O.E. Koncept «otnoshenie k bolezni» kak nauchnaja problema. Obzor literatury // Kompleksnye issledovanija detstva. V 2. No. 4. P. 292–304. (In Russian).
- 7 Enikolopov S.N., Bojko O.M., Medvedeva T.I. i dr. (2020) Dinamika psihologičeskikh reakcij na nachal'nom jetape pandemii COVID-19 // Psihologo-pedagogičeskie issledovanija. V 12. No. 2. P. 108–126. (In Russian).
- 8 Zhernov S.V., Ichitovkina E.G., Solov'ev A.G. i dr. (2020) Osobennosti formirovanija psihologičeskoj travmatizacii u sotrudnikov organov vnutrennih del v period pandemii COVID-19 // Psihopedagogika v pravoohranitel'nyh organah. V. 25. No. 4(83). P. 410–414. (In Russian).

- 9 Kazymova N.N., Harlamenkova N.E., Nikitina D.A. (2019) Tjzhelye zhiznennye sobytija i ih psihologicheskie posledstvija: utrata ili ugroza poteri blizkogo // Vestnik Kostromskogo gosudarstvennogo universiteta. Serija: Pedagogika. Psihologija. Sociokinetika. No. 2. (In Russian).
- 10 Karnelevich M.M. (2020) Svjaz' psihosomaticheskikh simptomov i koping-strategij lichnosti v period pandemii COVID-19 // Zejgarnikovskie chtenija. Diagnostika i psihologicheskaja pomoshh' v sovremennoj klinicheskoi psihologii: problema nauchnyh i jeticheskikh osnovanij: Materialy mezhdunarodnoj nauchno-prakticheskoi konferencii. Moskva, 18–19 nojabrja 2020 g. (In Russian).
- 11 Konjuhovskaja Ju.E. (2020) Voronka stressa – psihologicheskie posledstvija dlja pacientov, perebolevshih (perezhivshih) COVID-19 // Astma i allergija. No. 2. P. 8–12. (In Russian).
- 12 Krjukova T.L., Ekimchik O.A., Opekina T.P. i dr. (2020) Stress i sovladanie v sem'e v period samoizoljatsii vo vremja pandemii COVID-19 // Social'naja psihologija i obshhestvo. V. 11. No. 4. P. 120–134. (In Russian).
- 13 Malikova T.V., Novikova T.O., Pirogov D.G. i dr. (2020) Otchet po rezul'tatam oprosa «Sociokul'turnye predstavlenija o koronavirusnoj infekcii (COVID-19)» // Psihologija cheloveka v obrazovanii. V. 2. No. 1. (In Russian).
- 14 Nikolaeva V.V. (1987) Vlijanie hronicheskoi bolezni na psihiku. – M.: izd-vo Moskovskogo universiteta, 168 p. (In Russian).
- 15 Pervichko E.I., Mitina O.V., Stepanova O.B. i dr. (2020) Vosprijatie COVID-19 naseleniem Rossii v uslovijah pandemii 2020 goda // Klinicheskaja i special'naja psihologija. V. 9. No. 2. P. 119–146. (In Russian).
- 16 Pol'skaja N.A., Razvaljaeva A.Ju. (2020) Mezhlichnostnaja chuvstvitel'nost' v period samoizoljatsii: rol' v vybore mer social'nogo distancirovanija // Psihologicheskaja nauka i obrazovanie. V. 25. No. 6. P. 63–76. (In Russian).
- 17 Rasskazova E.I. (2013) Psihologicheskie i povedencheskie faktory ipohondricheskikh rasstrojstv // Vestnik Moskovskogo universiteta. Serija 14. Psihologija. No. 3. P. 83–101. (In Russian).
- 18 Rasskazova E.I., Emelin V.A., Thostov A.Sh. (2020) Kategorichnye predstavlenija o prichinah, projavlenijah i posledstvijah koronavirusa: psihologicheskoe sodержanie i svjaz' s povedeniem // Vestnik Moskovskogo universiteta. Serija 14. Psihologija. No. 2. P. 62–82. (In Russian).
- 19 Savenysheva S.S., Golovej L.A., Petrash M.D., Strizhickaja O.Ju. (2019) Samoaktualizacija, psihologicheskoe blagopoluchie i povsednevnyj stress v period vzroslosti // Vestnik KemGU. V. 21. (In Russian).
- 20 Thostov A.Sh. (2002) Psihologija telesnosti. M.: Smysl, 287 p. (In Russian).

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ПСИХОСОМАТИЧЕСКИЕ АСПЕКТЫ ВО ВРЕМЯ ПАНДЕМИИ COVID-19

Аннотация

В статье приводится анализ исследований психосоматических аспектов во время пандемии COVID-19 в отношении соматоперцепции и телесных проявлений заболевания. Целью статьи является изучение концептуальных подходов к понятию психосоматических нарушений, определение его связи с перенесенным COVID-19 как триггером осложнений. Исследуются показатели выраженности психосоматических нарушений в различных степенях течения заболевания. Проводится анализ особенностей течения COVID-19 как фактора психосоматических нарушений. Психосоматические проявления новой коронавирусной инфекции COVID-19, вызываемой коронавирусом SARS-CoV-2, чрезвычайно многообразны. При этом в настоящее время имеется крайне мало данных о психосоматических осложнениях перенесенного COVID-19. Появляется все больше публикаций о наличии такого осложнения, как психосоматические нарушения. Анализируются психосоматические нарушения у пациентов на фоне COVID-19 в период пребывания в стационаре и в дальнейшем. Обсуждаются возможные механизмы, которые могут играть роль в развитии психосоматических нарушений у пациентов с COVID-19. Определены перспективы дальнейших исследований психосоматических нарушений COVID-19.

Ключевые слова: COVID-19, пандемия, психосоматика, соматоперцепция, соматизация.

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COVID-19 ПАНДЕМИЯСЫ КЕЗІНДЕГІ ПСИХОСОМАТИКАЛЫҚ АСПЕКТІЛЕР

Андатпа

Мақалада соматоперцепцияға және аурудың дене көріністеріне қатысты COVID-19 пандемиясы кезіндегі психосоматикалық аспектілерді зерттеуге талдау жасалады. Мақаланың мақсаты – психосоматикалық бұзылулар түсінігінің тұжырымдамалық тәсілдерін зерттеу, ондағы асқынулардың триггері ретінде тасымалданған COVID-19-бен байланысын анықтау. Ауру ағымының әртүрлі дәрежелеріндегі психосоматикалық бұзылулардың ауырлық көрсеткіштері зерттеледі. Психосоматикалық бұзылулар факторы ретінде COVID-19 ағымының ерекшеліктеріне талдау жүргізілді. SARS-CoV-2 коронавирусынан туындаған жаңа COVID-19 коронавирустық инфекциясының психосоматикалық көріністері алуан түрлі. Дегенмен қазіргі уақытта COVID-19-бен ауырғандардағы психосоматикалық асқынулар туралы мәліметтер өте аз. Психосоматикалық бұзылулар сияқты асқынулар туралы көптеген жарияланымдар пайда болуда. Стационарда болған кезеңде және одан кейінгі уақытта COVID-19 аясында пациенттердегі психосоматикалық бұзылулар талданады. COVID-19-бен ауырған науқастардың психосоматикалық бұзылыстарының дамуында маңызды рөл атқаратын ықтимал механизмдерге талдау жасалады. COVID-19 психосоматикалық бұзылыстарын одан әрі зерттеу перспективалары анықталды.

Тірек сөздер: COVID-19, пандемия, психосоматика, соматоперцепция, соматизация.