

INTERNAL MEDICINE I

ORAL PRESENTATIONS

28. EPIDEMIOLOGICAL, CLINICAL AND THERAPEUTIC CORRELATIONS BETWEEN DIABETES AND CANCER. ORIGINAL STUDY.

Mihaela Andrei

Scientific adviser: Laura Rebegea, MD, Associate Professor, Department of Oncology, *Sfantul Andrei* Emergency Hospital, Galati, Romania.

Introduction: Diabetes mellitus type 2 and cancer are two multifactorial, chronic diseases and their co-diagnosis in the same individual is very frequent. An association between the two conditions has been studied for many years but in the last decade significant epidemiological evidence have shown that their reciprocal influences may have a major impact on population.

Materials and methods: We observed in our retrospective study made between 2014-2015, 656 patients (male and female) with histologically confirmed neoplasms, including 96 cancers of the endometrium, 117 of the breast, 66 of the colon, 104 of the rectum, 108 of the oral cavity, 127 of the lung and 38 of the liver. A history with diabetes type 2 was reported by 17% of the patients (112 cases). We compared the incidence of diabetes in each type of cancer from our study. We also compared groups of age, sex, body mass index (BMI), glucose status, grade and histologic subtypes in cancer subjects with and without diabetes. For all the statistical analysis we used the software application IBM SPSS and Microsoft Excel 2007. We didn't analysed in our study pancreatic, kidney, prostate and urinary bladder cancers.

Results: A consistent percent of patients with cancer in association with diabetes was observed in cancer of the liver (21%), breast (27%), colon (33%), rectum (17%) and endometrium (27%). No consistent association between diabetes and lung cancer was observed in the study. In the majority of the patients with cancer, diabetes was diagnosed before the diagnosis of cancer and their treatment consisted of oral antidiabetic agents. None of the differences between groups of age and gender were significant at patients with both diseases.

Conclusions: Based on our study, diabetes and cancer have a very complex relationship that requires more clinical attention and better-designed studies.

Keywords: Diabetes mellitus type 2, cancer, neoplasms, correlation, epidemiology.

29. LONG QT SYNDROME

Iulia Balan, Rahela Manoli

Scientific adviser: Braniste Tudor, PhD, Associate Professor, Chair of internal medicine, discipline Semiology, *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

Introduction: Long QT syndrome (LQTS) is a heart rhythm condition that can potentially cause fast, chaotic heartbeats. These rapid heartbeats might trigger a sudden fainting spell or seizure. In some cases, the heart can beat erratically for so long that it causes sudden death. The frequency of long QT syndrome is unknown (possibly about 1 per 5000 population). The condition is present in all races and ethnic groups, although frequency may differ among these populations.

Materials and methods: This study represents various origins and manifestations of long QT syndrome, It has been studied and analyzed various journals, surveys and clinical anatomy works to correctly determine the cause of this disease.

Discussion results: According to previous studies was set that more than 50 commonly prescribed medications can lead to drug-induced Long QT syndrome (LQTS) and serious heart rhythm abnormalities known as cardiac arrhythmias.

Physicians, other healthcare providers and patients need to be aware of druginduced LQTS. Physicians need to know:

- What drugs cause QT prolongation.
- How to identify patients at particular risk.
- How to monitor and protect patients taking a QT prolonging drug.

Patients need to know:

- What LQTS and its symptoms are.
- If they are at particular risk.
- What drugs cause QT prolongation.
- How to protect themselves.

Conclusions: From this survey we concluded that the best way to prevent long QT syndrome is to avoid or strictly monitor the use of drugs that may induce this syndrome and also run some genetic tests to be aware of our genetic predisposition and risk size. And also the best ways of treatment and increasing the quality of our patients life.

Keywords: QT interval, inherited, acquired, heart rhythm, arrhythmias, drug-induced.

30. RECURRENT LARYNGEAL PAPILOMATOSIS IN CHILDREN

Inga Banari

Scientific Adviser: Cabac Vasile, MD, PhD, Associate Professor, Department of Otorhinolaryngology, *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

Introduction: Assessing the dynamics and structure of recurrent laryngeal papillomatosis common for children from Moldova compared to the results obtained in this research with general ones published in the sources specific to the problem.