

9. Isabayeva, A. *Develop thinking and communication through active listening* // *Current research journal of pedagogics*. – 2022. – №3(4). – pp. 57-61 <https://doi.org/10.37547/pedagogics-crjp-03-04-13>.
10. Hidayat, R., Nugroho, I., Zainuddin, Z. and Ingai, T.A. *A systematic review of analytical thinking skills in STEM education settings* // *Information and Learning Sciences*, – 2024. – №7/8(125). – pp. 565-586. <https://doi.org/10.1108/ILS-06-2023-0070>
11. Murphy, P., Rowe, M., Ramani, G., & Silverman, R. *Promoting Critical-Analytic Thinking in Children and Adolescents at Home and in School* // *Educational Psychology Review*. – 2014. – №4(26). – pp. 561-578. <https://doi.org/10.1007/S10648-014-9281-3>.
12. Smirnova, A.S., Levickaya, L.V. *Osobennosti razvitiya myshleniya v mladshem shkol'nom vozraste* [Features of the development of thinking in primary school age] // *A young scientist*. – 2016. – № 11. – pp. 1783-1785.
13. Stepanova, O.V. *Osobennosti razvitiya myshleniya u detej mladshego shkol'nogo vozrasta* [Features of the development of thinking in children of primary school age] // *Priority scientific directions: from theory to practice*. – 2016. – No.22. – pp. 94-99.
14. Ryabova, O.V. *Formirovanie poznavatel'no-analiticheskikh umenij mladshih shkol'nikov sredstvami issledovatel'skoj deyatel'nosti: uchebnoe posobie* [Formation of cognitive and analytical skills of younger schoolchildren by means of research activities: a textbook.] – Chelyabinsk: Publishing House of the South Ural State Humanitarian University. – 2021. – P. 255

IRSTI: 15.81.61

10.51889/2959-5967.2025.82.1.002

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PECULIARITIES OF ALEXITYMIA LEVEL AND TYPE OF ATTITUDE TOWARDS THE DISEASE AMONG STUDENTS WITH PSYCHOSOMATIC DISEASES

Abstract

The article presents the results of study for peculiarities of alexitymia level and type of attitude towards disease among students with psychosomatic diseases. Urgency of the research is conditioned with the fact that modern society faces the growing problem of psychosomatic diseases, which are diagnosed among students with increasing frequency. Alexitymia influences the human's perception of the disease and attitude towards own health in whole, which makes the treatment process complicated. As methods, we used questionnaire survey with the aim to disclose the group of patients (conditional) with psychosomatic diseases, «Toronto alexitymia scale» (TAS-26) estimation of alexitymia level and method of «Type of attitude towards disease» for diagnostics of the type of attitude towards disease among students. Significant interrelations between alexitymia level and types of attitude towards disease among students with psychosomatic diseases were disclosed. It was found that students with high alexitymia level much more frequently have psychosomatic diseases compared to students with low alexitymia level. The significance of research is in its practical opportunities for improvement of collaboration of general practitioners and psychologists, which is especially important at treatment of students with psychosomatic diseases. The understanding of interrelation peculiarities of alexitymia and type of attitude towards disease among students gives the opportunity to select the most efficient complex methods of accompaniment and treatment, and promotes the patient retention towards the therapy.

Key words: psychosomatics, alexitymia, students, type of attitude towards disease, clinical psychology.

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ПСИХОСОМАТИКАЛЫҚ АУРУЛАРЫ БАР СТУДЕНТТЕРДЕГІ АЛЕКСИТИМИЯ ДЕНГЕЙІНІҢ ЕРЕКШЕЛІКТЕРІ ЖӘНЕ АУРУҒА ДЕГЕН КӨЗҚАРАС ТҮРІ

Аннотация

Мақалада психосоматикалық аурулары бар студенттердегі алекситимия деңгейінің ерекшеліктері мен ауруға деген көзқарастың зерттеу нәтижелері келтірілген. Зерттеудің өзектілігі қазіргі қоғамда студенттерде жиі диагноз қойылған психосоматикалық аурулардың өсіп келе жатқан проблемасына тап болуымен байланысты. Алекситимия адамның ауруды қабылдауына және жалпы денсаулығына деген көзқарасына әсер етеді, бұл емдеу процесін қиындатады. Әдістер ретінде психосоматикалық аурулары бар (шартты түрде) науқастар тобын анықтау мақсатында сауалнама, алекситимия деңгейін бағалау үшін "Торонто алекситимиялық мектебі" (TAS-26) және студенттердегі ауруға деген көзқарас түрін диагностикалау үшін "ауруға деген көзқарас түрі" әдістемесі қолданылды. Психосоматикалық аурулары бар студенттердегі алекситимия деңгейі мен ауруға деген қарым-қатынас түрлері арасында маңызды қатынастар анықталды. Алекситимия деңгейі жоғары студенттерде алекситимия деңгейі төмен студенттермен салыстырғанда психосоматикалық аурулар айтарлықтай жиі кездесетіні анықталды. Зерттеудің маңыздылығы оның жалпы тәжірибелік дәрігерлер мен психологтар арасындағы өзара әрекеттесуді жақсарту үшін практикалық әлеуетінде жатыр, бұл әсіресе психосоматикалық аурулары бар студенттерді емдеуде маңызды. Алекситимияның өзара байланысының ерекшеліктерін және студенттердің ауруға деген көзқарасының түрін түсіну сүйемелдеу мен емдеудің тиімді кешенді әдістерін таңдауға мүмкіндік береді, сонымен қатар пациенттердің терапияға деген адалдығын арттыруға көмектеседі.

Түйін сөздер: психосоматика, алекситимия, студенттер, ауруға деген көзқарас түрі, клиникалық психология.

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ОСОБЕННОСТИ УРОВНЯ АЛЕКСИТИМИИ И ТИПА ОТНОШЕНИЯ К БОЛЕЗНИ У СТУДЕНТОВ С ПСИХОСОМАТИЧЕСКИМИ ЗАБОЛЕВАНИЯМИ

Аннотация

В статье представлены результаты исследования особенностей уровня алекситимии и типа отношения к болезни у студентов с психосоматическими заболеваниями. Актуальность исследования обусловлена тем, что современное общество сталкивается с растущей проблемой психосоматических заболеваний, которые все чаще диагностируются у студентов. Алекситимия оказывает влияние на восприятие человеком заболевания и на отношение к собственному здоровью в целом, что затрудняет процесс лечения. В качестве методов было применено анкетирование с целью выявить группу больных (условно) психосоматическими заболеваниями, «Торонтская алекситимическая школа» (TAS-26) для оценки уровня алекситимии и методика «Тип отношения к болезни» для диагностики типа отношения к болезни у студентов. Выявлены значимые взаимосвязи между уровнем алекситимии и типами отношений к болезни у студентов с психосоматическими заболеваниями. Установлено, что у студентов с высоким уровнем алекситимии значимо чаще встречаются психосоматические заболевания в сравнении со студентами с низким уровнем алекситимии. Значимость исследования заключается в его практическом потенциале для улучшения взаимодействия между врачами общей практики и психологами, что особенно важно при лечении студентов с психосоматическими заболеваниями.

Понимание особенностей взаимосвязи алекситимии и типа отношения к болезни у студентов дает возможность подобрать более эффективные комплексные методы сопровождения и лечения, а также способствует улучшению приверженности пациентов к терапии.

Ключевые слова: психосоматика, алекситимия, студенты, тип отношения к болезни, клиническая психология.

INTRODUCTION

Modern society is faced with a growing problem of psychosomatic diseases, the prevalence of which is increasing among students, which causes low emotional and cognitive focus during this period of life. Student age is characterized by tough adaptation to new conditions, the need to make independent decisions, social integration and increased academic responsibility, which creates a high level of stress. Constant psycho-emotional stress, lack of rest and academic workload can lead to the formation of psychosomatic disorders, having a negative impact on the fundamental and mental health of young people [1, p. 25]. The occurrence of psychosomatic diseases is associated exclusively with psychogenic factors, among which alexithymia plays a special role. This condition is characterized by difficulties in recognizing one's own and other people's emotions, which leads to difficulties in differentiating natural emotions, as well as a reduced ability to understand the psycho-emotional state of other people. People with a high level of alexithymia have difficulty with emotional self-regulation, which can contribute to the accumulation of internal tension and somatization of experiences, leading to the development of psychosomatic symptoms. [2, p. 62]. Alexithymia influences the human perception of the disease and his attitude towards own health in whole, which makes the treatment process complicated. The problem of alexithymia and its influence on the development of psychosomatic diseases is widely discussed in the literature, however, studies directed towards the disclosure of connection between alexithymia and type of attitude towards disease among students are not highlighted enough today [3, p. 75].

In this regard, a study was conducted, the main purpose of which is a comprehensive study of the level of alexithymia and the type of attitude to the disease in students suffering from psychosomatic diseases. The relevance of this study necessitated a deep understanding of the psychological factors influencing the occurrence and course of psychosomatic disorders, as well as their impact on patient compliance. The significance of the work is its practical applicability, which leads to interaction between general practitioners and psychologists, which plays a key role in the diagnosis, treatment and relief of psychosomatic phenomena in student life. The results obtained can ensure the development of individualized support strategies based on the characteristics of the level of alexithymia and the type of attitude to the disease, which, in turn, ensures a higher level of effectiveness of therapeutic interventions. In addition, understanding the relationship between alexithymia and attitudes toward students with psychosomatic disorders allows not only to improve psychological counseling, but also to increase patients' adherence to therapy, improve their awareness of their own condition, and their willingness to cooperate with doctors. This is especially important in the era of developing medical and psychological treatment methods aimed at reducing the risk of chronic symptoms and improving the quality of life of students with psychosomatic disorders. [4, p. 150].

Object of the research - students of 1st-4th years with psychosomatic diseases.

Subject of the research – peculiarities of alexithymia level and type of attitude towards disease among students with psychosomatic diseases.

We have developed the following hypotheses:

1. Students with high alexithymia level significantly more often have psychosomatic diseases compared to students with low alexithymia level.
2. Among students with psychosomatic diseases, maladaptive type of attitude towards disease is met significantly more often compared to adaptive type of reaction.
3. Harmonic type of attitude towards disease is significantly more often met among students with low alexithymia level compared to students with high alexithymia level.

4. Anosognosic type of attitude towards disease is significantly more often met among students with high alexitymia level compared to students with low alexitymia level.

64 students of Karaganda University n.a. academician Ye.A.Buketov in the age of 18 to 22, studying in different faculties were volunteered as test people.

MATERIALS AND METHODS OF RESEARCH. On the first stage of research, we have performed questionnaire survey with the aim to disclose the group of patients (conditionally) with psychosomatic diseases. In the result of the survey, we stated that diseases related to psychosomatic disorders are clinically diagnosed among 34 students (53,1%) of 64 test people (100%). Thus, the urgency of problems of psychosomatic diseases mongering among students is confirmed.

Instruments for hypotheses checking were «Toronto alexitymia scale (TAS-26)» for measuring and estimation of alexitymia among students and method of «type of attitude towards disease» for disclosure of type of attitude towards disease among students [5, p. 62].

RESULTS. Results of measuring of alexitymia level among students of 1st-4th year using method of «Toronto alexitymia scale (TAS-26)» are shown in Table 1.

Table 1. - Results of measurements of alexitymia level among students of 1st-4th year

Alexitymia level	Students with psychosomatic diseases	Healthy students	Total
High	28 people (43,8%)	2 people (3,1%)	30 people (46,9%)
Moderate	0	12 people (18,8%)	12 people (18,8%)
Low	6 people (9,3%)	16 people (25%)	22 people (34,3%)
Total	34 people (53,1%)	30 people (46,9%)	64 people (100%)

During the research, it was disclosed that considering the total selection of respondents (64 people, 100%) high alexitymia level is found among 30 students (46,9%), which certifies that almost a half of test people have significant difficulties with recognition, understanding and expression of their feelings and emotions. For them, externally-oriented thinking is peculiar, as well as decrease or full absence of abilities to differentiate natural emotional sufferings and physical feelings.

Moderate alexitymia level is peculiar for 12 respondents (18,8%) of total selection (64 people, 100%), which certifies that students have difficulties in understanding and verbalization of own feelings. As distinct from students with high alexitymia level, they have better developed emotional intellect and less expressed externally-oriented thinking.

Group with low alexitymia level included 22 people (34,4%), which certifies that almost third part of students do not have issues with verbalization of feelings, understand their feelings properly, can understand psychoemotional state of other people, which promotes efficient communication and social adaptation. Students of this group have no alexitymia and tendency to it.

It is interesting that among students with high alexitymia level (30 students, 100%) large majority — 28 people (93,3%) — have diagnosed psychosomatic diseases. Only 2 students (6,7%) of this group have no psychosomatic disorders. While in group of students with low alexitymia level (22 people, 100%) psychosomatic diseases were diagnosed among 6 people only (27,2%), and large majority of respondents in this group are healthy (16 people, 72,7%). Fisher's angular transformation coefficient showed that $\varphi^*_{emp} = 5.408$ at $\varphi^*_{crit} = 2,31$ at level of significance 0,01, which certifies the presence of statistically significant differences in frequency of cases of psychosomatic diseases between group of students with high alexitymia level and group of students with low alexitymia level. So, the hypothesis is confirmed that students with high alexitymia level significantly more often have psychosomatic diseases compared to students with low alexitymia level. We suggest that this is conditioned by the fact that students with clearly expressed alexitymia have difficulties in recognition and expression of their emotions and feelings, which results the accumulation of internal stress. Suppressed feelings find the way out via corporal signs, because the body reacts the emotional stress physiologically, thus increasing the risk of development of psychosomatic diseases. Besides, high alexitymia level decreases the ability

of students to differentiate emotional and physical state, and in the result, physical feelings are perceived as disease symptoms. This causes anxiety and increases the risk of anchoring on physiological symptoms, which increases psychosomatic manifestations. Inability of students with expressed alexitymia to manage their emotions efficiently decreases their ability to adapt in stress situation as well [2, p. 66].

Further, using the method «Type of attitude towards disease» we have carried the analysis, where disclosed the leading types of attitude towards disease among students with psychosomatic diseases. Results on selection of students with psychosomatic diseases were distributed as follows (Figure 1).

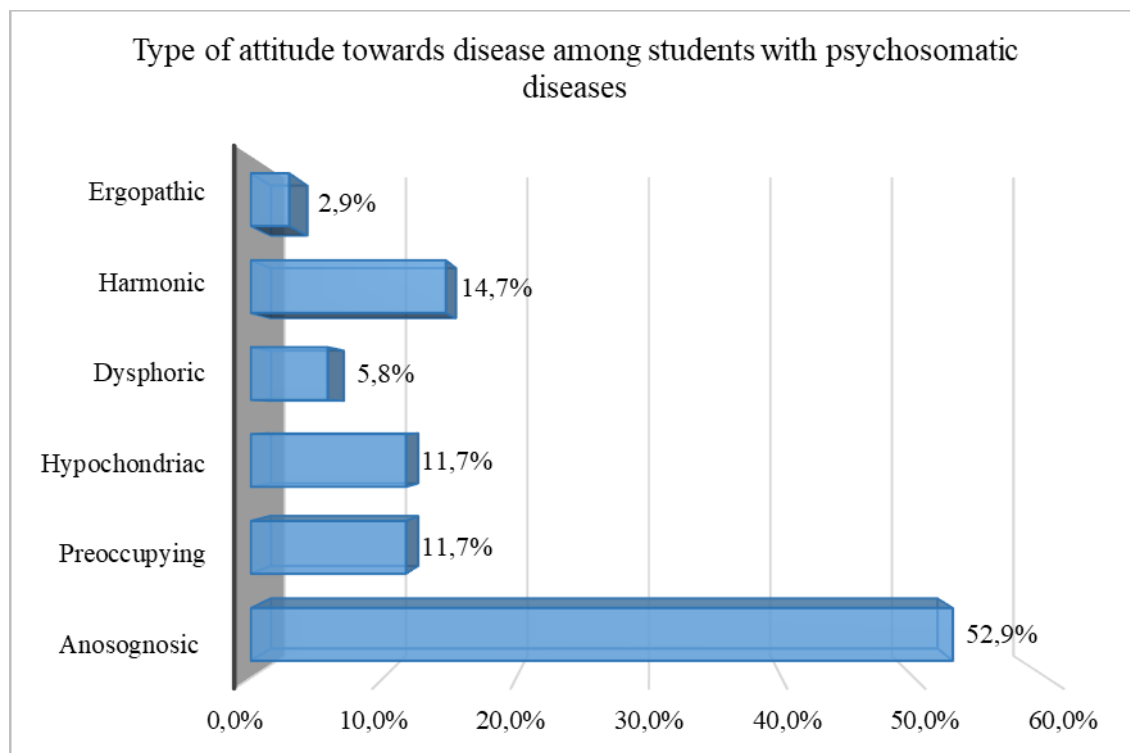


Figure 1 - Type of attitude towards disease among students with psychosomatic diseases

During the research it was disclosed that among total selection of students with psychosomatic diseases (34 people, 100%), 18 respondents (52,9%) have prevailing anosognosic type of attitude towards disease. For these students, rejection and devaluing of the severity of health state is peculiar. They have typically active displacement of idea about disease and its possible consequences, which is accompanied with neglectful and frivolous attitude towards medical recommendations and treatment. They often prefer to perceive symptoms as temporary fluctuations of health state, which do not require to be intervened, or as manifestations of unimportant diseases, which will be cured on their own. At presence of disease markers, such students may reject the medical examination and prefer independent recovery, avoiding diagnostics and specialized assistance [6, p. 354-355].

Only 5 respondents (14,7%) of total selection (34 people, 100%) have harmonic type as prevailing type of attitude towards disease. Students with harmonic type of attitude towards disease demonstrate weighed and realistic approach towards their health state. They estimate the severity of disease objectively, avoiding both exaggeration and underestimation of symptoms, and demonstrate the active strive to promote the treatment success. This position suggests the high level of self-organizing and readiness to follow medical recommendations, which allows these students to support active collaborations with doctors and follow the schedule of recovery [6, p. 354-355].

Equally, preoccupying (4 people, 11,7%) and hypochondriac (4 people, 11,7%) types of attitude towards disease were separated among students with psychosomatic diseases. For respondents with

preoccupying type of attitude towards disease high level of preoccupation and suspicion is peculiar, especially that related to possible unfavorable disease process and complications. Permanent thinking on risks and possibility of aggravation of health state often cause anxious thoughts, search of new information on disease and methods of its treatment, and need to replace the general practitioner or find extra specialists. Students with hypochondriac type of attitude towards disease are characterized with excessive concentration on subjective feelings and symptoms, which cause frequent complaints on different sick conditions and anxious perception of the slightest changes in health state. Such students are prone to exaggerate or dramatize symptoms, demonstrating the strong assurance in presence of severe disease, despite the lack of objective medical data [6, p. 354-355].

The less frequent are dysphoric (2 people, 5,8%) and ergopathic (1 person, 2,9%) type of attitude towards disease among students with psychosomatic diseases. Students with dysphoric type of attitude towards disease demonstrate dominating depressed, quarrelsome mood and are prone to resentment, especially regarding the attitude towards entourage and healthy people. They are characterized with constant dissatisfaction with their health state and violent outbursts targeted to people around, which might be blamed in the disease. Internal depression and soreness are often combined with expressed need in special attention and care, which causes clamorous, and sometimes tyrannical behavior towards people around. Students with ergopathic type of attitude towards disease demonstrate the persistent rush to labor and educational activity, despite their disease. Their attitude towards disease is expressed in «deeping into work», which allows these students to avoid the realization of their health state and save the sense of control. Such approach is accompanied with high level of responsibility and often obsession with work, which becomes the priority, sometimes displacing the care on own health state. [6, p. 354-355] Hypochondriac and preoccupying types are characterized with intrapsychic direction of personal reaction on disease, which conditions the disorders in psychic and social adaptation among students of this group. Such students can demonstrate increased anchoring on their symptoms, pessimism towards the recovery perspectives and activity decrease in everyday life. Dysphoric type of attitude towards disease has intrapsychic direction of personal reaction, which causes disorders in social adaptation. Students with this type of attitude towards disease may demonstrate heterogenic aggressive trends, blaming people around in their disease. This causes conflicts in interpersonal communication and aggravates their social maladaptation [6, p. 354-355].

It is interesting to emphasize that maladaptive types of attitude towards disease (dysphoric, hypochondriac, preoccupying) are prevailing for 10 respondents only (29,4%) among students with psychosomatic diseases (34 people, 100%). In major part of respondents (24 people, 70,5%) types of attitude towards disease are not characterized with psychic and social maladaptation. Thus, the hypothesis is rejected that among students with psychosomatic diseases, maladaptive types of attitude towards disease are met significantly more often compared to adaptive type of reaction. We suggest that this might be explained by the fact that in the result of research, the large majority of students of our selection have anosognosic type of attitude towards disease as leading one; for it, active performance of such psychic defense mechanisms as rejection and displacement are peculiar. These defense mechanisms allow students to avoid the understanding of severity of their health state and emotional problems connected to it, which, in turn, leads to absence of expressed social and psychic maladaptation.

Further we have analyzed types of attitude towards disease among students with high alexitymia level (Figure 2).

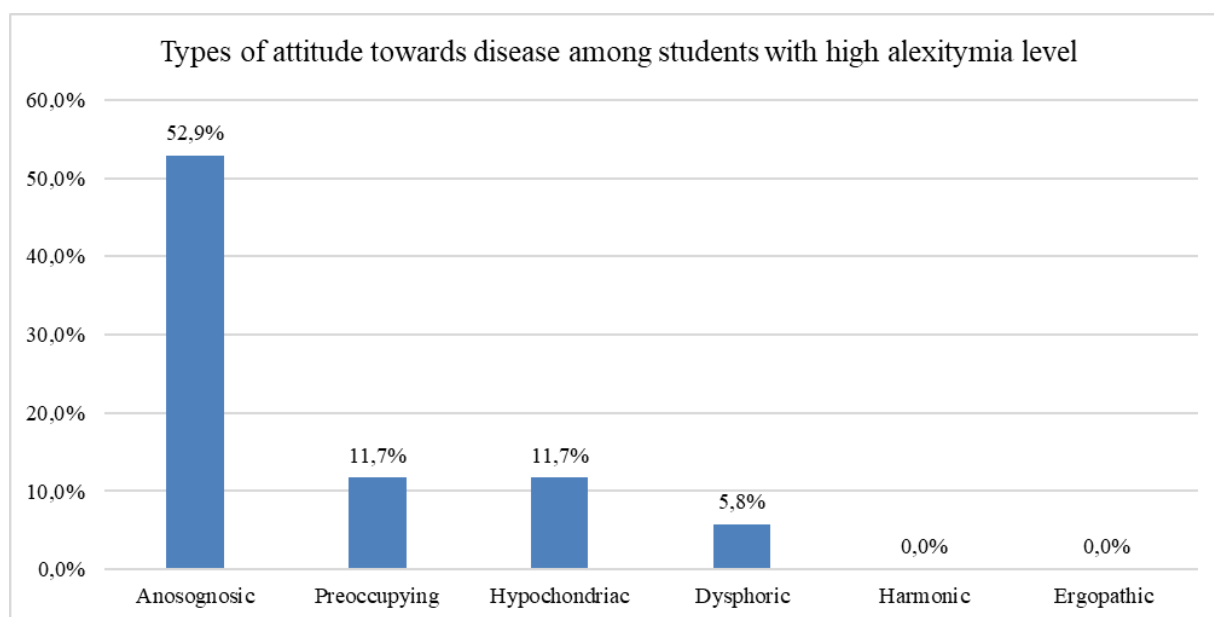


Figure 2 - Types of attitude towards disease among students with high alexitymia level

Among total number of respondents with psychosomatic diseases (34 people, 100%) high alexitymia level was found among 28 students (82,3%). Among them, large majority have anosognosic type of attitude towards disease (18 people, 52,9%). 4 students (11,7%) have preoccupying type of reaction, and exactly the same number of respondents demonstrate hypochondriac type of attitude towards disease. Dysphoric type of attitude towards disease (2 people, 5,8%) is met less frequently. It is interesting that in this group of test people, no person demonstrated the harmonic type of attitude towards the disease.

Further we have analyzed type of attitude towards disease among students with low alexitymia level (Figure 3).

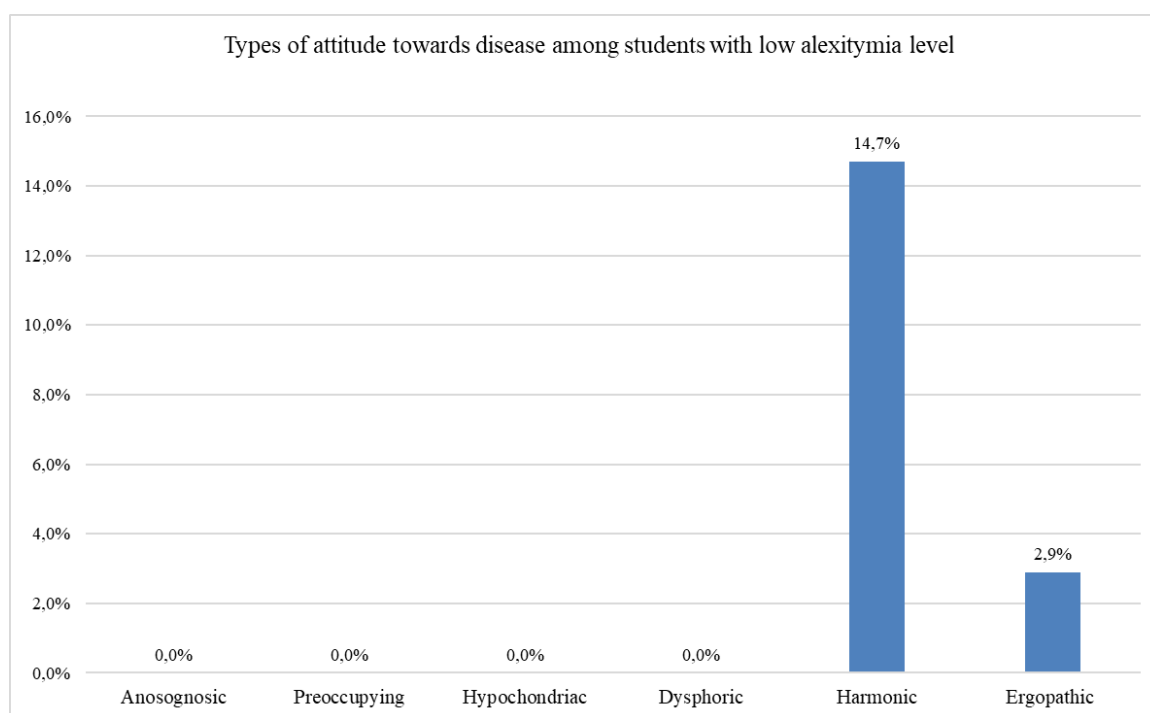


Figure 3 - Types of attitude towards disease among students with low alexitymia level

Among total number of respondents with psychosomatic diseases (34 people, 100%) low alexitymia level was found among 6 students (17,6%). Among them, 5 students (14,7%) have harmonic type of attitude towards disease, and one (2,9%) – ergopathic type of reaction.

Further we have analyzed the ratio of types of attitude towards disease and alexitymia level among students with psychosomatic diseases. The received data are presented in Table 2.

Table 2. – Ratio of types of attitude towards disease and alexitymia level among students with psychosomatic diseases

Type of attitude towards disease	High alexitymia level	Low alexitymia level
Anosognosic	18 people (52,9%)	0
Preoccupying	4 people (11,7%)	0
Hypochondriac	4 people (11,7%)	0
Dysphoric	2 people (5,8%)	0
Harmonic	0	5 people (14,7%)
Ergopathic	0	1 people (2,9%)

According to the result of the study, harmonic type of attitude towards disease is met among 5 respondents (14,7%) with low alexitymia level, and is not met among students with high alexitymia level. With the aim to disclose the statistic significance of differences between selections, Pearson chi square test was applied, with the following value: $\chi^2 = 27.36$ ($p < 0,05$), which confirms the hypothesis on the fact that harmonic type of attitude towards disease is significantly more often met among students with low alexitymia level compared to students with high alexitymia level. We suggest that this is related to more developed skills in emotional self-control and mindfulness among students, which conditions adapted attitude towards the health and promotes their readiness to collaborate in treatment process. Students with harmonic type of attitude towards disease, as a rule, show the flexibility in recognition of their health state, which allows them to participate actively in treatment process, without exaggeration and underestimation of disease manifestations. They are able to support the balance between care on their own health and saving of social activity, and are motivated to follow doctors' recommendations as well [7, p. 130-135].

It is important to emphasize that anosognosic type of attitude towards disease is met among the half of respondents with psychosomatic diseases (18 people, 52,9%). All of them are included into the group of students with high alexitymia level. At that, none of the respondents with low alexitymia level showed the anosognosic type of attitude. With the aim to disclose the statistic significance of differences between selections, бы Pearson chi square test was applied, with the following values: $\chi^2 = 34,0$ ($p < 0,05$), which confirms the hypothesis that anosognosic type of attitude towards disease is significantly more often met among students with high alexitymia level compared to students, with low alexitymia level. We suggest that this is conditioned with the fact that students with expressed alexitymia face difficulties in understanding of own psychoemotional state, thus, such defense mechanisms as rejection, suppression and displacement are activated [8, p. 15]. Besides, they are distinguished with their externally oriented thinking, which results the avoiding of diving into the internal world and self-reflection. Thus, high alexitymia level influences the attitude towards disease as well, which is characterized with rejection in this case. At presence of disease indications, such students may reject the medical examination and prefer independent recovery, avoiding diagnostics and specialized assistance. In case of admitting, they follow some advices, showing the euphoria and elation, which, however, may cause future violations of treatment regime and health state deterioration. Absence of adequate estimation of health state may negatively influence the treatment process [9, p. 253].

It is interesting that such maladaptive types of attitude towards disease, as preoccupying, hypochondriac and dysphoric ones are met only in group of students with high alexitymia level, and are not met among students with effort alexitymia, which appears at suppression of emotions. Difficulties in

differentiation of emotional and corporal symptoms appearing at alexitymia, may cause the anchoring on physiological symptoms peculiar for hypochondriac type of attitude towards disease. Dysphoric type of attitude towards disease, peculiar with aggressive attitude towards people, negativism, blaming people in disease appearance, may appear due to external locus of control, peculiar for people with, and suppression of own feelings [10, p. 5-8].

CONCLUSION. Thus, the conducted research disclosed the significant connections between alexitymia level and types of attitude towards disease among students with psychosomatic diseases. It was proved, that students with alexitymia level significantly more often have psychosomatic diseases compared to students with low alexitymia level. As well, obtained data give us the opportunity to make the conclusion that harmonic type of attitude towards disease is significantly more often met among students with low alexitymia level compared to students with high alexitymia level. Anosognosic type of attitude towards disease, in turn, is significantly more often met among students with high alexitymia level compared to students with low alexitymia level. Thus, alexitymia influences both emotional sphere of the person, and formation of peculiar models of attitude towards disease, which requires special attention at complex approach to treatment of psychosomatic diseases by internist doctors and psychologists. Practical significance of this research is in the opportunity to apply results at the development of prophylaxis programs and interdisciplinary interaction of general practitioners and psychologists, which is extremely important at maintenance of patients with psychosomatic disorders.

List of used literature:

- 1 Бройтигам В., Кристиан П., Рад М. Психосоматическая медицина. – 1999. – 376 с.
- 2 Бобкова Е. Н., Иващенко Д. М. Роль алекситимии в развитии психосоматических заболеваний //Актуальные проблемы психосоматики в общемедицинской практике: Сб. научн. статей [Под ред. В.И. Мазурова]. СПб. – 2012. – С. 61-67.
- 3 Беспалов Ю. И. и др. К вопросу о психосоматических заболеваниях //Вестник Казахского Национального медицинского университета. – 2014. – №. 2-2. – С. 74-76.
- 4 Esin R. G. et al. Алекситимия-основные направления изучения //Журнал неврологии и психиатрии им. СС Корсакова. – 2014. – Т. 114. – №. 12. – С. 148-151.
- 5 Баль А. Внутренняя картина болезни у людей с психосоматическими нарушениями //Психология когнитивных процессов. – 2020. – №. 9. – С. 62-71.
- 6 Тарасова А. А. Влияние типа отношения к болезни на субъективное благополучие у студентов //Редакционная коллегия. – 2011. – С. 354.
- 7 Гаранян Н. Г., Холмогорова А. Б. Концепция алекситимии //Социально-психиатрический журнал. – 2003 //Т. – Т. 13. – С. 128-145.
- 8 Хватова М. В., Юрьева Т. В. Состояние когнитивно-эмоциональной сферы как фактор психосоматического здоровья студентов //Валеология. – 2003. – №. 2. – С. 39-43.
- 9 Alexander, F. Psychosomatische medizin // F. Alexander. - Berlin; New York: de Gruyter. –1950. - 267 p.
- 10 Xie Y. et al. The association among negative life events, alexithymia, and depressive symptoms in a psychosomatic outpatient sample //BMC psychiatry. – 2024. – Т. 24. – №. 1. – С. 451. –DOI: 10.1186/s12888-024-05902-0.

References

- 1 Brojtigam V., Kristian P., Rad M. Psihosomaticheskaya medicina. – 1999. – 376 s.
- 2 Bobkova E. N., Ivashinenko D. M. Rol' aleksitimii v razvitiі psihosomaticheskikh zabolevanij //Aktual'nye problemy psihosomatiki v obshchemedicinskoj praktike: Sb. nauchn. statej [Pod red. VI Mazurova]. Spb. – 2012. – S. 61-67.
- 3 Bespalov Yu. I. i dr. K voprosu o psihosomaticheskikh zabolevaniyah //Vestnik Kazahskogo Nacional'nogo medicinskogo universiteta. – 2014. – №. 2-2. – S. 74-76.
- 4 Esin R. G. et al. Aleksitimiya-osnovnye napravleniya izucheniya //Zhurnal nevrologii i psikiatrii im. CC Korsakova. – 2014. – Т. 114. – №. 12. – S. 148-151.