A doctor’s profession in all times and in all countries is considered to be respected and honored. Firstly, doctor is an intelligent person, who never stops studying and strives to get new knowledge every day. Secondly, this profession and overall obliges person to cultural behavior. Moreover, person who chooses medicine like a life path must maintain rules of honor and merit. Thirdly, every doctor should have internal force and strength. I guess, that this fortitude is indispensable companion of doctor, only due to it doctor is capable to give an objective mark of patient’s condition, commit patients’ curation. Therefore, a genuine doctor can be only a person with higher medical education whose personality qualities include above-listed points [1, p.14].

In my country the attitude to doctor’s profession is very tremulous. First of all, it’s inseparably linked with military conflict in the Donetsk People’s Republic. In my opinion, this war brings to impetuous development of military medicine, without which the army can’t exist.

The term military medicine has a number of potential connotations. While in some cases it refers to the occupational health chapter of the profession of medical officers and other medical doctors employed in military units, the term may also refer to the entire set of competencies and professions linked to medical care in the military. Military medicine is important in both war and peace. Military medicine plays a key role in supporting and maintaining health, in preventing injuries and diseases in military staff and in enhancing the military armed forces during war. Additionally, military medicine participates in actions such as emergency public health crises, natural disasters, emerging conflicts and anti-terrorist campaigns during peacetime. Military medicine is an important field in biological and medical sciences [2, p.42].

Military doctor is a person with high medical education, who as a military rank. He main charges of medical officer are:
1. Preventing soldiers’ diseases and mass epidemic;
2. Control of performing sanitary standards and norms in army, sanitary and hygienic supervision;
3. Medical and preventive work, rendering a medical aid and care;
4. Organization of lectures about rendering a first medical aid;
5. Management an evacuation of wounded soldiers from battlefield;
6. Surgery treatment of aggrieved people;
7. Controlling a volume of medical provision (for instance, dressing materials delivery);
8. Curation of medical examinations [4, p.67].

The armed forces are affected by many elements, such as military equipment, technology, organization and human resources; however, the
most important element is “people”. Maintaining physical and mental health is the fundamental element of reinforcing the armed forces, rapidly recovering from injury, and of regenerating the fighting capacity. The aim of military medical research is to serve the people and to manage people-related health problems. Traditionally, injury from weapons is called “trauma” but can be associated with many serious complications and can cause systematic reactions and internal organ damage. These damages are the central part of war injuries but have similarities with diseases in usual healthcare; sometimes these damages are called disease trauma, injury and illness, as well as injury complicated with disease. Modern war can not only create somatic trauma and associated diseases but also involve psychological trauma. Therefore, military medicine refers to traditional military field surgery or internal medicine as well as the overall health of military staff, particularly how to manage mental stress. Currently, military surgery and internal medicine research emphasize the reform of first aid skills and equipment, regenerative medicine, etc. Military activities, such as guarding, training, fighting, and surviving, are usually performed in special environments [3, p.34]. The environment plays an important role in the health of military staff. The environment can mean the natural environment (such as remote mountain areas, tropical areas, highlands, oceans, deserts, epidemic or space areas); human-made environments (such as closed, high-pressure, weightless environments); information environments (space fields with information or information-related launching, transmitting, utilizing media carriers); and mental environments (mental stress and mental health-related). Special operations should also include tasks in space, aviation, navigation, and underwater diving. The damage to humans in these areas is usually multifactorial and more complicated and serious than single-factor damage [5, p.45].

Let’s turn our attention to a present day and civil medicine. I should highlight that our civil medicine take rounds. Nevertheless, I can’t say, that military medicine stay in “yesterday” because in some districts of our Republic military actions still continue. However, that civil medicine, which exist in time before war, and medicine, which exist today are absolutely different types of medicine. On the one hand, in present medicine accepted doctors, who passed military actions. On the other hand, they are graduates of our university, many of which worked as volunteers in hospitals in 2014. Doctors become more experienced, categorical, but humane. Doctor’s profession due to these circumstances became more valuable, what displays in increasing number of people, who want entrance to our university.

What will be tomorrow? What expect us in future? Doctor’s profession can hardly be replaced by technical progress. Of course, technical evolution brings some changes in methods of disease diagnostic because medicine is one of those sciences, which must develop continuously, medicine demand new discoveries and inventions. Of course, artificial intellect can be taught to identify diseases and select medical approach, but every doctor’s patient – unlike. It’s organism – individual system, which based on main principles of organism functioning, but has a numerous particulars, what doctor must take into account the process of curation. Now I should remind medicine founder’s words, famous ancient doctor Hippocrates’s quote: «Doctor needs to treat not the disease but the patient» [5, p.51].

Also, a significant part of curation is a psychological factor, a patient’s possibility to communicate and consult with a person who can help him/her to deal with disease.

In aforesaid factors based eternal relevance and inviolability of doctor’s profession not only in my country but all over the world.

REFERENCES:

OUTSTANDING WOMEN IN MEDICINE

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In prehistoric times women were able to render first aid to seriously ill tribe mates. But it was men, who took to treating people. So had been until the 19th century. The influence of the liberating age, the flow of new ideas, the coming down of serfdom, that changed the economic conditions of life, raised the woman's spirit and led her to the idea of supporting her and her family [1].

The first woman to become a doctor was an English woman Elisabeth Blackwell. In Russia the first woman doctor became Nadezhda Suslova (1843-1918). In 1861 Suslova entered the St. Petersburg's medical surgery academy. She studies hard and worked successfully in physiological Sechenov Laboratory. But the new university's codex forbade women to study in higher education. So she had to continue her education in Switzerland, where she was given an exemption and entered into the Tsurich University.

Having defended her dissertation written under supervision of Sechenov. She got her diploma in medicine, surgery and obstetrics.

When she came back to Russia she started obstetrics courses for women. The graduates of the courses helped the wounded soldiers during the Russian-Turkish war in 1877. The women demonstrated high quality skills and efficiency.

Suslova died in spring of 1918 and was buried near Alushta. By the time of the death the number of women doctors in Russia had estimated over 500.

The first woman doctor who got a degree in medicine in Russia was Barbara Kashevarova-Rudneva [2, c. 85].

On knowing that obstetricians are needed in Orenburg, she entered the obstetrics institute and got a diploma in 8 months' time.

Then she entered the surgery-medical academy. After 5 years of studying she got a diploma. In 1868 in "Medical news" the results of her scientific research were published.

After graduating from the academy she specialized in obstetrics and gynecology. Her articles were published in native and German medical journals.

In 1876 Kashevarova-Rudneva brilliantly defended her dissertation and got the title of the doctor of medical science. Later she moved to the Voronezh region where she worked as a doctor. There she published some books and articles [3].

Thanks to the first female doctors, the profession of a doctor became available to women, and at now the number of women doctors is about 80 percent compared to men.

REFERENCES:

