

inance of synthesis, that is, to accumulate reserves which are necessary for the young and growing organism. Certain types of reactions in children correspond to abnormalities in leukocyte formula. Based on an assessment of the type of reaction, you can pick up specific recommendations for optimizing the health of children.

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### PSYCHOLOGICAL CHARACTERISTICS OF SCHOOLBOYS DEPENDING ON SOMATOTYPE

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**Abstract** In recent decades, the negative trend to reduce children's health persists. The reason for the formation of diseases in children is a combination of adverse factors: trouble in the perinatal period, deteriorating environmental situation and the characteristics of the psychological type of personality. Total one-third of teens is characterized by the ability to easily express their emotions, to identify and describe what they really feel. Most of the children are characterized by reduced ability or difficulty to the verbalization of emotional states and 25% of subjects showed a pronounced presence of alexithymia. Alexithymia refers to the risk factors of psychosomatic diseases.

**Key words:** children, alexithymia, psychosomatic diseases.

In recent decades, the negative trend persists reduce children's health. The main feature of the modern diseases of childhood is the growing prevalence of chronic physical and neuropsychiatric diseases. The reason for the formation of diseases in children is a combination of adverse factors: trouble in the perinatal period, deteriorating environmental situation and the characteristics of the psychological personality type [1,2,3].

Alexithymia - psychological characteristics of the individual, characterized by obstruction or complete inability to accurately describe the person's own emotional experiences and understand another person's feelings, difficulties in determining the difference between feelings and bodily sensations, fixation on external events to the detriment of the inner experiences.

Alexithymia ("without words for feelings") - psychological characteristics of personality: the difficulty in identifying and describing their own emotions and the emotions of other people; difficulty in the difference between emotions and bodily sensations; decreased ability to symbolize, for fantasy; focus on external events, at the expense of inner experiences; the tendency to the concrete, logical thinking with a deficit of emotional reactions.

The problem of the study of alexithymia in modern science is polydisciplinary character. The main directions of the study of this phenomenon (clinical and psychological) do not give an unambiguous interpretation of its formation and development mechanisms. According to current literature alexithymia refer to the risk factors of psychosomatic diseases.

**Materials and methods.** Objective: to study the level of alexithymia in adolescents, depending on their physical development. The study was conducted on the basis of secondary school №5, among children under school age (16-17 years), using a procedure - Toronto alexithymia scale (the TAS), adapted to the Institute. VI spondylitis, which is aimed at the study of alexithymia as a personality traits. In the analysis of the responses received, according to the procedure, an overall score is calculated, which corresponds to one of the personality types: less than 62 points - "not alexithymical" personality type. Group from 62 to 74 points relate to risk. "Alexithymical" personality type - more than 74 points. According to our survey results the average score was 66.3 on a scale that has already belongs to a risk group. Indicators statistically processed with the calculation of averages, the average error rate Student.

**Results and discussion.** Spend anthropometry 60 healthy children, of which with average physical development showed 53% of adolescents; below average - 18% higher than the average - 28% ( $p < 0.05$ ). When

analyzing the types of personalities of all children surveyed revealed that the number of children with "no alexithymical" personality type is only 36.7%, and young people with alexithymia - 25% and risk - 38.3% ( $p < 0.05$ ).

The allocation of all adolescents in the personality types, depending on the physical development revealed the following facts. Of the total number of mezosomatotype children "not alexithymical" personality type has 31.25%; microsomatotype children - 27.27% and 47.06% - macrosomatotype children ( $p < 0.05$ ). The risk group includes 37.5% of mezosomatotype children; 27.27% - 47.06% and microsomatotype - macrosomatotype ( $p < 0.05$ ). Alexithymical type of person are 45.46% of the children with low levels of physical development; 31.25% with average physical development and 5.88% with a high level of physical development ( $p < 0.05$ ).

At the same time, if you look at the distribution of personality types based on gender, in the group of children with mezosomatotype risk mainly are girls - 58.33%; Alexithymical personality type girls and boys are equally - 50%.

In the group of children with microsomatotype alexithymical personality type are girls - 100% and the risk for girls make up the majority - 66,67% ( $p < 0.05$ ).

In the group of children with macrosomatotype alexithymical personality type and risk are boys, 100% and 62.5%, respectively ( $p < 0.05$ ).

Among the healthy children of school age children is dominated with average physical development ( $p < 0.05$ ). The number of children with "no alexithymical" personality type is only 37%, and adolescents with alexithymia and risk group - 63% ( $p < 0.05$ ). For the majority of young people with low physical development characterized alexithymia, mostly girls ( $p < 0.05$ ). They find it difficult to recognize and express their feelings and emotions. Most of the children of high physical development characterized by a decrease in the ability of verbalization of emotional states, that is, they are at risk. And they dominate this group of boys ( $p < 0.05$ ).

Conclusions. Thus, only one-third of adolescents (36.7%) characterizes the ability to easily express their emotions, to identify and describe what they really feel ( $p < 0.05$ ). Most of the children (38.3%) represents the reduced ability or difficulty to the verbalization of emotional states ( $p < 0.05$ ). And 25% of the subjects showed a pronounced presence of alexithymia, these children are difficult to recognize and express their feelings and emotions, and the children to the level of physical development above and below the average account for most of that can be attributed them to the risk of psychosomatic diseases ( $p < 0.05$ ).

Alexithymia really combined with various adverse factors, such as level of physical development. It can serve as a breeding ground for the development of psychosomatic disorders, indicating a need for diagnostic and preventive activities preschool children in order to correct their physical development and psychological adjustment.

#### Literature

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#### DYNAMICS OF CONGENITAL MALFORMATIONS IN THE AMUR REGION

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**Abstract** The structure of congenital malformations of the six-year period (2009-2015 gg.) in the Amur region. In the Amur region for 2009-2015 in infant mortality and disability congenital malformations occupy the 2-3 places. Among live births there is a larger proportion of children with hypospadias, Down's syndrome and spinal hernia. Among stillborn - hydrocephalus, anencephaly and Down Syndrome. Among eliminate a tetus - Down's syndrome, hydrocephalus and spinal hernia. Among all the vices the highest share is occupied by Down's syndrome, hydrocephalus and hypospadias.

**Key words:** children, congenital malformations.

Hereditary and congenital pathology is an essential part in the overall morbidity and mortality of the population, especially children. According to the WHO, up to 5% of newborns have a hereditary disorder, which largely explains the high infant and child mortality. The share of the reasons accounting for up to 20-30% of the causes of infant and up to 30% of infant mortality.

Congenital malformations - structural or functional abnormalities that occur during fetal development and