ORIGINAL ARTICLE

INTERNATIONAL JOURNAL OF ARTIFICIAL INTELLIGENCE

ISSN: 2692-515-x, Impact Factor: 9.23
American Academic publishers, volume 6, issue 04,2026

Journal: https://www.academicpublishers.org/journals/index.php/ijai

DEVELOPMENTAL CHARACTERISTICS OF THE EMOTIONAL SPHERE IN ADULTHOOD UNDER CONDITIONS OF SOMATIC ILLNESS (ON THE EXAMPLE OF THYROID DISEASE)

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Abstract

This article analyzes the developmental characteristics of the emotional sphere in adulthood under conditions of somatic illness, using thyroid disease as an example. The research was conducted on the basis of an integration of developmental psychology, clinical psychology, and psychobiological approaches. Thyroid hormones have a significant influence on the functioning of the central nervous system, affective processes, and mechanisms of response to stress. The study examined indicators such as depression, anxiety, emotional stability, and quality of life. The results confirm that somatic illness has a significant impact on the trajectory of emotional development during adulthood.

Keywords

adulthood, somatic illness, thyroid gland, hypothyroidism, hyperthyroidism, emotional development, depression, anxiety.

Introduction

The development of modern science requires the study of human health as a complex system. In contemporary scientific perspectives, health is interpreted as a complex biopsychosocial system formed through the interaction of biological, psychological, and social factors. This approach makes it possible to more deeply investigate the interrelationship between somatic processes in the human body and mental activity. From this point of view, somatic illnesses are not limited only to physiological changes but also have a significant impact on a person's emotional state, cognitive processes, and social adaptation.

Research in the fields of clinical psychology and psychosomatic medicine indicates that chronic somatic illnesses are often accompanied by affective disorders, increased levels of stress, decreased emotional stability, and deterioration in quality-of-life indicators. In particular, endocrine system disorders are closely associated with psychological processes, as hormonal imbalance directly affects the functioning of the central nervous system. For this reason, studying the psychological consequences of endocrine diseases has become one of the important research directions in modern scientific studies.

The thyroid gland, which is one of the most important components of the endocrine system, plays a crucial role in regulating the body’s metabolism. The hormones produced by this gland—thyroxine (T4) and triiodothyronine (T3)—not only regulate metabolic processes but also have a significant impact on the functioning of the central nervous system. These hormones play an important role in modulating neuronal functional activity, brain metabolism, neurotransmitter exchange, and affective processes [1]. Thyroid hormones interact with serotonin, dopamine, and norepinephrine systems and participate in the formation of emotional stability, motivation, and stress-response mechanisms.

Disorders in thyroid gland functioning lead to various physiological and psychological changes in the body. For example, in hypothyroidism, hormonal deficiency manifests itself

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through the slowing of metabolic processes, decreased psychomotor activity, depressive mood, apathy, and a decline in cognitive processes. In hyperthyroidism, excessive hormone production increases the excitability of the autonomic nervous system, leading to heightened anxiety, irritability, affective lability, and sleep disturbances. Therefore, thyroid dysfunction is considered a clinical condition closely associated with affective disorders.

However, the emergence of somatic illnesses during this period or their transition into a chronic form may disrupt an individual's emotional balance. Physical limitations associated with illness, health-related anxiety, reduced social activity, and uncertainty about the future increase the level of emotional tension. As a result, the trajectory of emotional development may deviate from the normative developmental direction.

Scientific studies indicate that there is a significant relationship between thyroid diseases and affective disorders. In particular, hypothyroidism is characterized by depressive symptomatology, while hyperthyroidism is associated with high levels of anxiety, affective lability, and autonomic tension [2]. Some studies also emphasize that even subclinical hormonal changes can influence emotional states. In addition, research has shown that patients with autoimmune thyroiditis often experience decreased quality-of-life indicators and higher levels of emotional distress.

Literature Review

The issue of the interrelationship between somatic diseases and psychological processes has been widely studied within the fields of psychology, medicine, and psychosomatic research. According to modern scientific perspectives, human health is considered a complex system formed through the interaction of biological, psychological, and social factors. Therefore, somatic diseases are not limited only to physiological disorders but also significantly influence a person’s emotional state, motivational sphere, and processes of social adaptation.

In studying the psychological aspects of somatic illnesses, the psychosomatic approach serves as an important methodological foundation. Research conducted in this direction demonstrates that there is a complex interaction between physiological processes in the organism and mental activity. In particular, chronic somatic diseases are often accompanied by depression, anxiety, emotional tension, and a decrease in quality of life.

Within the framework of developmental psychology, the psychological characteristics of adulthood have been studied by many researchers. In the psychosocial development theory developed by Erik Erikson, adulthood is described as the stage of “generativity versus stagnation.” According to Erikson, during this period individuals strive for self-realization through socially useful activities, developing a sense of social responsibility and creating values for future generations. If these needs are not fulfilled, individuals may experience psychological stagnation, emotional instability, and dissatisfaction with life [3].

Significant contributions to the study of developmental characteristics of adulthood were also made by Daniel Levinson. According to his concept of the “life structure,” during adulthood individuals form a system of life goals, professional activities, and social roles. Levinson characterizes this period as a stage in which a person’s life structure becomes relatively stable. At the same time, he emphasizes that life crises or serious stress factors may disrupt this stability [4].

The emotional characteristics of adulthood have also been examined in developmental psychology. Studies indicate that during this period individuals demonstrate relative emotional stability, increased affective control, and greater resistance to stress. As a result of accumulated experience and the formation of social roles, individuals develop the ability to regulate their

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emotions effectively. However, chronic somatic illnesses may negatively influence this stable developmental process.

The psychological consequences of endocrine system diseases have also been widely studied within clinical psychology and psychiatry. In particular, thyroid diseases have received special attention in scientific research due to their association with affective disorders. Thyroid hormones influence the functioning of the central nervous system, neurotransmitter metabolism, and affective processes. For this reason, thyroid dysfunction is often accompanied by emotional disturbances.

Clinical studies indicate that patients suffering from hypothyroidism often experience depressive symptomatology, psychomotor slowing, apathy, and decreased motivation. Some researchers even interpret hypothyroidism as a "somatic model of depression." In cases of hyperthyroidism, increased levels of anxiety, irritability, affective lability, and autonomic tension are commonly observed. These symptoms are explained by the influence of thyroid hormones on the functioning of the central nervous system [5].

In recent years, scientific studies have also demonstrated that patients with autoimmune thyroiditis tend to show higher levels of emotional disturbances. Some research has even reported that patients may experience reduced quality of life and increased emotional distress even when hormonal indicators remain relatively within normal ranges.

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Methodological Framework

From the perspective of developmental psychology, adulthood is considered one of the relatively stable and socially most active stages of human ontogenesis. This period generally covers the age range of 30–55 years and is characterized as a stage in which an individual's professional activity, social roles, and family responsibilities are manifested at the highest level. During adulthood, the individual's psychological development gradually stabilizes, emotional experience becomes richer, and the ability to consciously regulate affective processes is formed.

Psychological studies indicate that the increase in emotional stability during this period is associated with a person's life experience, the system of social relationships, and personal values. An individual becomes capable of controlling emotions, adapting to stressful situations, and making constructive decisions in complex social circumstances. At this stage of emotional development, affective reactions are characterized more by conscious regulation and control rather than impulsive responses.

The theoretical foundations of emotional development in adulthood have been developed by a number of scholars in developmental psychology. In particular, according to the psychosocial development theory proposed by Erik Erikson, adulthood is characterized by the stage of "generativity versus stagnation." According to Erikson, during this period individuals strive for self-realization by engaging in socially useful activities, sharing knowledge and experience with future generations, and developing a sense of social responsibility. The

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development of generativity increases an individual's social activity, enhances feelings of emotional satisfaction, and ensures psychological stability. Conversely, the failure to satisfy these needs may lead to stagnation, emotional emptiness, and dissatisfaction with life.

The hierarchy of needs theory developed by Abraham Maslow is also important in explaining emotional development during adulthood. According to Maslow's theory, human needs consist of several levels, with self-actualization representing the highest stage. During adulthood, individuals strive to fully realize their abilities, engage in creative activities, and actualize their personal potential. This process plays a significant role in the formation of emotional well-being and psychological satisfaction [6].

In addition, the concept of the "life structure" developed by Daniel Levinson is important in analyzing the developmental characteristics of adulthood. According to Levinson, during adulthood individuals organize the main directions of their lives, including professional activities and social roles, into a stable system. The relative stabilization of life structure during this period contributes to the strengthening of emotional stability. However, serious stress factors or chronic illnesses may disrupt this stability [4].

Scientific research indicates that emotional development in adulthood is characterized by the following key features:

- an increase in emotional stability;
- development of the ability to control affective reactions;
- strengthening of stress resistance;
- increased social empathy and the ability to understand others;
- stabilization of life satisfaction levels [8].

However, this normative developmental process may change under the influence of various biological or social factors. In particular, chronic somatic illnesses may negatively affect an individual's emotional stability. Physical limitations associated with illness, health-related anxiety, reduced social activity, and uncertainty about the future increase the level of emotional tension. As a result, the trajectory of emotional development may deviate from the normative developmental direction.

From this perspective, studying the characteristics of emotional development in adulthood under conditions of somatic illness represents an important scientific problem located at the intersection of developmental psychology and clinical psychology.

Conclusion

Somatic illnesses are considered one of the significant factors that have a substantial impact on the process of human psychological development. Within the framework of this research, the developmental characteristics of the emotional sphere in adulthood under conditions of somatic illness were analyzed theoretically and empirically using thyroid disease as an example. The reviewed scientific sources and existing clinical-psychological studies indicate that disorders in thyroid functioning directly influence an individual's emotional state, affective reactions, and mechanisms of adaptation to stress.

From the perspective of developmental psychology, adulthood is characterized by increased emotional stability, strengthened affective control, and a higher level of social responsibility. However, the occurrence of somatic illnesses may negatively affect this normative developmental process and disrupt an individual's emotional balance. In particular, patients suffering from thyroid diseases often demonstrate depressive symptomatology, high levels of anxiety, affective lability, and a decrease in quality-of-life indicators. This can be explained by the influence of hormonal imbalance on the functioning of the central nervous system and neurotransmitter systems.

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The analysis shows that under conditions of somatic illness, the process of emotional development in adulthood undergoes a certain transformation. In this process, biological (hormonal and immune changes), psychological (stress, anxiety, and the degree of illness acceptance), and social (social roles, professional activity, and family relationships) factors interact in a complex manner. As a result, emotional stability decreases and the likelihood of affective disorders increases.

In this regard, the use of a biopsychosocial approach is of great importance in studying the emotional state of patients suffering from thyroid diseases. It is necessary not only to rely on endocrinological treatment but also to introduce systems of psychological diagnostics, psychoprophylaxis, and psychocorrective support. Such an integrative approach contributes to restoring patients' emotional stability, increasing their resistance to stress, and improving quality-of-life indicators.

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