## QUALITY OF A LIFE AND SEASONAL RHYTHMS DESYNCHRONIZATION AT STUDENTS FROM VARIOUS CLIMATOGEOGRAPHICAL REGIONS.

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**Background.** The Quality of Life Research Unit has been developing conceptual models and instruments for research, evaluation and assessment since 1991. In partnership with the Department of Occupational Therapy and Centre for Health Promotion, at the University of Toronto, the unit carries out quality of life research that relates to communities, families, and individuals from a variety of population groups. Quality of Life is an area of study that has attracted an ever increasing amount of interest over the past two decades, particularly in the areas of health, rehabilitation, disabilities studies, and social services, but also in medicine, education, and others.

The study of Quality of Life is an examination of influences upon the goodness and meaning in life, as well as people's happiness and well-being. From our perspective, the ultimate goal of quality of life study and its subsequent applications is to enable people to live quality lives - lives that are both meaningful and enjoyed.

**Objective:** To study Health-Related Quality of Life (HRQL, SF-36) and seasonal affective disorder (SAD) at students from various climatogeographical regions under contrast climatic conditions winter-summer.

Materials and Methods: The study was composed of two groups of students' first year education: African (17) and Russian (14). All the students completed a validated English and Russian translation of the SF-36 Health Status questionnaire (Perneger et al., 1995; Leplege et al., 1998). The SF-36 is a multi-purpose health survey with only 36 questions. Among the eight scales, three [physical functioning (PF), role physical (RP), bodily pain (BP)] correlate most strongly with the physical component and contribute most to the Physical Component Summary (PCS) score. The mental component correlates best with the mental health (MH), role emotional (RE) and social functioning (SF) scores, which also contribute most to the Mental Component Summary (MCS) score. Two of the scales [vitality (VT) and general health (GH)] have noteworthy correlations with both components.

**Results:** As a result of our research it has been shown that there are authentic distinctions in the first group in relation to the second during the winter period. After change of an ecological and social inhabitancy at students from Africa authentically lower sizes of indicators of HRQL estimated under international test SF-36, in relation to similar indicators at students from Russia are observed. Symptoms of Seasonal affective disorder during the winter period at the African students have been authentically expressed in comparison with similar symptoms at students from Russia.

Seasonal affective disorder (SAD) is a type of mood disorder that brings on depression when the seasons change. The most common type of SAD is known as winter depression, which usually starts in the late fall or early winter and ends in spring.

**Conclusion:** During the winter-time at the African students seasonal rhythms desynchronization under SF-36 and SAD data it is statistically more expressed in comparison with similar indicators at students from Russia.

We look forward to the development of these methods for studies in comparative effectiveness.

## REFERENCES

- **1.** Abbott JA, Hawe J, Clayton RD, Garry R. The effects and effectiveness of laparoscopic excision of endometriosis: a prospective study with 2–5 year follow-up. Hum Reprod 2003;18:1922–1927.
- 2. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 2009. Т. 11. № 4.
- 3. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 2008. Т. 10. № 4.
- 4. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 2007. Т. 9. № 4.
- 5. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 2006. Т. 8. № 4.
- 6. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 2005. Т. 7. № 4.
- 7. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 2004. Т. 6. № 4.
- 8. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 2003. Т. 5. N 4.
- 9. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 2002. Т. 4. № 4.
- 10. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 2001. Т. 3. № 4.
- 11. Сборник научных тезисов и статей «Здоровье и образование в XXI веке». 1999. Т. 1. № 4.
- 12. Электронный сборник научных трудов «Здоровье и образование в XXI веке». 2009. Т. 11. № 12.
- 13. Электронный сборник научных трудов «Здоровье и образование в XXI веке». 2008. Т. 10. № 12.
- 14. Электронный сборник научных трудов «Здоровье и образование в XXI веке». 2007. Т. 9. № 12.
- 15. Электронный сборник научных трудов «Здоровье и образование в XXI веке». 2006. Т. 8. № 12.
- 16. Электронный сборник научных трудов «Здоровье и образование в XXI веке». 2005. Т. 7. № 12.
- 17. Электронный сборник научных трудов «Здоровье и образование в XXI веке». 2004. Т. 6. № 12.
- 18. Электронный сборник научных трудов «Здоровье и образование в XXI веке». 2003. Т. 5. № 12.
- 19. Электронный сборник научных трудов «Здоровье и образование в XXI веке». 2002. Т. 4. № 1.
- 20. Электронный сборник научных трудов «Здоровье и образование в XXI веке». 2001. Т. 3. № 1.