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#### UREAPLASMAS AUTODEFENSE AND RATIONAL ANTIBIOTIC THERAPY

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At present, the great number of schemes and the preparations are being existed, having used at the urogenital ureaplasmosis medical treatment, but the majority efficiency from them is being left at the low level, and, that is why, the adequate therapy search is also being left rather actual.

#### Main Target

It is necessary to study the ureaplasmas sensitivity spectrum to the most accessible and the widely – used antibiotics at the practice, for the purpose of medical treatment efficiency rising of the urogenital ureaplasmosis.

#### Materials and Methods

64 women have been examined with the urogenital ureaplasmosis. Finally, the diagnosis has been completely confirmed by the clinical and laboratory methods.

The Omsk Scientific and Research Institute (SRI) media of the natural and focal infections have

already been used for the ureaplasmas identification. The sensitivity determination for the antibiotics has been carried out at the ureaplasmas exposure in the titer, which is more than 10,000 ESR. So, the ureaplasmas sensitivity for the antibiotics has been determined by means of the «Ureaplasma –АЧ» and «Microplasma – АЧ» test – systems (the city of Saint – Petersburg).

#### Findings of the Investigation

The ureaplasmas have been appeared to be much steady to the tetracycline in 53,1% (e.g. 34 strains) and have been sensitive in 46% (e.g. 32 strains). To the macrolides first generation representative – the stability erythromycin has been made up 43,6% (e.g. 28 strains), the sensitivity – 54,4% (e.g. 36 strains).

The ureaplasmas have already been appeared the highly sensitive ones to the lincosamides representative – the clindamycin: they are sensitive 71,9% (e.g. 46 strains), steady – 28,1% (e.g. 18 strains), and the aminoglycosides – to the gentamicin: they are sensitive 71,9% (e.g. 46 strains), steady – 28,1% (e.g. 18 strains). The simultaneous stability to these both preparations has been observed only in 9,4% (e.g. 6 strains).

The highly sensitivity has already been appeared to the doxycycline: they are sensitive 87,5% (e.g. 56 strains), steady – 12,5% (e.g. 8 strains). The sensitivity to the macropen has already been made up to the 90,6% (e.g. 58 strains). The simultaneous stability to them has been observed in 6,3%.

The Main Conclusions. The ureaplasmas singled out strains highest sensitivity have been shown to the doxycycline and to the macropen. So, the doxycycline and the macropen use is quite able to be recommended for the medical treatment scheme inclusion in the cases of the mixed – infections.

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#### THE INTESTINAL MICROCIRCULATION BED STRUCTURE

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The small intestine vascular bed has its multi-layer structure. The microcirculatory bed (MCB) linear interfascicular segments of the flat mesentery are being transformed into the entodermal canal circulatory segments: the subsero – muscular segment contours – the external (e.g. the mesenteric arcus and the vascular plexuses) and the internal ones (e.g. their submucosal plexus), and the last one – and this is the

mucosal plexus MCB external contour. The MCB mesenteries have the mainline network type, so the MCB muscular layer and the mucous membrane are being acquired the decuduocellular structure: in the habitat of the muscular layers, the simple micro – regions contour networks are being compressed in the arterioles and the venules basal plexuses, the modules are being forced out from their ansae (e.g. into the villi and the muscular layers), and they are being merged into the complex micro – regions – that is, the basal plexuses raisings. The intermuscular plexus is being formed by the small arteries branchings, as the straight (e.g. from the mesenteric arcus), well as the recurrent ones (e.g. from the submucosal plexus), having accompanied their small veins and the lymphatic capillaries by the inflows, the mucosal basal plexus – by the submucosal plexus branches and the inflows. The vessels and their plexuses are being complicated the MCB architectonics, by means of the thickening on the polymorphous basal plexuses and on the microvessels networks, especially in the submucosal basis and on the thin intestine mesenteric edge. The mucous membrane circular folds, the intestinal crypts, and the duodenal glands, the lymphoid nodes and the patches, the plexuses nervosus are also being deformed the MCB.

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#### **THE BEE'S COR AS THE LYMPHATIC VESSEL PROTOTYPE**

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The bee's cor – is the caudad closed polysegmental tube with the cross – striated muscles and with the compound axial valves. Their double valvae are being formed by the cor lateral finger – holes valves at the proximal convergence. The lateral valves couple distal valvae are being formed the caudal segment exit valve, and their proximal valvae – the cranial segment entrance valve. The double valvae intercuspidated canals of the bisegments border valve (e.g. the lateral finger – holes coupled valves) are being opened onto the proximal segment. The valves, having settled in such way, are being regulated the hemolymph axial current between the cor's segments and the interorgan liquid lateral inflow onto the cor from the body cavity with the coelomic epithelium lining retinens rostralis – of the strongly dilatated equicapillary bed: the venous bed reduction is being taken its place at the insects, in comparison with the annelids and the other arthropoda. The cor's valvate apparatus and the body cavity are being supplied it. So, the blood is being carried

only the nutritive and the biologically active matters, the trachea and also its branches themselves are being delivered the oxygen to the organs. Therefore, the insects' cor is quite able to be served the first evolutionary model of the active lymph drainage from the organs, which is much earlier and the nearer to the mammals' lymphatic vessels, than the amphibians' monosegmental lymphatic cor – their intervalvate segment prototype, that is the lymphangion, by L. Ranvier (1875).

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#### **THE ENERGY CONTENT AS THE HUMAN SOCIALLY SIGNIFICANT DISEASES**

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At present, the alcoholism, the drug addiction, the depression, that is the diseases and the illnesses, the aetiology of which is not quite and entirely understandable, are being related to the human socially significant diseases and the illnesses. And the human organism early ageing, which is often being defined not only by the age itself, but by the man's state and the way of his life, it is quite possible to be related to such diseases and the illnesses. We consider, that the man's bioenergetics state, which is being defined not only the oxygen consumption rate at the moment, is the basis of some human socially significant diseases and the illnesses.

So, it is quite well – known, that all these warm – blooded animals energetics is being defined by the metabolic processes intensity in the human organism, and it is quite possible to be calculated by the oxygen to be consumed amount. It is quite actually and the real one, the oxygen consumption intensity is constantly being increased, at the following load rise upon the human organism. However, the carried out numerous observations have been shown, that the different and the various people are being consumed the different and the diverse oxygen amount, at one and the same kind of the work fulfilment. So, the trained sportsmen and the athletes are running the short distance, quite almost not having changed their respiration intensity, though the respiration intensity is sharply being increased at the non – trained man. For all this, the both ones are making one and the same and also the equal kind of the work, having consumed the equal quantity of the energy. Consequently, the sportsman and the athlete much more actively is being included the additional source of his energy – «the energy content», which the man is being used at the rate of his loading. Thus, this content one is being formed also at the expense of the oxygen consumption, but it