

increased by 3, 9 times, and for the period 120-150 days by 6, 6 times. The jump has taken place within 5 months, when the relative gain of length oviduct has made 147, 4 %.

The growth of weight of a body of the hens is active on 1 and 2 months of development, and oviduct on 4 and 5. These parameters are reduced, accordingly on 6, 7 and 6 month.

Thus, having compared the received results on weight of a body, weight and length of oviduct, it is possible to make the conclusion that the increase of alive weight of the hens occurs per the first 5 months and further is stabilized. In development oviduct, opposite, the first 4 months are the period of relative rest. And since 4 months there is an intensive development of an organ. The period 120-150 days, when weight of oviduct is increased by 104 times, and length by 6, 6 times is necessary to consider critical.

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HOW MUCH HEALTHY IS "APPARENTLY HEALTHY" MEGACITY RESIDENT (IN TERMS OF KRASNOYARSK)

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Nowadays, more than a third of the world's population lives in big cities. Socially meaningful and professionally conditioned stressogenic diseases manifest themselves more acutely in a megalopolis. At the functional body reserves decreasing the priority value is acquired by dyscrasia diagnostics for a complex and effective sanitation of the internal environment. A non-specific resistance cellular link functional-metabolic reserve evaluated by means of chemiluminescent (CL) method on *Tono-Oka et al.* (1983) in the modification of Zemskov V.M. with co-authors (1988) can serve one of the body's adaptative potential criteria. On the basis of the analysis of hemophages' "breathing outburst" kinetics parameters in 1252 persons of various sexes, ages and health states the reserve coefficients RC_S , RC_I and the prooxidant shift evaluation index were calculated. The norm is characterized by the values $RC_S \geq 3, 8$; $RC_I \geq 10$; $EI = 0\%$; a disease - $RC_S \leq 1, 5$; $RC_I \leq 2$; $EI > 33\%$, a pre-existing disease - $1, 5 < RC_S < 3, 8$; $2 < RC_I < 10$; $0\% < EI < 33\%$. The parameters association of "apparently healthy" and absolutely healthy people testified that in 80% of clinically asymptomatic active working age adults of both sexes the non-specific cellular defence functions in conditions of chronic oxidative stress. It is fraught with adaptative mechanisms deterioration. Authentically, in 6% of the selection a phagocytic cells' "func-

tional palsy" has been found out. In children in conditions of constant urbanized environment chemical pollution an extreme adaptative mechanism with a higher prooxidant shift against the imbalance of mineral status and antioxidant components than in adults is realized. In 38% of pregnant women a double rise of cellular immune reactivity reserve capacity "is paid" by three-time intensification of the prooxidant shift and eight-time increase of the endogenous free-radical background. The reserve coefficient RC_S increase adaptative price is the prooxidant shift increase manifested in men 1, 7 times more intensive than in women. The phagocytic functional response is characterized by a reversed quotient (overshoot) of activated and basal production of free radicals and the reserve coefficient RC_I decrease 30 times at inflammatory, 3 times – at noninflammatory diseases and twice – at the pre-existing disease stage. The nonspecific resistance functional disturbances at the pre-existing disease stage are reversible when using the alimentary correction. The therapeutic measures efficiency enhances at their application with due consideration of the cellular immune reactivity original type and reserve corresponding to the body's phase of adaptation to the effects of controlled and uncontrolled factors of the environment.

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CARBOHYDRATE AND LIPID METABOLISM FACTORS IN GIRLS WITH MENSTRUAL FUNCTION DISORDER DEPENDING ON BODY WEIGHT

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The performances of the last years testify to high frequency of carbohydrate and lipid metabolism deviations from the age norms in girls with menstrual function disorders (MFD). However, these researches were mainly carried out in patients with polycystic ovarian syndrome, anorexia nervosa and Turner's syndrome. At the same time, the most commonly encountered MFD forms among teenagers are oligomenorrhea (OM) and pubertal uterine bleedings (PUB).

The purpose of the present work has become the study of carbohydrate and lipid metabolism features in teenage girls with OM and PUB depending on body-weight index (BWI). For the objective implementation 68 teenage girls were examined, 25 of them having OM and 43 – PUB. In 40 patients the BWI was contained within the confines of age norms (in 13 with