

complaints number decrease for the 87%, as a result of the complex non-medicamental and the non-pharmacological program application.

And the arterial pressure complete normalization has been noted at all the male and the female youngsters.

Thus, the rehabilitation arrangements complex with the diet calorie content restriction is being accompanied by the endo-toxicosis degree decrease, by the complaints number decrease, by the life quality improvement, and also by the hemodynamic parameters normalization. So, the risk absence for the patient's health is being dictated the possibility to be recommended the rehabilitation complex for the wide – scale introduction and the further realization into the public health practice.

The Resumes

1. The human body overweight mass (HBOM) presence, AH, the II increased, and also the lipid spectrum violations are the most convincing criteria for the complex endo-ecological rehabilitation carrying out.

2. The complex rehabilitation program with the hypo-high-calorie diet is the quite enough efficient approach for the multifactorial prophylaxis carrying out of the chronic non-infectious diseases.

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LYMPHOID OR HAEMOPOIETIC ORGANS?

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More century bone marrow was considered as part of bones, spleen was classified to alimentary system, thymus – to endocrine glands, lymph nodes – to lymphatic system. The first International Histological Nomenclature contained division «Haemopoietic organs» – bone marrows, spleen, thymus. In new International Anatomical and Histological Terminologies all seats of haemopoiesis are united into lymphoid system by their immunopoietic function. This aggregate can be to definite only as lymphoid apparatus. Bone marrow, aggregated and solitary lymphoid nodules are not independent organs. Red bone marrow and spleen are mixed haemopoietic organs by their structure with predominance of myeloid tissue, which form in connection with venous sinuses. Thymus and tonsils arise as congestion of epithelial and mesenchymal cells, later they transformate into lymphoepithelial organs. Lymph nodes arise as interweavings of lymphatic and blood vessels by means of invagination of blood vessels into the lymphatics, connective tissue between them transformates into lymphoid tissue. I think that it should be to discern «haemopoietic organs», which are divided on myeloid-lymphoid (bone marrow, spleen) and lymphoid (thymus, lymph nodes, tonsils). Myeloid-lymphoid organs have row of important structural features – extralymphatic (parenchyma don't connects with lymphatic bed, it is related to thymus and tonsils too), sinusoidal (venous sinuses as paths away of blood cells), periarterial (by localization of lymphoid elements). Lymphoid organs contain high endothelium venules – paths of lymphocytes recirculation between primary and secondary lymphoid organs. Cortex of thymus looks like spleen on paths of lymphocytes influx in the organ.

LOCAL INHIBITION OF BLOOD FLOW AS PRE-CONDITION OF FORMATION OF HAEMOPOIETIC SEAT

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Mechanic of anlage of haemopoietic organs is not described in literature. Anlage of lymph nodes takes place when blood vessels with their