

Psychosemantics of Types of Military Stress of Combatants

Психосемантика видів бойового стресу учасників бойових дій

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ABSTRACT

The purpose of this article is to introduce *Psychosemantics of Types of Military Stress of Combatants: we mean Chronic constant (or prolonged) stress and Acute situational stress of combatants with Post-traumatic stress disorder.*

Methods of the research. *The following theoretical methods of the research were used to solve the tasks formulated in the article: a categorical method, structural and functional methods, the methods of the analysis, systematization, modeling, generalization. The experimental method was the method of organizing empirical research.*

The results of the research. *We proved, that combatants with Chronic constant (or prolonged) stress also observed variability in the occurrence and development of a painful emotional state, but, as a rule, at the first stage there was an accumulation of emotional tension, which, due to the interaction of certain personal characteristics and situational influences, did not find a response. We understood, that the main disorders of the servicemen's mental activity are related to the experience that traumatizes the psyche and which is caused by military conditions, but their degree largely depends on the totality of the reaction to this factor of the entire unit. The collective reaction has a strong influence on the discipline and organization of military units.*

Conclusions. *Therefore, it should be noted that Post-Traumatic Stress Disorders occur in a case of combatants as a delayed or protracted reaction to a Psycho-Traumatic Stress Event or a situation of an exclusively threatening or deadly nature (combat operations, watching the violent death of others, the role of a victim of torture, being in captivity, etc.). In its essence, Post-Traumatic Stress Disorder is an appropriate reaction of a mind and a body to a powerful emotional stimuli of a stressful situation that occurred.*

Key words: *types of military stress of combatants, Post-traumatic stress disorder, Chronic constant (or prolonged) stress, Acute situational stress of combatants, a painful emotional state, disorders of the servicemen's mental activity.*

Introduction

Nowadays a large number of people have become witnesses or participants in the events of war on the territory of Ukraine. Unfortunately, these events do not pass without a trace both for the physical and mental health of a person. More and more psychologists throughout Ukraine meet combatants among their clients. According to the fact that such events are taking a place on the territory of Ukraine for the first time, even if we mean the period of time of all the years of independence, they are unusual, atypical, beyond the usual limits and characteristics.

Nowadays each person can only have so called indirect idea of the true scale of the negative consequences of the war. The only thing that can be emphasized with absolute certainty it is that none of the known natural disasters and man-made disasters can be compared to this war in terms of the degree of extremity and its psychological, absolutely negative consequences (Chen, Zhou, & Dong, 2020).

The main psycho-traumatic impact of war is the rather long stay of servicemen in the special conditions of specific stress, which leaves its negative imprint on the combatants. Long-term exposure to combat operations, as well as their psycho-traumatic nature, emotional and physical overstrain can, in a great degree, contribute to changes in the combatant's mental activity (Grunebaum, Oquendo, Burke, Ellis, Echavarria, Brodsky, Malone, & Mann, 2003). These pathological changes lead to a decrease in his/her effectiveness as a combat unit, they also affect his/her life activities already in peaceful conditions, leading to severe mental disorders, including post-traumatic stress disorders (Mandell, & Pherwani, 2003).

Currently, it is necessary to distinguish various concepts related to the psychological and physical stress of the combatant who is under a great influence of psycho-traumatic effects of military operations taking place on the territory of Ukraine, that began on February 24th, 2022. We classified these concepts

in such a way: stress, specific stress of the combatant, mental trauma, post-traumatic stress disorder.

Stress (from English – stress, tension, pressure) is an emotional state and physiological changes in the body that can be understood as a response to stimuli unusual for a person in stressful circumstances. Scientists (Huang, Oquendo, Friedman, Greenhill, Brodsky, Malone, Khait, & Mann, 2003) proposed the following definition: stress is a non-specific (that is, the same to different stimuli) reaction of the body to any demand, having been placed on it.

We call “the emotional stress” as the mental manifestations of the general syndrome of the adaptation of an individual. It is so called affective experiences that accompany stress and lead to adverse changes in the human body (Tabachnikov, Mishyiev, Drevitskaya, Kharchenko, Osukhovskaya, Mykhalchuk, Salden, & Aymedov, 2021). It is the emotional apparatus that is, for the first time, to be included into the sphere of stress reactions under the influence of some extreme factors (Kraus, 2015). So, stress is a state, due to the involvement of different emotions into the structure of any purposeful behavioral act (Mykhalchuk, Pelekh, Kharchenko, Ivashkevych Ed., Ivashkevych Er., Prymachok, Hupavtseva, & Zukow, 2020). As a result, vegetative functional systems and their specific endocrine support, which regulates behavioral reactions, are, in a great degree, activated. In this case, when the impossibility of achieving some vital results to overcome a stressful situation is actualized, a state of tension arises, which, in the combination with primary hormonal changes in the internal environment of the body causes a violation of its homeostasis. That is, under some certain circumstances, instead of mobilizing the body to overcome difficulties stress can cause serious disorders (Onufriieva, Chaikovska, Kobets, Pavelkiv, & Melnychuk, 2020).

Because of the repetition or with a long duration of affective reactions in the connection with long-term life difficulties, emotional state of the person can take a stable, definite and statio-

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nary form (Onufrieva, & Ivashkevych Ed., 2021). In these cases, even when the situation is adopted by the person or normalized, the constant emotional excitement has not been weakening (Murphy, Hall & Hall, 2003). Moreover, it constantly activates the basic central formations of the autonomic nervous system of the individual, and through them there was taken a place of a state of destabilization and the activity of internal organs and systems of the person (Peseschkian, 2003). If some general and specific links in the body are weak, then they become the main ones in the formation of this or that disease (Edwards, Lee, & Esposito, 2019). Primary disorders, that take a place during emotional stress in various structures of neurophysiological regulation of the brain, lead to different changes in the normal functioning of the cardiovascular system, gastrointestinal tract, changes in the blood pressure, blood coagulation system, and lead to immune system disorders (Mykhalchuk, Pelekh, Kharchenko, Ivashkevych Ed., Zukow, Ivashkevych Er., & Yatsjuryk, 2023).

We should also note, that emotional stress is usually social in its origin, and different people's resistance to it is also different. Stress reactions to psychosocial difficulties are not so much a consequence of the latter as an integrative response to their cognitive assessment and emotional arousal (Kris, 1952).

In turn, initially noting some non-specific response of the body to the influence of harmful factors, which is manifested in displaying the symptoms of the general adaptation syndrome of the person, the concept of stress is now applied to something else (Choi, Chau, Tsang, Tso, Chiu, Tong, Lee Po, Ng Tak, Wai Fu, Lee Kam, Lam, Yu Wai, Lai Jak, & Sik, 2003). Also, we've to emphasize, that in critical situations on stress there is even a kind of genre tradition of starting a review of studies listing such completely disparate phenomena, as the reaction to the influence of cold and criticism, hyperventilation of the lungs in different conditions of forced breathing and the joy of success, fatigue and humiliation (Brodsky, Oquendo, Ellis, Haas, Malone, & Mann, 2001). According to our observations, many considering stress

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factors are similar like everything that happens to a person, if he/she is not staying in the bed. Also, we observed, that even in the state of complete relaxation a sleeping combatant feels a certain stress, and he/she equates the absence of stress with the death (Chenguang, Zhaoqin, Fang, Yang, Jinxiu, Jing, Fuxiang, Delin, Minghui, Li, Jinli, Haixia, Yan, Jiuxin, Ling, Li, Zhixiang, Ling, Yanjie, Haixia, Feng, Kun, Yujing, Dongjing, Zheng, Yingxia, & Lei, 2020). If we add to this that stress reactions are inherent to all living things, including plants, then this concept together with its simple derivatives (stressor, micro- and macro-stressor factors, positive and negative stressors) becomes the center of an almost cosmological system, which becomes, as we think, the basic, leading stimulus of life affirmation, creation and the person's development, the basis factor of all aspects of human life. In such a way, a stressor factor acts as a foundation for personal philosophical and ethical constructions of the psyche of the individual (Corbitt, Malone, Haas, & Mann, 1996).

In our psychological researches on stress and stress factors, our persistent attempts are made to somehow limit the claims of this concept, subordinating it to traditional psychological problems and terminology. For this purpose, we introduce the concept of *Psychologically-somatic stress*, which, unlike the physiological highly stereotyped stress reaction to danger, is a reaction having been mediated by threat assessment and protective processes and circumstances (Epstein, Blake & González, 2017). According to the results of our research, the essence of a stressful situation is the high loss of control, that is the lack of an adequate response to the given situation, when the consequences of failure have the aim to be respond, to be significant for the individual (Mykhalchuk, Levchuk, Ivashkevych Er., Yasnohurska, & Cherniakova, 2021). Also, we believe, that stress should be called a special type of emetogenic situations, such as we have to use this term in relation to situations that are repeated or are chronic in their nature, and in this case the adaptation disorders may appear quickly (Chan, Ng, & Chan, 2003). We also define

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mental stress as a state in which a person finds himself/herself in the real conditions that prevent his/her self-actualization and self-realization.

Therefore, the main direction in the Developmental Psychology is displayed in the structure of the concept of stress. This concept is the denial of the lack of addressability of situations that generate stress (Mykhalchuk, Zlyvkov, Lukomska, Nabochuk, & Khrystych, 2022). That is why, any influences of the environment doesn't cause stress, but only that ones, which are evaluated as threatening, fear, which disrupts adaptation, control and prevents self-actualization of a combatant (Tabachnikov, Mishyiev, Kharchenko, Osukhovskaya, Mykhalchuk, Zdoryk, Komplienko, & Salden, 2021).

Based on these facts, we can note that a small and short-term stress can affect a person without significant consequences, while a long and significant one puts the combatants' physiological and psychological functions out of balance, negatively affects the combatants' health, work capacity, work efficiency and relationships with others (in this case it is called distress).

So, **the purpose** of this article is to introduce Psychosemantics of Types of Military Stress of Combatants: we mean Chronic constant (or prolonged) stress and Acute situational stress of combatants with Post-traumatic stress disorder.

Methods of the research

In general, 95 militaries were participated in our research. The place of organizing this stage of the experiment was the Main Military Clinical Hospital (the Center), Kyiv, Ukraine. They were in the age 24-45 years old. At this stage all respondents were included into one experimental group. These militaries were sent for inpatient treatment by the military commissariats of Kyiv to resolve the issue of fitness for military service. All soldiers have been served in the army in the military zone of Ukraine in the south-east of Ukraine (Donetsk, Lugansk and Kherson regions). They all were included by us into

experimental group, which was formed by the help of method of randomization. This stage of the experiment was organized in February-May, 2023. To evaluate the results of our research we used “26-scale bipolar version of the semantic differential for studying the characteristics of combatant stress of military personnel” (Михальчук, Харченко, Івашкевич Ед., & Івашкевич Ер., 2024).

Results and their discussion

We have followed the main ethical standards of providing the empirical research (we've obtained the informed consent of potential participants in the experiment to voluntarily participation in the research). Ethical principles were followed in the process of conducting the empirical research: the principle of voluntary consent; the principle of minimizing risks for participants; the principle of confidentiality; the principle of informing participants about the content of the research; the principle of mandatory documentation of the stages and the results of the research; the principle of reliability of methodical instruments of the research having been conducted; the principle of validity of research data processing.

According to combatants we (Kharchenko, & Onufriieva, 2023) distinguish the following *types of military stress*:

– **Chronic constant (or prolonged) stress.** It is determined by a constant (or prolonged) serious load on a person and causes increased neuropsychological and physiological tension of the body.

This **Chronic constant (or prolonged) stress** is shown on Fig. 1.

To evaluate the results of our research we used “26-scale bipolar version of the semantic differential for studying the characteristics of combatant stress of military personnel” (Михальчук, Харченко, Івашкевич Ед., & Івашкевич Ер., 2024). For the first group of combatants with Post-traumatic stress disorder it is **Chronic constant (or prolonged) stress** that

leads the main synonymous series, having been formed on the basis of such stylistically neutral nominal tokens, as trauma, Chronic Decease, Chronic disorders, terrible anxiety, Phobia, Combat Trauma, the ability to empathize fearsomeness, emotional consternation, psychic amnesia, terrible horror, alienation, panic, avoiding thoughts, a loud call, terror, dead fear, avoiding feelings connected with combat trauma, a great difficulty, fright, a significant decrease in interest to live, avoiding any progressive actions or difficult situations, etc. The results of factor analysis of obtained data are shown in Table 1.



Fig. 1. Chronic constant (or prolonged) stress

We proved, that combatants with Chronic constant (or prolonged) stress also observed variability in the occurrence and development of a painful emotional state, but, as a rule, at the first stage there was an accumulation of emotional tension, which, due to the interaction of certain personal characteristics and situational influences, did not find a response.

Table 1

**Factor weight of stylistically neutral nominal tokens
of Chronic constant (or prolonged) stress of combatants with
Post-traumatic stress disorder**

№	The name of stylistically neutral nominal tokens of Chronic constant (or prolonged) stress	Factor weight
1	trauma	0.98
2	Chronic Decease	0.97
3	Chronic disorders	0.96
4	terrible anxiety	0.93
5	Phobia	0.89
6	Combat Trauma	0.87
7	the ability to empathize fearsomeness	0.84
8	emotional consternation	0.80
9	psychic amnesia	0.78
10	terrible horror	0.76
11	alienation	0.74
12	panic	0.71
13	avoiding thoughts	0.68
14	a loud call	0.66
15	terror	0.58
16	dead fear	0.63
17	avoiding feelings connected with combat trauma	0.61
18	a great difficulty	0.59
19	fright	0.55
20	a significant decrease in interest to live	0.52
21	avoiding any progressive actions or difficult situations	0.50
22	remembering important important information about combat trauma and Chronic Decease	0.49
23	permanent avoidance	0.48
24	avoidance of Phobia	0.47
25	avoidance of fearsomeness	0.45
26	dead hysteria	0.42
27	misgiving	0.41
28	unwillingness to live	0.40
29	unwillingness to work	0.38
30	make suicide attempts	0.36

The Main Features of clinical manifestations of *mental trauma* of combatants are closely related to the nature of hostilities and duration of stay in *combat conditions*. A significant modifying value in the formation of mental trauma of combatants. *Dynamics of mental trauma* of combatants is *the lack of social support from the society, colleagues and commanders, insufficient cohesion of units, factors of biological deprivation (food, sleep, rest)*. Dominant psychological factors of constitutional predisposition (diathesis) show significance in the initial period of staying in combat conditions, while the reaction in the form of *being escape from the reality* prevails.

– **Acute situational stress** is caused by a certain event or phenomenon, as a result of which a person loses his/her mental balance.

Acute situational stress is demonstrated by us on Fig. 2.



Fig. 2. Acute situational stress

For the second group of combatants with Post-traumatic stress disorder it is *Acute situational stress* that leads the main synonymous series, having been formed on the basis of such stylistically neutral nominal tokens, as: fear, panic, trauma, anxiety, great difficulties with concentration of the person's attention, phobia like a fear, the excessive reaction to each situation, misgiving, short-term emotional experiences, fear or panic, great irritability, difficulty falling asleep, anger, vigilance, horror because of post-traumatic stress disorder, terror, etc. The results of factor analysis of obtained data are shown in Table 2.

Table 2

**Factor weight of stylistically neutral nominal tokens of
*Acute situational stress of combatants with Post-traumatic
stress disorder***

№	The name of stylistically neutral nominal tokens of Acute situational stress	Factor weight
1	fear	0.83
2	panic	0.82
3	trauma	0.79
4	anxiety	0.76
5	great difficulties with concentration of the person's attention	0.75
6	phobia like a fear	0.73
7	the excessive reaction to each situation	0.70
8	misgiving	0.68
9	short-term emotional experiences	0.67
10	fear or panic	0.65
11	great irritability	0.59
12	difficulty falling asleep	0.58
13	anger	0.56
14	vigilance	0.54
15	horror because of post-traumatic stress disorder	0.52
16	terror	0.50
17	the origin of the traumatization of the personality	0.48
18	great difficulties with concentration of attention	0.45

19	terrible horror	0.44
20	emotional uncloseness with other people	0.42
21	lack of experience for military actions	0.41
22	loss of the ability to remember important aspects of combat trauma	0.39
23	lack of empathy	0.36
24	risk of developing post-traumatic stress disorder	0.35
25	a high level of physiological reactivity to different events	0.31
26	difficulty surface sleep	0.28
27	neurotic level of the person's psyche	0.27
28	the terrible reaction to sudden neurotic or trauma stimuli	0.26
29	difficulties with performing a military action or doing a task	0.25
30	struggle	0.24

We proved, that the names of cluster emotions of the lexical-semantic field "fear" of combatants because of the events of War on the territory of Ukraine acted as a kind of core elements, turning it into high ordered collection of conceptually related synonymous groups of lexemes. Among them, the main synonymous series stands out, which forms the basis of the logical structure of the nominative space, since it most adequately reflects its main conceptual category. The lexeme "fear" is generic in relation to other synonymous units, a stylistically neutral unit that is used to define emotions of fear in various parts of the language, reflects the most generalized meaning and is characterized as the most frequent in use in texts compared to other units close in their meaning.

The development of *Acute Stress Reactions* among the personnel negatively affects the level of combatants' capability of the troops and often creates an additional threat to the life of the serviceman himself/herself or his comrades. Since none of the symptoms of *Acute Distress* lasts for a long time and all of them stop quickly (from a few hours to two or three days). A syndromological assessment of the condition of victims is perceived

by us as a result of hostilities, which are essentially impossible. However, the presence of such symptoms already requires the implementation of urgent psychocorrective measures, taking into account the danger of the development of longer-lasting and less reversible non-specific, and then noso-specific *Acute stress disorders*.

In military conditions, the main causes of Acute Psychological Stress are the threat to life and the responsibility for the performance of the task, the insufficiency and uncertainty of incoming information, the lack of time when making decisions and carrying out military operations, the inconsistency of the level of professional skills with the requirements imposed on the individual by the conditions of combatants, psychological lack of preparation for a specific military task, lack of confidence in the reliability of weapons, lack of trust of commands, factors of isolation (when acting apart from the main military forces, staying in isolated shelters), etc.

We understood, that *the main disorders of the servicemen's mental activity* are related to the experience that traumatizes the psyche and which is caused by military conditions, but their degree largely depends on the totality of the reaction to this factor of the entire unit. The collective reaction has a strong influence on the discipline and organization of military units.

So, a characteristic feature of the combatants' situation is the constant threat to life, under which conditions the combatant has to provide his/her war activities, can act. The demands are placed on the individual exceed its resources. As a result, combatants' stress takes a place. *The intensity of combatants' stress* has been experienced by servicemen. It depends on the interaction of two main factors: strength and duration of impact on the combatant's psyche of the influence of combatants' stressors; the characteristics of the serviceman's response to the influence of stress factors.

Combatants' stressors are divided into specific and non-specific for the combat situation. The first one has an increased

level of stress and includes: a death of loved people, relatives and colleagues; situations, which have been threatening throughout our life and physical integrity of the combatant; the cases of death of comrades in the service, civilians, for which the serviceman ascribes responsibility to himself/herself; injuries, contusions, mutilations; terrible pictures of death and human suffering; the events as a result of which the honor and dignity of the combatant has been suffered.

The second group of combatants includes stressors characteristic of both the combatants' environment and other types of stressful situations: difficult environmental conditions of life; long-term performance of strenuous activity; high increased responsibility for combatants' actions during war events; long-term deprivation of basic biological and social needs; sudden and unexpected changes in the conditions of service and life; lack of contact with relatives loved people; inability to change the conditions of combatants' existence; the intense and long interpersonal conflicts; the increased level of permanent potential threat to the combatant's life; the possibility of being killed, wounded or captured in a war that, in the combatant's opinion, is senseless.

The combatant's mental reaction to the impact of combatant's environmental stressors depends both on their significance for a specific combatant and on the characteristics of his/her compensatory behavior. The significance of the impact on the psyche of a military serviceman of certain combatant stressors in a great degree is determined by his/her individual psychological characteristics and personal features, psychological and professional readiness for combat operations, the nature and the level of combatants' motivation, features of the combatant's perception of the place and the role of combat operations in the history and perspective of his/her valuable life system.

In turn, the effectiveness of the combatant's compensatory behavior depends on the level of his/her activity. This activity, in its turn, has the aim at counteracting the negative impact of

the stress factors of the combatant's environment. The nature of the methods used by him/her to overcome the destabilizing effect of combatant's stressors on the psyche, behavior and a life as a whole. Also, the dominant is the presence of a military serviceman's experience of compensatory behavior in a combatant's environment and its real content.

Also, along with the listed factors there are some *social, ethnic, religious, family and other circumstances* that further contribute to the intensification of combatants' stress in the situation of war in Ukraine. These factors are: a) unpopularity of war in the country of which a combatant is participating in hostilities, but he/she is not the citizen of this country (in our case we mean Ukraine); b) belonging of the combatant to the nationality, which is ethnically close to the nationality of the enemy soldiers (especially if the serviceman belongs to a national minority in his/her country; for example, Kazakhs, Belarusians, Uzbeks, Azerbaijanis); c) gaining insignificant personal experience of combatants' adaptive behavior that the combatant had had in the period of pre-war life; d) the presence of a military serviceman who had experienced a military stress in the past; e) the similarity or closeness of the religion of the combatant to the religion of the enemy soldiers (especially if the combatant belongs to a religious minority in his/her country); e) the membership of a participant in hostilities among female military personnel; g) a difficult, for various reasons, situation in the combatant's family; h) a difficult material and rather difficult social situation of servicemen and their relatives in their country.

Conclusions

Therefore, it should be noted that *Post-Traumatic Stress Disorders* occur in a case of combatants as a delayed or protracted reaction to a Psycho-Traumatic Stress Event or a situation of an exclusively threatening or deadly nature (combat operations, watching the violent death of others, the role of a victim of torture, being in captivity, etc.). In its essence, *Post-Traumatic*

Stress Disorder is an appropriate reaction of a mind and a body to a *powerful emotional stimuli of a stressful situation* that occurred.

Also, the most important factors, to our mind, are: the number of wounds, contusions, injuries, having been sustained by a particular combatant to have a special influence on the level of combatants' stress manifestation in a particular military situation; the circumstances (if there are any) of his/her capture, the duration and conditions of his/her captivity. All these factors will be discussed in further our publications.

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Харченко Євген, Онуфрієва Ліана. Психосемантика видів бойового стресу учасників бойових дій.

Метою статті є ознайомлення з психосемантикою видів військового стресу учасників бойових дій: мається на увазі хронічний постійний (або тривалий) стрес та гострий ситуативний стрес учасників бойових дій з посттравматичним стресовим розладом.

Методи дослідження. Для розв'язання поставлених завдань використано такі теоретичні методи дослідження: категоріальний, структурно-функціональний, аналіз, систематизація, моделювання, узагальнення. Експериментальним методом є метод організації емпіричного дослідження.

Результати дослідження. Доведено, що у комбатантів діагностувалася високою мірою виражена варіативність виникнення та розвитку хворобливого емоційного стану. На її першій стадії відбувалося накопичення емоційної напруги, яка в силу взаємодії певних особистісних особливостей і ситуативних впливів не знаходила належного адекватного відреагування з боку військовослужбовця. Показано, що розлади

психічної діяльності військовослужбовця великою мірою пов'язані з переживаннями, що травмують психіку військового і, яке зумовлене бойовими передумовами, однак ступінь останніх великою мірою залежить від сукупності реакції на чинник переживань всього підрозділу. Доведено, що колективна співпраця здійснює неабиякий вплив на дисципліну і організованість військових підрозділів.

Висновки. Посттравматичні стресові розлади виникають у комбатантів як відстрочена чи достатньою мірою лонгітюдна реакція на психотравмувальну стресову подію або ситуацію виключно загрозливого чи смертельного характеру (бойові дії, спостереження за насильницькою смертю інших, роль жертви катувань, перебування у полоні та ін.). Доведено, що за своєю суттю посттравматичний стресовий розлад є так званою відповідною реакцією психіки військовослужбовця на досить-таки потужні емоційні подразники, стресової ситуації, які відбуваються.

Ключові слова: види військового стресу учасників бойових дій, посттравматичний стресовий розлад, хронічний постійний (або тривалий) стрес, гострий ситуативний стрес учасників бойових дій, хворобливий емоційний стан, розлади психічної діяльності військово-службовців.

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