Key Words: Neuroplasticity, multiple sclerosis, cortical reorganization, rehabilitation.

46. GASTROINTESTINAL BLEEDING IN CHILDREN A SERIOS PROBLEM OF HEALTH

Nicoleta Gimiga, Claudia Olaru, Raluca Stanca

Scientific adviser: Smaranda Diaconescu, *Grigore T. Popa* University of Medicine and Pharmacy, Iasi, Romania

Introduction: Gastrointestinal bleeding, especially in children is an alarming event for parents and children, sometimes with dramatic consequences requiring quickly diagnosis and therapeutic approach. The objective of the research is identification of clinical, endoscopic, etiological characteristic of children diagnosed with upper and lower gastrointestinal bleeding.

Material and methods: It was conducted a descriptive retrospective study over a 3 year period (January 2012 to December 2014) on 107 children aged 1-18 years hospitalized for gastrointestinal bleeding in "St. Mary" Children's Emergency Hospital, Iasi. The study group does not include gastrointestinal bleeding from surgical emergencies, infectious diseases, intestinal diseases with immunological or toxic mechanism. Individualized retrospective analysis included historical data, clinical, endoscopic and targeted for etiologic diagnosis of gastrointestinal bleeding. All patients were investigated by upper gastrointestinal endoscopy/colonoscopy after the procedure was explained and informed consent was obtained.

Results: From the batch of 123 children, (45.5%) presented with upper gastrointestinal bleeding (UGIB), and 68 (51.2%) presented with lower gastrointestinal bleeding (LGIB), in four cases the source of bleeding was not identified. The main etiologycal aspect of UGB was erosive gastritis 33.9%, oesophagitis in 10.71%, duodenitis in 21.42%, gastric 8.9%, duodenal ulcers 7.4% of cases, Mallory-Weiss syndrome in 5.3%, multiple etiology in10 cases 12.5%. Causes of LGIB were colorectal polyps in 31.5%, ulcerative colitis 9.5%, nonspecific lessions in 25.3% anal fissures 14.2%, intestinal polyposis syndrome 4.7 %. It was practiced concomitent endoscopic surgery for rectal polyps.

Conclusions: Lower gastrointestinal bleeding was the most common causes related to minor conditions: colorectal polyps, anal fissures, nonspecific lesions. Non-variceal gastrointestinal bleeding the most common form Associated with erosive gastritis, esophagitis, duodenal ulcer, gastric ulcer. Endoscopy proved to be a useful investigation in the diagnosis of gastrointestinal bleeding and a therapeutic useful tool in certain cases.

Keywords: gastrointestinal bleeding, children, etiology, endoscopy, colonoscopy