



Mukashev M. Sh.

*Kyrgyzskaya State Medical Academy
Department of judicial medicine and right, Bishkek,
Kyrgyzskaya Republic*

HIGHLAND, MOUNTAIN SICKNESS AND MEDICO-LEGAL DIAGNOSTICS OF SHARP DEATH

Highland, mid-mountain and flat climatic-geographical terms of Kyrgyzstan because of mountain system of Tian Shan, Pamir Mountains, Alay and by a lake Issyk Kul. The remoteness of Republic from the ocean, sharp raised above sea level of nearby plains (for example, Fergana Valley) and position among the large inland deserts give the climate of Kyrgyzstan sharply continental character. Exactly frequent change of barometric pressure and related partial pressure of oxygen in air, temperatures, speed of movement of air, its humidity and ionized, electric state of soil, intensities of study in the flow of set time are a make extremely continental climate of republic. Quality and quantitative difference of climate of highland districts from flat is the aggregate of foregoing specific factors. These special ecological terms of highland definitely lay on an imprint on the row of physiological indexes of organism as functionally-structural, adaptation and acclimatized alterations [3].

Actuality of studying of such influence on an organism is presently obvious and connected with the row of reasons;

a) studying of medical aspects at air and space flights;

b) studying of influence of height on a health of servicemen, deployed in mountain dis-

tricts (boundary troops (Alay and Tian Shan mountain), military contingent in Batkensky oblast),

c) expansion of production activity on highland (development of mineries, building of high-voltage lines, shift work on the highland broadcasting stations, etc.);

d) increase of rest areas and development of sport on highland (for example; mountain-skiing, mountaineering and other);

e) expansion of areas of agricultural activity (breeding goats and yaks);

f) residence of big amount of people (population) on highland (approximately 1,059000 residents of Kyrgyzskoy of Republic live in the conditions of highland) [2].

Highland environment renders substantial influence on the structure functional changes of most physiological systems.

It is known that individual adaptation to highland flows in different ways and not always finishes with adaptation. Not every organism and not always air at the optimum for the terms of highland level of oxygen homeostasis, especially if his adaptive possibilities narrowed, and stability of answers of the physiological systems on influence of additional revolting factors minoretic. In such cases for people the phenomena develop deadadaptation, becoming into different forms of adaptive and mountain pathology [1].

There is a process of physiological changes in an organism during acclimatization to the height, which directed on the increase of delivery of oxygen to the cells, first of all, adaptation to the hypoxic hypoxia the sharp form of which always causes changes in all systems and organs (neuroendocrinal, cardiovascular, respiratory, system of blood and other systems of organism).

The difficult sequence of physiological changes on a height results in development of serious and potentially mortal diseases as a sharp mountain sickness, highland pulmonary oedema [2].

In connection with that 1,059,000 persons of republic lives in the conditions of highland, the problem of mountain pathology presents certain interest and for medics.

From data of Ashibaeva A. A., Le Ru A. M., the reason of 20% evacuees in Lowland in 1997, 17,4% in 1998 were a sharp mountain sickness.

A most threat for an organism is presented a sharp mountain sickness (highland pulmonary oedema and highland cerebral oedema). At the variety of clinical symptomatology, for a mountain sickness single etiologic pre-condition is a hypobaric hypoxia, showing up at a height 2500 meters and more.

Etiologic factors in development of alpine pulmonary oedema are the lowered barometric pressure on a height and hypoxia, which through the row of mechanisms result in the gathering of liquid in lungs (hyperpnoea and breathing depth, narrowing of arterioles of lungs and increase of pressure in the small circle of circulation of blood).

Clinical and diagnostic signs of pulmonary oedema are: shortness of breath at quiescent mode, cough, weakness or decline of physical capabilities, sense of obstruction or prelims in a thorax, wheezes of lungs, even in one, central cyanosis.

A pathoanatomy is characterized by the presence of widespread and expressed pulmonary oedema with a bloody foamy liquid in respiratory tracts. Weight of lungs in 2-4 times more normal weight. A right auricle and pulmonary artery is often extended, in capillaries and arteries are blood clots, deposit of fibrin in teeth ridges and are a of

haemorrhage and heart attacks in pulmonary vessels.

A case from practice. Act № 226 from 9.12.2001 X., was norm in 1969, 7.12.2001 at a next ascent - died a step mountain pass of Mazarashuu on height of a 4200 m, worked shift method by an electrician in a republican production amalgamation "Republican highway of television and radio".

At outward research of dead body: muscular stiffness is shown well in all of the probed groups of muscles. The death spot of very blue colour, intensive, located on the terminolateral surfaces of trunk, extremities. Pupils are extended, excretions from a hornycavity and nasal meatus are not present (a dead body was probed on the third days post mortem). It is not discovered at research of dead body any damages. At internal research, a hard brain-tunic is not terse, the hemispheres of cerebrum are symmetric, furrows and bends of brain are smoothed out. Lungs lie freely in a pleura cavity, apneumatic, pasty dough-like consistency, light pink, scarlet colour, at a cut and pressing on lungs plenty of foamy liquid flows down from the surface of cut. There is plenty of liquid of blood of crimson colour in the cavities of heart and large vessels. Other organs, except for a plethora, without features.

At judicial-histological research: interstitial and alveolar pulmonary oedema, hearth haemorrhage, sharp plethora of vessels. In a cerebrum perivascular and pericellular oedema. There is uneven blood filling of vessels in myocardium. In other organs - without features. Not found out an ethyl spirit by forensic chemicals hemanalysis of blood and urine.

In this case death from a sharp pulmonary oedema came at a next ascent on a height, in spite of, it would seem, sufficient adaptation organism to highland. Diagnosis: "Sharp pulmonary oedema" is proposed by the method of exception taking into account the circumstances of death, information of dissection and histological research.

Thus, influence of highland on an organism is expressed in multicomponent factor, causing, functionally-structural changes in organs and systems of healthy man up to a fatal outcome.

Thus along with basic pathology causing death, other signs of height illness show up morphologically (cerebral oedema). It is necessary to acknowledge that pathologic description of alpine hypoxia is studied not enough, requires a deep study and systematization both in the plan of thanatogenesis and determinations of direct reason of death. Special this is important at combination of trauma and signs of development of mountain pulmonary oedema, mountain cerebral oedema.

Перечень использованной литературы

1. *Айдаралиев А. Л.* Медико-биологические и социально-экономические проблемы высокогорья // *Высокогорные исследования: изменения и перспективы в XXI веке. Международная конференция.* - Бишкек, 1996. - С.12-13.
2. *Алирбаев А., Ле Ру И. М.* Первичная и неотложная медицинская помощь на высокогорных производствах. - Бишкек, 2002.
3. *Турусбеков Б. Т.* Медико-социальные аспекты здоровья человека в горных условиях. - Бишкек, 1998. - С. 126.



Sineokiy O. V.

associate professor of department of criminal law and justice, Zaporozhnia national university, member of scientifically-methodical council at the office of public prosecutor of the Zaporozhnia oblast, candidate of law sciences, junior adviser of justice

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First of all television is dangerous because provides ten million children with quite identical, ready to the use fantasies.

Maria Manns, American essayist and journalist

SYSTEM TASKS OF MINIMIZATION SOCIALLY DANGEROUS DISPLAYS OF PAEDOPHILIC CONDUCT IN INFOMEDIA

The informative relations are relations which arise up concerning satisfaction of informative necessities of citizens. Activity of the state concerning promulgation of any materials also can be acknowledged as informative. From one side Law of Ukraine "About defence of public moral" forbids a production and appeal in

Ukraine in any form products of pornographic character. A legislator suggests to consider any material objects and other products, maintenance of which is the detailed image of anatomic or physiological moments of sexual actions or information of pornographic character. From other side there is a problem of excessive informative