

Международный
научно-практический
журнал

ПСИХИАТРИЯ ПСИХОТЕРАПИЯ И КЛИНИЧЕСКАЯ ПСИХОЛОГИЯ

2019, том 10, № 2

Psychiatry Psychotherapy and Clinical Psychology

International Scientific Journal

2019 Volume 10 Number 2

Нимфа, пытающаяся сбежать
от римского сатира 2-го века н.э.
Копия 2-го или 1-го века до н.э.
Греческий оригинал найден
недалеко от Тиволи.
Автор неизвестен.



ISSN 2220-1122 (print)
ISSN 2414-2212 (online)



ПРОФЕССИОНАЛЬНЫЕ
ИЗДАНИЯ

Беларусь

Главный редактор

Евсегнеев Роман Александрович

Редакционный совет:

Айзберг О.Р. (Минск)
Александров А.А. (Минск)
Ассанович М.А. (Гродно)
Байкова И.А. (Минск)
Докукина Т.В. (Минск)
Доморацкий В.А. (Минск)
Карпюк В.А. (Гродно)
Кирпиченко А.А. (Витебск)
Копытов А.В. (Минск)
Королева Е.Г. (Гродно)
Ласый Е.В. (Минск)
Остянко Ю.И. (Минск)
Пятницкая И.В. (Минск)
Скугаревская Е.И. (Минск)
Скугаревская М.М. (Минск)
Скугаревский О.А. (Минск)
Старцев А.И. (Минск)

Украина

Главный редактор

Мишиев Вячеслав Данилович

Научный редактор

Гриневиц Е.Г.

Редакционный совет:

Барановская Л.М. (Киев)
Волошук А.Е. (Одесса)
Дзержинская Н.А. (Киев)
Зильберблат Г.М. (Киев)
Зинченко Е.Н. (Киев)
Кожина А.М. (Харьков)
Линский И.В. (Харьков)
Марута Н.А. (Харьков)
Минко А.И. (Харьков)
Михайлов Б.В. (Харьков)
Овчаренко Н.А. (Северодонецк)
Пилягина Г.Я. (Киев)
Ревенок А.А. (Киев)
Сосин И.К. (Харьков)
Спирина И.Д. (Днепр)
Сырôпчатов О.Г. (Киев)
Шестопалова Л.Ф. (Харьков)
Юршева Л.Н. (Днепр)

Россия

Главный редактор

Краснов Валерий Николаевич

Редакционный совет:

Александровский Ю.А. (Москва)
Бобров А.Е. (Москва)
Бохан Н.А. (Томск)
Вельтищев Д.Ю. (Москва)
Говорин Н.В. (Чита)
Григорьева Е.А. (Ярославль)
Егоров А.Ю. (Санкт-Петербург)
Иванец Н.Н. (Москва)
Калинин В.В. (Москва)
Кулыгина М.А. (Москва)
Морозов П.В. (Москва)
Мосолов С.Н. (Москва)
Незнанов Н.Г. (Санкт-Петербург)
Немцов А.В. (Москва)
Николаев А.Л. (Чебоксары)
Петрова Н.Н. (Санкт-Петербург)
Пивень Б.Н. (Барнаул)
Решетников М.М. (Санкт-Петербург)
Савенко Ю.С. (Москва)
Северный А.А. (Москва)
Холмогорова А.Б. (Москва)
Шамрей В.К. (Санкт-Петербург)
Шевченко Ю.С. (Москва)

Рецензируемое издание

Журнал включен в международные базы Scopus, EBSCO, Ulrich's Periodicals Directory.

Входит в Перечень научных изданий Республики Беларусь для опубликования результатов диссертационных исследований (решение коллегии ВАК от 12.06.2009, протокол № 11/6).

Научные статьи, опубликованные в журнале, для украинских соискателей ученых степеней на основании приказа МОНмолодьспорта Украины от 17.10.2012 № 1112 приравняются к зарубежным публикациям.

Ответственность за точность приведенных фактов, цитат, собственных имен и прочих сведений, а также за разглашение закрытой информации несут авторы.

Редакция может публиковать статьи в порядке обсуждения, не разделяя точку зрения автора.

Ответственность за содержание рекламных материалов и публикаций с пометкой «На правах рекламы» несут рекламодатели.

Научные публикации.**Оригинальные исследования**

Гендерные различия клинической картины фазнопротекающих депрессий у пациентов с наличием соматической патологии в стадии ремиссии
Моисейчева О.В., Степанов И.Л. 190

Диагностическое значение времени ответа на вопросы у пациентов с депрессией при использовании компьютерного варианта шкалы HADS
Марута Н.А., Линская Е.И. 199

Клинические особенности подпороговой депрессии у подростков в зависимости от пола
Куприянова И.Е., Дашиева Б.А., Карауш И.С. 216

Повторное негативное мышление как медиатор воздержания от катастрофического мышления и невротических реакций
Басим Альдахадха 225

Когнитивные расстройства у пациентов умственного труда с хронической ишемией головного мозга, их профессиональная дезадаптация и выгорание
Трещинская М.А., Мишиев В.Д., Сулей Л.Н., Глоба М.В. 241

Опыт адаптации методики Communication Skills Attitude Scale
Чабан О.С., Хаустова Е.А., Омелянович В.Ю., Абдрахимова Ц.Б. 252

Особенности эмоциональных детско-родительских отношений в семьях больных шизофренией матерей
Карницкая Л.А. 267

Органическое психическое расстройство и агрессивность: принципы судебно-психиатрической оценки
Вандыш-Бубко В.В., Гиленко М.В. 283

Диагностика и лечение психических и поведенческих расстройств

Критерии и предикторы эффективности психотерапии тревожных расстройств
Тукаев Р.Д., Кузнецов В.Е. 291

Терапевтическая тактика при преждевременной эякуляции
Кибрик Н.Д., Прокопенко Ю.П. 303

Дискуссии

Системный подход в организации реабилитации пациентов с психическими расстройствами
Мишиев В.Д., Барановский К.Л., Барановская Л.М., Лебедев Д.С., Зеленов К.Е. 312

Проблемы правовой защиты наркозависимых лиц, которые получают заместительную поддерживающую терапию: опыт Луганского региона в сравнительном аспекте
Овчаренко Е.Н., Овчаренко Н.А., Шекера О.Г. 319

Лекции. Обзоры. Учебные материалы

Влияние маскированной депрессии на течение и прогноз заболеваний сердечно-сосудистой системы
Соколова А.А., Дмитренко К.Ю., Шишорин Р.М. 333

Из опыта работы

Образовательные программы профилактики синдрома выгорания у специалистов, работающих в сфере охраны психического здоровья
Юрьева Л.Н. 345

Сравнительный анализ особенностей проявления милосердия у медицинских работников и представителей других социэкономических профессий
Шевченко Н.Ф., Маркова М.В. 353

Международная конференция по биполярному расстройству: депрессия и психиатрия
Палин А.В., Ушкалова А.В., Козлов М.Ю., Афан М.В. 363

УДК 616.89.007.2 – 008.6:159.944 – 084:371.214

Yuriyeva L.

Dnipropetrovsk Medical Academy of the Ministry of Health of Ukraine, Dnipro, Ukraine

Юрьева Л.Н.

Днепропетровская медицинская академия Министерства здравоохранения Украины, Днепр, Украина

Educational Programs for Burnout Prevention among Healthcare Professionals in the field of Mental Health

Образовательные программы профилактики синдрома выгорания у специалистов, работающих в сфере охраны психического здоровья

Abstract

The article describes original educational program on burnout prevention among mental health professionals. There are provided the data on the prevalence and degree of burnout syndrome, characteristics of mentality and emotional condition of psychiatrists and addiction professionals, as well as the reasons for burnout development. The program is developed, taking into account the specifics of work of mental healthcare professionals and two periods of medical education: study in medical university (graduate) and post-graduate education (internship and/or residency training and advanced training courses). Educational strategies on burnout prevention and methodology are focused on two directions: informational and educational ones.

Keywords: educational programs on burnout prevention, mental health professionals, graduate and post-graduate education, methodology.

Резюме

В статье описывается авторская образовательная программа профилактики синдрома выгорания у специалистов, работающих в сфере охраны психического здоровья. Приведены данные исследования распространенности и выраженности синдрома выгорания, ряд характеристик ментальности и эмоционального состояния врачей-психиатров и наркологов и выделены причины, санкционирующие его формирование. Программа построена с учетом специфики работы специалистов сферы охраны психического здоровья, а также двух периодов медицинского образования: периода обучения в медицинском высшем учебном заведении (додипломное образование) и периода последипломного образования (этап обучения в интернатуре и этапы прохождения курсов повышения квалификации). Описаны образовательные стратегии превенции выгорания и методология ее осуществления в двух направлениях: информационном и обучающем.

Ключевые слова: образовательные программы профилактики синдрома выгорания, специалисты психиатрических учреждений, додипломное и последипломное образование, методология.

The adoption of the Comprehensive Mental Health Action Plan on 2013–2020 years at the 66th World Health Assembly (May 2013) and the European Action Plan for Mental Health (September 2013) is a clear example of the growing priority of the problem of mental health in the world [3, 6]. Back in 2005, at the WHO European Conference it was emphasized that work-related stress was an important problem for about one-third of the European Union's workers and the cost of dealing with mental health problems, in this connection, was 3–4% of gross national income [2].

Therefore, in the last decade, special attention has been paid to the protection of mental health of working professionals, including in medical institutions. In the resolution of the World Health Assembly "Health of workers: global action plan 2008–2017" the prevention of burnout syndrome is attributed to one of the important topics directly related to the problem of protecting of mental and physical health of a working person [4]. October 10, 2017 World Mental Health Day was devoted to the topic: "Mental health in the workplace". The above-mentioned documents emphasize the priority of actions aimed at prevention at the regional and national levels and international cooperation in this direction is welcomed [7].

The study of the problem of professional burnout in persons working in the field of mental health and the development of preventive and corrective programs for these specialists is carried out at the Psychiatry Department of Postgraduate Faculty of State Institution "Dnipropetrovsk Medical Academy of the Ministry of Health of Ukraine" from 1996 to the present. This article will focus on the preventive aspect of this problem.

The development of educational programs for the prevention of emotional burnout and its implementation into practice took place in three stages.

At the first stage, the problems of specialists working in the field of mental health were studied, which make a significant contribution to the formation of the syndrome of emotional burnout in medical personnel.

To study and analyze these indicators, the author proposed a research program that included a questionnaire using a specially developed form, conducting unstructured interviews and focus groups with people working in the field of mental health. The questionnaire included 39 questions aimed at studying socio-demographic indicators, a number of psychological characteristics, the dynamics of ideological attitudes and religiosity, satisfaction with their professional activities, some characteristics of mentality and emotional state, the dominant therapeutic ideology and cultural characteristics of domestic psychiatric service, and others.

In order to study the prevalence of the burnout syndrome and objectify the degree of its severity, along with the questionnaire, the doctors were examined with the help of the psychological test "The method of diagnosing the level of emotional burnout" (V.V. Bojko).

According to this program, 223 psychiatrist and narcologist from three regions of Eastern Ukraine (Dnipropetrovsk, Kirovograd, Zaporizhzhia) were examined.

As a result of the research it was revealed that 7,6% of respondents rated their condition as "depressed", 4,5% – noted "loss of meaning of life", 16,6% – noted pessimism and 26% ones had suicidal thoughts. Among those who

noted suicidal thoughts, 8% ones stressed that they visited them "often and very often".

It should be noted that at the questioning the presence of the burnout syndrome was noted by only 8,5% of doctors. However, in psychological testing, the percentage of specialists with a burnout syndrome of varying severity was detected in 79% of physicians. Correlations with work experience, gender, age and therapeutic ideology were revealed. The lowest burnout syndrome was observed in young specialists with a work experience of up to 5 years (66,7%), most often with specialists with working experience of 10–14 years (86,7%).

When assessing the severity of the burnout syndrome (according to the three-phase ranking), the fully formed first phase (stress phase) was detected in 7% of the respondents, the second phase (the phase of resistance) in 36%, and the third (the phase of exhaustion) in 6% of doctors.

It is noteworthy that young specialists already have signs of a burnout syndrome. The second phase of the burnout syndrome is already fully formed in 38% of young specialists and is still under formation in 23,8% of young doctors.

Among the physicians that were examined by us, 29% of the respondents were in the stage of formation of the third phase of the burnout syndrome (depletion phase), and the fully formed third phase was diagnosed in 6% of the doctors. Doctors with an experience of work in psychiatry for 4 to 9 years have the most pronounced signs of burnout syndrome. In addition, among doctors with more than 15 years of experience, the percentage of people at the stage of formation of the final stage of burning out is high, which is fraught not only with social maladjustment, expressed by professional deformity, neurotic and affective disorders, but also psychosomatic diseases.

The conducted correlation analysis of the data of anonymous questioning, unstructured interviews and focus groups with the severity of the burnout syndrome, revealed a number of reasons for potentiating burnout.

The reasons authorizing the development of the burnout syndrome were structured into 5 clusters:

- 1) the reasons, caused by the relationship in the team and role relationships;
- 2) the reasons for the peculiarities of working with patients suffering from mental and behavioral disorders;
- 3) reasons for the therapeutic ideology and cultural features of the domestic psychiatric service;
- 4) causes due to the personality characteristics of a specialist;
- 5) reasons for the peculiarities of the educational process in medical universities.

Students and doctors are taught a variety of medical technologies aimed at helping the patient and talk little about the impact of occupational hazards on the doctor herself/himself. According to the state curriculum for medical psychology for students of higher medical educational institutions of the III–IV level of accreditation, only in the section "Psychology of medical workers", which studies only 3 hours, there is a mention of the burnout syndrome and ways to prevent it [5].

At the second stage, educational programs for the prevention of burnout syndrome were created and introduced into the pedagogical process.

WHO recommendations on burnout syndrome prevention and own research data presented in the monograph "Occupational Burnout in Health Care: Formation, Prevention, Correction" formed the basis for the creation of educational programs aimed at the primary prevention of emotional burnout among mental health workers [12, 14].

The program is built not only taking into account the specifics of the work of mental health professionals, but also taking into account the transition to a system of continuous vocational education and two periods of medical education: the period of study at a medical university (undergraduate education) and the period of postgraduate education.

Period of undergraduate education

The primary prevention of burnout syndrome should start already during the training in the university and include two main areas: information and training. Students need to prepare for real medical work with its inevitable frustrations, disappointments, routineization of work, in order to avoid "shock reality" in the future.

1. Information direction. When studying various clinical disciplines, it is advisable to give students information about the requirements for the physical and psychological state that are necessary for successful work in one or another field of medicine, sources of emotional stress when working with different patient groups, as well as on the risk factors for the development of burnout and its prevention. In this case, a healthy lifestyle, in the broadest sense of this concept, will become an integral part of the professional thinking of a medical student.
2. Learning direction. At the stage of undergraduate education, it is advisable to teach students basic skills of professional communication, minimum skills of psychological protection, primary skills of self-help and mutual assistance. These skills should be practiced at each clinical department taking into account the specifics of patients. On the cycle of medical psychology and psychiatry, knowledge about professional burnout of medical workers and psychology of relationships in the "doctor-sister-patient-relatives" system should be expanded. At present, when the principle of cooperation has replaced the principle of paternalism in medicine, it involves informing the patient about all stages of treatment and obtaining from her/him the consent to conduct medical procedures, the requirements to the productive communicative skills of the doctor are increasing.

Thus, when completing a medical university, the doctor will already have a basic knowledge of professional deformations and their prevention, primary skills of self-help and mutual assistance, as well as the skills of professional communication.

Period of postgraduate education

The period of postgraduate education includes two stages: the stage of study in the internship and the stages of qualification upgrading courses. As our experience shows, the most real and productive period for considering

the numerous problems of professional burnout and its prevention are the periods of training of psychiatrists on the internal part of the internship and on the cycles of thematic improvement.

Internship training stage

The period of study in the internship is the main stage of professionalization, during which the problem of professional burnout should be considered in great detail, taking into account the specifics of working with mentally ill people.

The optimal approach to training a young specialist is personally oriented training with an emphasis on the development of the physician's personality and the formation of her/his productive relationships with patients.

1. Information direction.

In lectures and/or seminars, it is advisable to consider the following topics:

- 1) the influence of professional activity on the physician's personality;
- 2) the scale of the problem of professional burnout of medical workers. The emphasis is on specialists working in the field of mental health;
- 3) factors that sanction and limit the development of professional burnout;
- 4) characteristics of the burnout syndrome and its signs;
- 5) dynamics of the development of the syndrome of professional burnout and the model of its formation;
- 6) features of burnout syndrome among mental health workers (psychiatrists, narcologists, psychotherapists, telephone counselors, social workers, middle and junior medical personnel);
- 7) features of the therapeutic alliance of the physician, medical personnel, the patient and her/his relatives in psychiatric services;
- 8) correction and prevention of professional burnout.

2. Learning direction.

It is carried out in practical classes in the form of trainings and group sessions, where interns study:

- 1) communication skills in communication with patients and their relatives;
- 2) developing self-confidence;
- 3) relaxation techniques and their development;
- 4) techniques aimed at increasing the human tolerance of occupational stress (autogenic training, "vaccination against stress", systematic desensitization etc.);
- 5) time control techniques (Time management technique);
- 6) principles of conducting debriefing after a critical situation (for example, the situation of committing an aggressive act and suicide by a patient in a psychiatric hospital).

To identify the burnout syndrome and the level of its severity, psychological testing was conducted (with the voluntary consent of interns). With young doctors, who showed signs of burnout, corrective measures were taken.

Stages of training at qualification upgrading courses

At qualification upgrading courses, psychiatrists and narcologist get acquainted with information about the professional genesis and professional crises of the physician's personality, factors determining professional success, strategies of behavior in the professional environment and in a crisis situation, as well as programs for prevention and correction of burnout. Problems are discussed that are typical for specialists with different work experience and ways to overcome them [9, 11].

Taking into account the reasons authorizing the development of the burnout syndrome, which were identified at the first stage of the work, the doctors discuss strategies for the prevention and correction of the burnout syndrome in the following areas:

1. Strategies aimed at correcting the personal characteristics of the specialist and focusing on the level of the staff.
2. Strategies that focus on the therapeutic ideology and characteristics of the medical subculture.
3. Strategies aimed at the correction of relationships in the team.
4. Strategies that focus on the specifics of working with mentally ill people.

When conducting focus groups, strategies for preventing mental maladjustment in medical personnel during suicide in a psychiatric ward are discussed, discussions about the legal responsibility of the doctor are held. For example, on the topic "Can burnout syndrome in mental health workers be a circumstance mitigating legal responsibility?" [10, 13].

Training programmes can be carried out in various forms, have different lengths and different contents. They can be conducted for a group of specialists from one organization (for example, for doctors of departments and hospitals for compulsory treatment, for doctors-narcologists, for specialists working with HIV-infected patients) or for a group from different medical institutions. In each specific case, the subject matter should reflect the professional specificity of this particular group of listeners.

Unfortunately, in the future only those psychiatrists who specialize in psychotherapy, deeply study their psychological defenses, analyze the phenomena that arise when communicating with the patient, periodically participate in trainings, groups of personal growth, that is, professionally engaged in the prevention and correction of burnout in themselves.

Diagnosis of burnout syndrome and the first stages of correction can be carried out by trainee physicians during qualification upgrading courses (at their request). As our experience shows, doctors willingly (in some cases anonymously) are tested for the diagnosis of burnout syndrome and are subsequently consulted.

At the third stage we developed a computer program "Questionnaire "Assessment and forecasting of reforms in the field of mental health" [1].

The questionnaire consists of 31 questions and contains 6 sections:

- 1) demographic and professional characteristics of the respondents;
- 2) quality of life and social functioning of patients with various mental and behavioral disorders;
- 3) the organization of psychiatric and psychological assistance to the population in modern conditions;
- 4) some characteristics of mentality and emotional state of specialists working in the field of mental health;

- 5) problems and difficulties in professional activity and education of specialists at the present stage;
- 6) the peculiarities of the work of doctors of psychiatric institutions and medical psychologists with persons who survived the stress of social changes.

In the fourth and fifth sections, respondents are asked to answer questions about certain characteristics of their mentality and emotional state, assess their own theoretical and practical training, assess the impact of work in modern social conditions on the degree of emotional burnout, and consider issues related to psychological defense mechanisms, used by medical workers [8].

The last section of the questionnaire is devoted to the work of specialists of psychiatric institutions with persons who have suffered social and stressful disorders (refugees and immigrants, participants in the antiterrorist operation).

The program developed by us allows to create a data bank for identifying problems and changes that occur in the structure and organization of psychiatric care and in the work of a practical doctor. The obtained data made it possible to reveal the level of mental and social functioning of the staff of psychiatric services in modern conditions. With its help, the risk group in developing a burnout syndrome among doctors and medical psychologists was formed, with whom it is advisable to carry out preventive and corrective measures. Currently, the data are analyzed and the educational programs for postgraduate education of specialists working in the field of mental health are revised.

The key resource of the medical institution is the medical staff. Medical workers ensure the effectiveness of the medical and preventive institution, which is possible not only with their high professional competence, but also with a high potential for their health and motivation.

Prevention of burnout syndrome is especially important in the period of reforms, which lead to intensification of professional activity and involve a number of legal and organizational changes. Given the growing deficit of medical personnel in Ukraine (including psychiatric services), the increase in their average age, social and professional instability, increased emotional and physical workload in the workplace, the development and implementation at the state level of training programs for the prevention and correction of professional burnout of specialists working in the field of mental health should be a priority.

■ REFERENCES

1. Yur'yeva L.N., Nosov S.G., Nikolenko A.Ye., Filonenko N.Yu. A. c. *Computer program "Questionnaire "Assessment and forecasting of reforms in the field of mental health" (Ukraine), no 72087; publ. 18.05.2017.*
2. *Mental health: facing the challenges, building solutions: report from the WHO European Ministerial Conference.* EUR/04/5047810/6
3. *The European Mental Health Action Plan.* EUR/RC63/11 + EUR/RC63/Conf.Doc./8

4. *Workers' health: global plan of action*. WHA60.26
5. (2013) *Medichna psihologija : navchal'na programa dlja studentiv vishnih medichnih navchal'nih zakladiv III–IV rivnja akreditacii special'nostej "Likuval'na sprava", "Pediatrija", "Mediko-profilaktichna sprava"* [Medical psychology: training program for students of higher medical educational institutions of the III–IV level of accreditation of specialties "Medical Care", "Pediatrics", "Medical-Prephylactic Care"]. Kiev. (in Ukrainian)
6. *WHO's Mental Health Action Plan 2013–2020*. A66/10 Rev.1
7. (2017) *Mental health in the workplace* [electronic resource]. Available at: http://www.who.int/mental_health/in_the_workplace/ru/
8. Yur'yeva L.N., Nosov S.G., Nikolenko A.Ye. (2016) *Use of the questionnaire "Mental Health of the population, psychiatric and psychological aid in modern social conditions" in the practice of postgraduate education*. Proceedings of the VIII International educational and methodical conference (Cheboksary, Russia, October 31, 2016), pp. 370–372.
9. Yur'yeva L.N. (2017) *Krizisy professional'noj dejatel'nosti vracha i puti ih preodolenija* [Crises in the professional activity of the doctor and ways to overcome them]. *Zdorov'e Ukrainy*, vol. 2, pp. 23–24.
10. Yur'yeva L.N., Yur'yev A.Ye. (2015) *Mozhet li sindrom vygoranija u sotrudnikov psihiatri ches kih sluzhb byt' obstojatel'stvom, smjagchajushhim juridi ches kuju otvetstvennost'?* [Can the burnout syndrome of mental health professionals be the circumstance mitigating legal responsibility?]. *Novosti meditsiny i farmatsii*, vol. 53, pp. 52–54.
11. Yur'yeva L.N. (2013) *Professiogenez i professional'nye krizisy lichnosti vracha* [Profession genesis and professional crises of physician's personality]. *Vygoranie i professionalizatsiya* [Burnout and professionalization], Kursk: Kursk. gos. un-t., pp. 414–434.
12. Yur'yeva L.N. (2004) *Professional'noe vygoranie u medicinskih rabotnikov: formirovanie, profilaktika i korrekcija* [Occupational burnout in health care professionals: formation, prevention and correction]: Kiev: Sfera. (in Russian)
13. Yur'yeva L.N. (2014) *Suicid v psihiatri ches koj bol'nice: strategii profilaktiki psihi ches koj dezadaptacii u medicinskogo personala* [Suicide in a psychiatric hospital: strategies for preventing mental maladjustment in medical staff]. *Suitsidologiya*, vol. 4, pp. 32–36.
14. *Primary prevention of mental, neurological and psychosocial disorders* [electronic resource] / WHO, 1998: Available at: http://apps.who.int/iris/bitstream/10665/42043/1/924154516X_eng.pdf

Поступила/Received: 08.11.2018
Контакты/Contacts: 604@dsm.dp.ua