



Comprehensive Assessment of the Levels of Somatic Health and Disturbances of Adaptation Reserves in Medical Students

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Received 28th Aug 2022,
Accepted 29th Sep 2022,
Online 31st Oct 2022

Abstract: This article summarizes the study. Evaluation of the main indicators of hemodynamic homeostasis, adaptive reserves of the cardiorespiratory system and levels of somatic health was carried out in 283 people (215 girls and 68 boys). The observation group is represented by students of the 2nd and 3rd year of the Samara State Medical University (girls and boys). The task of our work included the assessment of the levels of somatic health and disorders of adaptive reserves in medical students.

Key words: Health, medical students, spearman correlation.

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Relevance. Individual health is a dynamic state of a person, which is determined by the reserves of self-organization mechanisms (resistance to pathogenic factors and the ability to compensate for the pathological process). It is characterized by energy, plastic and informational (regulatory) provision of self-organization processes and is the basis for the manifestation of biological and social functions. Currently, the most relevant is the view of health as the ability of the body to adapt to changing environmental conditions. Therefore, the adaptive (or adaptive) capabilities of an organism can be considered as a measure of health. Of particular relevance are the tasks of assessing and predicting human health in order to develop ways to strengthen it.

Purpose: a comprehensive assessment of the levels of somatic health and disorders of adaptive reserves in medical students. Explore the levels of somatic health. To establish the tightness and direction of the relationship of indicators in assessing the levels of somatic health using the Spearman correlation coefficient.

Material and methods. Assessment of the main indicators of hemodynamic homeostasis, adaptive reserves of the cardiorespiratory system and levels of somatic health was carried out in 283 people (215 girls and 68 boys). The observation group is represented by students of the 2nd and 3rd year of the Samara State Medical University (girls and boys). We used clinical, physiometric, somatoscopic research methods.

Statistical calculations were performed using the specialized Statistica 6.0 package. The tightness and direction of the relationship was assessed by the Spearman correlation coefficient, the conclusion about a statistically significant relationship was made at $p < 0.05$.

Results and discussion. Health levels among medical students (girls and boys) were distributed as follows: "low" - 26.8% (76 people), "below average" - 33.2% (94 people), "average" - 32.5% (92 people), "above average" - 4.95% (14 people), "high" - 2.55% (7 people). Most of the girls have a level of health "average" (35.81%) and "below average" (30.23%). In young men, the levels of health "below average" (42.65%) and "low" (33.82%) prevail. None of the 68 young men studied had a "high" level of health.

For all students, such indicators are: PSD, VT HR, SD, LI. For boys, indicators of BMI, SI, PD, FSI are added. Note: BMI - body mass index; ZHI - life index; VC - vital capacity of the lungs; SI - power index; PSD - an indicator of cardiac activity; HR - heart rate per minute; BPsyst - systolic blood pressure; HRHR - recovery time of heart rate after 20 squats in 30 seconds. These indicators are the most reliable for assessing the levels of somatic health and the cardiorespiratory system.

Conclusions: Our research found that the majority of students (92.5%) have a level of health "average", "below average" and "low". Only 7.5% of all subjects have health indicators that allow them to be classified as a "safe level" (of which 9.31% are girls and only 1.47% are boys). In the safe zone, endogenous risk factors are practically not recorded, there are no latent manifestations of chronic somatic diseases, and there is a low risk of death from them. When leaving the safe zone and moving to such levels of health as average, below average low (even without changes in living conditions), endogenous risk factors can form in people that lead to the emergence and development of a pathological process and its manifestation in the form of a specific nosological form;

Cardiac activity indicators (PSP), systolic pressure (SP), heart rate recovery time after 20 squats in 30 seconds (HHR), vital index (VI) are the most reliable for assessing the level of somatic health and the cardiorespiratory system.

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