

needed approximately 20% more time near the arm-chair to the patients with fear high index. Though the cavity preparation period (measured by odontotrypy (tooth drilling) was mainly similar for the both groups and the preparation process was needed to be interrupted in the patients with fear high degree. So, a dentist fear and anxiety not only prevent a patient's addressing the dentist but also decrease the performed treatment effectiveness (W.A. Ayer, 2008).

Usually stress intensiveness is not assessed for helping the students and the patients. We propose using a test of a personal anxiety of Spilberger for this on the base of our results received. This test demonstrated valuable differences in dental department Iranian, Arabic and Ukrainian students before modules (exams) passage and during them with indexes increase at modules or exams passage (bigger difference was observed during session because of bigger material preparing for several exams than for one module). The maximal anxiety has been demonstrated by the Ukrainians, the middle one - in the Arabics and the minimal one - in the Iranians at all courses. The investigated group was 75 students (equally from 3 regions). Also this test showed statistically significant differences in the Poltava Regional Hospital 25 patients before and during anesthesia performance.

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**DISTRIBUTION OF CHOLERIC WITH MELANCHOLISM AND MELANCHOLICS WITH CHOLERISM AMONG THE IRANIAN STUDENTS DEPENDENTLY ON GENDER AND DOMINANT EXTREMITY**

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The actuality of a given work is in following. The hardest dysadaptation belongs to marginal temperament types - choleric and especially melancholic as well as choleric with melancholism features and melancholic with cholerism features. It should be mentioned that choleric with melancholism and melancholic with cholerism represent not intermediate types similarly to sangvo-phlegmatics, sangvo-choleric and phlegmo-melancholics which are something middle with bigger or less specific weight of one or another type. Choleric with melancholic features is a neurotic characterized mainly by choleric temperament signs such as strong excitement and weak inhibiting processes low balance. But at the same time choleric with melancholism comparatively to choleric (and sangvo-choleric) possessed lowered mobility tendency to neurotization present in choleric. Low mobility (moreover at weak balance) creates conditions for personality epileptoid features expression (that is more characteristic to melancholic). This type people are emotionally unstable, wrath fits are more durable due to decreased mobility comparatively to usual choleric, depressive states are possible (that is characteristic more melancholic), optimism and pessimism states are alternated, they are extraverts in the biggest cases. But melancholic with choleric features represents deep neurotic characterized mainly by melancholic features id est excitement low force and low mobility. But differently from melancholics (and phlegmo-melancholic) this type people possess weak inhibiting that leads to the outburst characteristic for choleric. But comparatively to choleric these wrath and irritability periods are very durable due to personality low mobility and epileptoid direction. Hysterioid fits on this background creates a picture of deeply neurotized personality especially in the cases (very improbable but possible) when there can be intermediate or high mobility at weak force and insufficient balance of the processes. This type as choleric with melancholism is emotionally unstable but differently to it is introvertized and mainly pessimized.

The object of a given work was 81 Iranian students of both faculties and all courses. We used Eysenck's questionnaire for temperament type assessment and took into account the extremity used for writing at the investigation moment.

The students of medical department were choleric with melancholism while dentists were melancholic with cholerism in bigger extent. Men were melancholic with cholerism more and women were choleric with melancholism in bigger per cents. Sinisters were melancholic with cholerism while dexters - choleric with melancholism more. Ambidexters were both choleric and melancholic practically in equal extent.