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Review Article

Energetic Model of Neuropsychic Disorders Formation of Schizoid Register

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Abstract

The article proposes an energy model of the formation of the schizoid structure of the nervous psyche, clinical scales of schizoidy and regression, types of neuropsychiatric defect and determining the schizoid register of neuropsychiatric disorders. Energy modules of functioning of nervous mentality are distinguished. A new perspective of schizotypal disorder is proposed.

Keywords: Energy level; Energy regime; Neuropsychiatric defect; Regression scales; Schizoid; Schizophrenia; Schizotypic disorder

Introduction

The schizoid spectrum of neuropsychiatric disorders includes schizophrenia, schizotypic disorder, clinical types of procedural neuropsychiatric defect and nuclear non-procedural forms of schizoidia. Progress in the study of schizoid spectrum disorders is associated with the classical works of Kraepelin, Bleuler, Kretschmer, Kanner, Schneider, Meehl, Snezhnevsky, Tiganov, Smulevich and other authors, however, due to the complexity of this problem, further scientific research is needed [1-9].

To date, there is no complete understanding of the intrinsic relationship between procedural and non-procedural schizoid spectrum disorders, early childhood autism, and other clinical forms of nuclear schizoidia, schizotypal disorder, and schizophrenia.

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Discussion

The organism is a unity, a system capable of maintaining the constancy of the internal environment through the mechanisms of homeostasis. The constancy of the internal environment, homeostasis is a factor of integrity and independence of the organism from the ecosystem, which dictates its structure through natural selection [10]. Violation of homeostasis is the essence of destruction and death. The organism, as a whole, a system, is formed through the reflection of internal needs and reciprocal launch of self-regulation processes aimed to meet this need, which leads to homeostasis and maintenance of the system.

Reactivity is one of the main properties of life. Reactivity is the ability of an organism to respond internally to changes in ecosystem requirements, the form of its interaction with the ecosystem, a special kind of reflection associated with the regulation of homeostasis. The system-forming factor of the activity of the organism is the reflected need, and the system-forming reactive structure is emotions. The development of emotions comes from the reflex ring and basal nuclei of homeostasis regulation, working on the principle of feedback [11]. Emotions, as a form of the psyche, reflect the needs of the body in matter, energy and information and carry an energy charge of self-regulation and goal-setting. Evolutionary and genetically according to the "stimulus - reaction", emotions are associated with effector processes and constitute with them a single complex of reactivity of the organism. The reactivity of the organism is associated with the energy modules of its life. The energy characteristic of the reactivity of the organism is temperament. Emotions, reflecting actual needs, are the center of adaptive reactivity, homeostatic regulation and integration [12], uniting the elements of the system into a single whole, and through the acceptor of action, they aim to create functional systems and homeostats responsible for the realization of the need, homeostasis and survival of the organism. In phylogeny, reflecting the dominant needs, emotions generate the development of soma, consciousness and intelligence. With the development of intelligence, the behavior of the organism as a system is increasingly mediated from the dominant needs and becomes more complicated.

It is necessary to distinguish two clinical scales of neuropsychiatric disorders of the schizoid spectrum, reflecting the deficit level of functioning of the nervous psyche:

- Schizoidia scale: early childhood autism, congenital asthenic, neuropathic, anxiety, dissocial and schizoid disorders. Congenital energy deficit of emotional structures leads to uneven and asynchronous development of the social psyche, its schizoid structure with clinical forms of social underdevelopment as the development of the social psyche requires a high energy potential. This is the nuclear non-procedural disorder of the schizoid spectrum [13,14].
- Regression scale: schizophrenia, schizotypic disorder, neuropsychiatric defect. Unlike schizoidia scale there are syndromes of procedural regression, progression and a neuropsychiatric defect.

Schizophrenia is the process of forming a neuropsychiatric defect that reflects adaptive regression, the transition of the nervous psyche to a lower but more stable energy level of functioning [12]. A defect of the nervous psyche is a set of symptoms of disintegration, persistent simplification, splitting or loss of neuropsychiatric functions [15]. On the congenital scale of schizoidia, procedural disorders can be imposed, there is a mixed clinical picture of underdevelopment and regression of neuropsychiatric activity.

We can distinguish the following structural and functional layers of the nervous psyche, reflecting the stages of phylogenesis:

- Biological psyche- the ability of the central nervous system, the brain to reflect biological information and use it in the regulation of the body.
 - a. neuro-vegetative and neuro-endocrine structures (involved in the regulation of homeostasis and physiological adaptation of the organism in the ecosystem; determine the overall energy level of life and the constitution of the individual.);
 - neuropsychic structures (organize adaptive biological behavior of an individual in nature; they are internally associated with neuro-endocrine and neuro-vegetative structures, determine temperament and nuclear character traits.).
- Social psyche is the highest form of mental development, the reflection of social information and its use in practice associated with the development of consciousness and intelligence. Social psyche subordinates and adopts the biological psyche, organizes adaptive human behavior in nature and society.

Brain maturation is a biosocial process. Biological maturation occurs simultaneously with the formation of its psychosocial functions through quantitative changes and quantum leaps - metamorphoses that reflect the stages of development. Biological and psychosocial are the two sides of the same process of development [16]. Biological maturation of the brain is the growth, increase in the power of structures, differentiation and integration of nervous tissue. Psychosocial maturation of the brain is the development of its psychosocial functions - consciousness, speech, higher emotions, thinking, intelligence, will. Biological development realizes its innate psychosocial potential. Biological and psychosocial determinants of development are interrelated. The biological determinant is intense during biological crises; the psychosocial determinant is intense in sensitive periods of development. The processes of maturation of the brain go from simple mental acts to higher social forms. The volume of potentials of development of nervous mentality is individual and is limited by congenital energy potential of a brain. Congenital energy deficit of the lower parts of the brain leads to uneven and asynchronous development of the social psyche, its schizoid structure with clinical forms of its psychosocial underdevelopment.

I believe that for the maturation of man as a socio-biological system, the following factors are necessary:

- The presence in the body of a socio-biological structure that can reflect social information. This structure in humans is the neocortex:
- 2. Social environment, social signal- a stimulus for the development of social potentials of the socio-biological structure;
- 3. Rich energy potential of system-forming reactive structures of the brain.

The most energy-consuming brain functions are socio-biological structures of the neocortex as the social signal requires a much more complex and differentiated work than processing a biological signal.

In the nervous system, there are different energy modes and levels of functioning, rigid and flexible regulation of energy exchange, which ensures plasticity of its work. Changing energy modules of work is a biological adaptation that protects nervous system from overstrain. The energy regime is a variable; its change is observed along with motivation changes, biorhythms, and fluctuations of affect. The energy level is an innate energy constant, the energy potential of regulatory emotional structures which determines the degree of reactivity, temperament and strength of integrative and homeostatic reactions [17].

The structure of the nervous psyche reflects its energy processes. Congenital energy deficit of the lower parts of the brain leads to uneven and asynchronous development and schizoid deficit structure of the nervous psyche. The schizoid structure expresses itself through the underdevelopment of the social psyche, which requires a high energy potential. The scale of energy deficit in schizoidia is large, so there are a variety of its nuclear clinical forms.

In schizophrenia, Rett, Geller syndromes, there is an adaptive decrease in energy level and structural and functional organization of the nervous psyche and the organism as an integrated system, the formation of pathological homeostasis and entropy increase in order to increase its stability in the ecosystem [18]. Neuropsychiatric defect associated with regression, procedural transition of the nervous psyche to a lower, but more stable energy level of functioning, is a biological adaptation and is aimed at protecting the nervous structure from disorganization and decay. Clinical types of neuropsychiatric defect reflect energy regression levels [12].

Procedural disorders can be superimposed on the scale of nuclear schizoidia. The scale of schizoidia is energetically deficient, the reactivity of the nervous psyche in schizoidia is low, so schizophrenia against the background of schizoidia progresses sluggishly, in ledges, in the form of schizotypal disorder. Schizotypal disorder is an inactive, sluggish form of schizophrenia with a mixed clinic of underdevelopment and regression of neuropsychiatric activity. Acute developed polymorphic attacks of schizophrenia occur with high reactivity of nervous psyche.

Comparison of scales of schizoidia and regression - types of neuropsychiatric defect is presented in table 1.

Scale of schizoidia, nuclear underdevelop- ment of the social psyche	Regression scale, types of neuropsychiatric defect
Asthenic disorder	Dependent
Neuropathic disorder	Hypochondriac
Anxiety disorder	Evasive
Dissocial disorder	Dissocial
Schizotypic personality disorder	Schizotypic
Asperger's Syndrome	Autistic
Disintegrative disorder	Dissociative
Kanner Syndrome	Apatoabulic
Paraorganic	Paraorganic
Nuclear energy deficit	Energy defect

Table 1: Comparison of schizoid and regression scales.

With congenital energy deficiency of reactive structures of the brain, nuclear forms of schizoidia are formed [19,20]. In procedural pathology, there is a formation of types of neuropsychic defect, regression, transition of the nervous psyche to a lower energy level of functioning, comparable to the level of energy deficit in schizoidia. Each energy level of functioning of the nervous psyche corresponds to its own clinical phenomenon.

Severe forms of schizoidia are complicated by mental retardation. The malignant course of schizophrenia leads to an evident neuropsychiatric defect, total disintegration and disintegration of neuropsychiatric activity [7,8,21].

Conclusion

- 1. Reflected need is a system-forming and mobilizing factor of the organism. Emotions, reflecting the needs of the body are center of adaptive reactivity, homeostatic regulation and integration.
- 2. The structure of the nervous psyche reflects the energy processes occurring in it.
- 3. There are various energy modules of functioning of nervous mentality, the change of which is biological adaptation. Energy regime transition is observed with changes in motivation, biorhythms and affective disorders. Reduction of energy level, regression, transition of nervous psyche to a lower energy level of functioning occurs in schizophrenia, formation of neuropsychiatric defect. In schizoaffective disorder, there is a combination of both adaptation mechanisms.
- The schizoid register of the nervous psyche includes two clinical scales:
 - a. scale of nuclear non-procedural schizoidia: early childhood autism, congenital asthenic, neuropathic, anxiety, dissocial and schizoid mental disorders with access to specific nuclear personality disorders;
 - regression scale, types of procedural neuropsychiatric defect: dependent, hypochondriac, evasive, dissocial, schizotypal, autistic, dissociative, apatoabulic. It reflects levels of energy regression.
- Clinical forms of schizoidia and types of procedural neuropsychiatric defect are comparable in content. Each energy level of functioning of the nervous psyche corresponds to its own clinical phenomenon.
- 6. Schizophrenia against the background of nuclear schizoidia progresses sluggishly, in ledges in the form of schizotypal disorder. Schizotypal disorder is an inactive, sluggish form of schizophrenia, combining features of underdevelopment and regression of the nervous psyche.
- In pathology, the social psyche suffers first, as the most energy-consuming and complex, the highest levels of which are morality and beauty.

References

- Kraepelin E (1899) Psychiatry. A textbook for students and doctors. In Leipzig: J. A. Barth [6th Ed.]. 2: 362-607.
- 2. Bleuler E (1920) Manual of Psychiatry. Berlin: 542.
- Kretschmer E (1919) Der sensitive beziehungsswahn. Ein Beira zur paranoidefrage und zur psychiatrischen charakterlehre. Springer.
- Kanner L (1943) Autistic disturbances of affective contact. Nerv Child 2: 217-250.
- Schneider K (1957) Primary and secondary Symptoms bee Schizophrenia. Fortschr Neurol Psichiatr 25: 487.
- Meehl PE (1962) Schizotaxia, schizotypic, schizophrenia. American Psychologists 17: 827.
- 7. Snezhnevsky AV (1983) Manual of psychiatry. Meditsyna, Moscow.
- 8. Tiganov AS (1999) Manual on psychiatry. Meditsyna, Moscow.
- Smulevich AB (2007) Personality disorder. Med Inform Agency, Moskva: 189 [in Russian].
- Cannon WB (1929) Organization for physiological homeostasis. Physiologica Rev 9: 399-431.
- Anokhin PK (1980) Key questions of the theory of functional systems. Nauka: Moscow [in Russian].
- Leonchuk SL, Leonchuk SS (2017) Emotional Volitional Defect Quintessence of Schizophrenia. Acta Psychopathologica 3:3.
- Bashina VM (1999) Autism in the childhood. Meditsyna, Moskva: 236 [in Russian].
- Borisova DY (2005) Specifics of the formation of the clinical picture of schizoid personality disorder in adolescents. J Neurol Psych 2: 13-19 [in Russian].
- Melekhov DE (1963) Clinical bases of disability prognosis in schizophrenia. Meditsyna, Moskva: 197 [in Russian].
- Vygotsky LS (1960) Development of higher mental functions. [in Russian].
- 17. Luria AR (1969) Higher cortical functions of the human. [in Russian].
- Bekhtereva NP (1972) The principles of functional organization of the human brain. Vestnik AMN USSR 9:43-49 [in Russian].
- Mnukhin SS, Zelenitskaya AE, Isaev DN (1967) On the syndrome of early childhood autism or Canner's syndrome. J Neurol Psych 10: 1501-1506 [in Russian].
- Lebedinsky VV (1985) Violations of mental development in children. MGU, Moscow: 148 [in Russian].
- Kovalev VV (1985) Semiotics and Diagnosis of Mental Illnesses in Children. Meditsyna, Moscow: 285 [in Russian].



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