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**Objectives:** Somatoform-type disorders or 'medically unexplained' symptoms (MUS) represent variable group of psychopathological syndromes. It is considered that sensory, emotional, cognitive and personality mechanisms play role in the genesis of MUS.

**The aim** of the study was to analyze the relationship among personality types, clinical manifestations, and cognitive disturbances that occur in patients with MUS. **Material and Methods:** 106 patients with different MUS were studied with the help of clinical and psychological tests -

Minnesota Multiphase Personality Inventory (MMPI), 16 Personality Factors Questionnaire, Temperament and Character Inventory, Giessen Subjective Complaints List, Patient Health Questionnaire 15-Item Somatic Symptom Severity Scale, Toronto Alexithymia Scale, Somatosensory Amplification Scale, Addenbrooke's Gognitive Examination, Frontal Assessment Battery, Dissociation Scale. **Results:** Five types of behavior patterns of patients with MUS were revealed with the help of MMPI profile analysis – schizotypal hypochondria (SH), hysterical hypochondria (HYH), 'organic' hypochondria (OH), depressive hypochondria (DH) and pshychovegetative subdepressive hypochondria (PVH). Patients with HYH, DH, PVH were characterized by alexithymia, high dissociation and amplification. Patients with OH had disturbances of memory and spatial gnosis. SH had high hypochondriac concerns (irrational health believes), subdepressive affect, disturbances of process of conceptualization.

**Conclusion:** MUS have complex psychopathological structure, which includes not only quantity of somatic complaints, intensity of hypochondriac concerns, evidence of anxiety and depressive symptoms. Important components of MUS are represented by cognitive style disturbances (alexithymia, dissociation, sensory amplification) and neurocognitive deficit (insufficient spatial gnosis, constructive and conceptualization abilities, memory, dynamic praxis). Different personality and behavior styles evidently integrate this continuum of disturbances in several superordinate somatoform-type syndromes.