Materials of Conferences

THE HIGHLY SKILLED ACROBATS MORPHOLOGICAL PECULIARITIES AND SPECIAL FEATURES

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At present, the morphological peculiarities and the special features are being given and counted for the great deal in the sporting acrobatics, as the human constitutional traits, the human body weight characteristics, the human body proportions are being defined the specific specialization and the sportsmanship manifestation success and its efficiency.

So, the interconnection between the human constitutional traits and the sporting – technical results has been described in the methodological and the scientific literature.

The highly skilled and qualified acrobats (e.g. 29 masters of sports and the candidates in the masters of sports), having had the specializations on the jumps on the acrobatic path and the double mini – tramp, have taken their part in the study and the research. The examined age has been in the range of from the 15 up to 19 years.

All these observations have been carried out during the training and the instructional studies on the KGUFKST and SDUSOR № 1basis of the Krasnodar town.

It, moreover, has been determined, that the dolichomorphic and the mesomorphic types are quite typical for the acrobats – jumpers, at the human body proportions types study and the further examination by P.N. Bashkirov.

The following regularity has been registered at the acrobats' human body weight composition components analysis, depending on the sporting qualification: and the muscular component is being increased, the fat component is being decreased, with the sportsmanship rise. In its turn, the bone component is not practically being changed.

We had carried out the researches, which showed, that the «mean – armed» and the «long – armed» types are being predominated over at the acrobats – jumpers, having taken into consideration the upper and the lower extremities' lengths significance.

Thus, the morphological peculiarities and the special features, and also the indications, having limited the acrobats' high – level sportsmanship and their efficiency achievement exposure, will be allowed to be conducted the reserve of the full value preparation for the combined teams already at the specialized preparation stage.

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FUNCTIONAL ACTIVITY OF THROMBOCYTES WHEN Q-FEVER

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All over body distribution and bright polymorphism of a clinical picture are specific for Q-fever. There is information in literature that Coxiella burnetii has an initiating role in the development of thrombophlebitis, aneurysm in convalescents. Maybe, heterogeniety of Q-fever symptomatology and the development of complications are due to abnormalities of hemostasis system.

The work is dedicated to the study of functional activity of thrombocytes (Tr) when Q-fever during different periods of the disease. During period 2006- 2009 there were examined 69 patients aged 41,7±3,2 with the diagnosis of Q-fever, confirmed in all cases by serological methods and PCR. The aggregative activity of blood platelets was detected on aggregation analyzer SPF BIOLA (model 230 LA) with AGG software.

In the period of height of disease in 73% of cases the quantity of Tr decreased to 95,4± 4,8x10^9/l. Influenced by adenosinediphosphate aggregation inductor in concentration 2,5 μm, the aggregation extent was four times lower than normal ranges, but aggregation speed was 1,5 times higher. Aggregate radius reached 4,8±0,27 and that 1,3times less the control one. In the majority of cases (83,4%) aggregatograms were two-wave, but the duration of functional activity of Tr decreased 3′14″. In the period of recovery the quantity of Tr was restored to normal ranges, but the aggregation extent was 2 times increased and speed -7 times comparing with the control one. Sizes of aggregates were growing substantially.

Thus, thrombocytic hemostasis link changes, connected not only with the blood platelets quantity decrease, but also their functional activity change, is specific when Q-fever. For the period of height of disease decrease of their functional activity is specific, and in the period of resolution of clinical symptoms of the disease- increase, which may be initiating agent to thrombogenesis.

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