

Results. Parameters of RV diastolic function indicated the RV diastolic dysfunction in patients with MS (E/A ratio 1.20 ± 0.27 in subjects with MS and 1.30 ± 0.33 in controls, $p < 0.001$; E/e' ratio 6.50 ± 1.43 in subjects with MS and 5.11 ± 1.03 in controls, $p < 0.001$). According to multiple regression analysis systolic blood pressure ($\beta = 0.105$, $P = 0.022$), waist circumference ($\beta = 0.092$, $P = 0.031$), plasma glucose level ($\beta = 0.088$, $P = 0.043$) showed independent association with E/e'.

Conclusions. MS plays an important role in RV diastolic dysfunction. The most important parameters that provoke RV remodeling are systolic blood pressure, waist circumference and glucose level, that need special attention of the physicians due to their frequency of occurrence in general population.

Key words: metabolic syndrome, right ventricle, diastolic function

48. THE LEVEL OF KNOWLEDGE ABOUT NON-PHARMACOLOGICAL MEASURES OF TREATMENT IN PATIENTS WITH CHRONIC HEART FAILURE

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Introduction. Chronic heart failure (CHF) is considered a worldwide pandemic that requires a complex regimen of drug and non-medical treatment for a lifetime. The European Society of Cardiology Guidelines recommends applying self-care management, patient ductility to reduce morbidity, mortality and to improve quality of life and patients' adherence to treatment.

Aim of the study. To study the level of knowledge of patients with chronic heart failure regarding non-pharmacological measures for the elaboration of the education program.

Materials and methods. A transverse study that included 20 patients with CHF was conducted. The patients completed a questionnaire that included 5 behavioral considerations in CHF, before and after a schooling program in the study ($n=10$).

Results. The group of 20 patients with mean age of 60.2 ± 0.05 (range 30-90) years, included 7 (35%) women and 13 (65%) men. 6 (30%) of the analyzed patients had high-education, 9 (45%) - with middle-education and 5 (25%) patients - with incomplete middle studies. According to the NYHA classification 6 (30%) patients were included in functional class II and 14 (70%) - functional class III (NYHA). Before schooling only 8 (40%) patients responded correctly to 4 from 5 questions while after schooling 20 (100%) patients responded to 4 and 7 (70%) patients correctly answered all 5 questions. An increase in the rate of high-level patients with non-pharmacological measures in the CHF by 30% was observed, also noticed that patients with higher education have a higher level of knowledge compared patients with secondary education.

Conclusions. Scheduled training of patients with chronic heart failure significantly increased the level of knowledge about non-pharmacological treatment measures.

Key words: heart failure, non-pharmacological measures, level of knowledge.

49. ASSOCIATION OF METABOLIC SYNDROME AND HYPERTENSION WITH LEFT VENTRICULAR GEOMETRY IN CHILDREN

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