

tonic drop attacks during daytime, generalized EEG patterns, and often normal neuroimaging . The prognosis is variable and difficult to predict, and the seizures may remit in 54-89% of patients.

**Aim of the study.** Review of new data about epileptic encephalopathies and clinical presentation of illustrative case of Doose syndrome

**Materials and methods.** There are used data from literature and clinical case from our clinic.

**Results.** In our clinical case the the diagnosis was based on the description of the seizures – myoclonic and atonic seizures, mainly in the morning, and also, the patient often had myoclonic status epilepticus, at EEG- we found focal and generalized epileptiform activity, at MRI of the brain - the structures of hippocampus were different on the left compare to right ,main reason because of lost of height and width of the hippocampus structure on the left, and psychological testing-severe cognitive disturbances. The treatment is adjusted permanently with raising doses of combined antiepileptic therapy, especially Valproat and Levetiracetam.

**Conclusions.** The good news for children with Doose syndrome are doing better now than in the past. Outcomes have improved over the years due to early diagnosis and better treatment options.

**Key words:** epileptic encephalopathy, Doose syndrome, seizure, electroencephalographic (EEG) patterns, GEFS+.

## 57. UPDATES ON CRANIAL NERVES DAMAGE IN NON-HODGKIN LYMPHOMA

Author: **Evelina Gherhelegiu**

Scientific adviser: Mihail Gavriluc, MD, PhD, Professor, Chair of the Department of Neurology no.1

*Nicolae Testemitanu* State University of Medicine and Pharmacy of the Republic of Moldova

**Introduction.** Although rare, alterations of the cranial nerves can be detected at any stage of the clinical evolution of non-Hodgkin lymphomas. The lesions can be focal or/and isolated of varying degrees of damage. The routine neurological examination of cranial nerves in Lymphoma patients can spot apparently minor involvement of cranial nerves.

**Aim of study.** The purpose of the research was to reveal any involvement of cranial nerves in non-Hodgkin lymphoma patients.

**Materials and methods.** Clinical neurological examination, electrophysiological examination, CT or MRI study, lumbar puncture and rarely the puncture of the nerves enlargement were performed in 83 non-Hodgkin lymphoma patients morphologically confirmed. The descriptive statistics is used.

**Results.** 39.8% (33patients) of the entire group of examined patients had clinical manifestation of cranial nerves lesion. The odor change was registered in 12 patients, flagrant optic nerve damage was established in only 1 case, oculomotor nerves injury in 3 patients, another 3 patients manifested the clinical signs of the damage of the trochlear nerve, the various degree of sensitive alteration, predominantly in the territory of the second branch of the trigeminal nerve was registered in 4 patients. Facial nerve impairment, confirmed by electrophysiology was diagnosed in 5 patients. Unilateral hearing loss of pure lymphomatous origin was registered in 2 patients. Swallowing difficulties and change of the voice modulation were recorded in 3 patients. Multiple cranial nerve lesions were counted registered in 7 cases. Most cranial nerves alterations occurred in non-Hodgkin's lymphoblastic lymphoma, derived from Type B cells. Lumbar puncture usually did not detect the presence of the lymphoma cells in the cerebrospinal fluid. The MRI or CT examination in the majority of the cases confirmed an infiltration process or compression, usually lightly involving with radiotherapy treatment.

**Conclusions.** The damage of the cranial nerves in non-Hodgkin lymphomas in the current study was mostly cause by infiltration or constriction. All nerves can be affected isolated or in group. The prognosis is usually poor and is resistant to classical existing treatments.

**Key words:** cranial nerves, lymphoma, non-Hodgkin

## **58. CONVERSION DISORDERS AT PATIENTS WITH MULTIPLE SCLEROSIS**

Author: **Doina Ropot**

Scientific adviser: Ion Moldovanu, MD, PhD, Professor, Department of Neurology no.1

*Nicolae Testemitanu* State University of Medicine and Pharmacy of the Republic of Moldova

**Introduction.** Conversion disorder is a neurological syndrome involving multiple somatic symptoms occurring without an organic cause. Multiple sclerosis is a chronic, demyelinating central nervous system disease characterized by a high degree of disability.

**Aim of the study.** To determine whether patients with multiple sclerosis exhibit or have a predisposition to conversion disorders.

**Materials and methods.** We evaluated successively 32 patients with Multiple Sclerosis for 6 months. They completed the following questionnaires: Screening Scale, Nijmegen Vegetative Profile, BECK Depression Questionnaire, Dissociated Disorders DES, Anxiety Spielberger, Somatoform Reactions, and Family Status.

**Results.** The studied group of the patients is non-homogeneous in terms of gender: 22 females (68.75%), 10 males (31.25%), 23-52 years old, with an average of 38.4 years, primary progressive 53.13%, recurrent remissive 43.75%, secondary progressive 3.2%. Vegetative disorders manifest 70% men and 63.63% women, anxiety 70% men and 77.27% women, depression 50% men and 45.45% women, dissociation disorders 50% men and 54.54% women, conversion disorders 40 % men and 45% women, sensory motor disorders, 40% men and 50% women.

**Conclusions.** Patients with multiple sclerosis develop multiple conversion disorders, especially sensory motor, with a non-significant prevalence of female sex, with primary progressive disease evolution.

**Key words:** neurology, conversion disorder, multiple sclerosis

## **59. INCIDENCE OF RISK FACTORS IN PARKINSON'S DISEASE IN THE IALOVENI DISTRICT OF THE REPUBLIC OF MOLDOVA**

Author: **Marina Talmaci**

Scientific adviser: Gavriiliuc Mihail, MD, PhD, Professor, Chair of the Department of Neurology no.1

*Nicolae Testemitanu* State University of Medicine and Pharmacy of the Republic of Moldova

**Introduction.** Parkinson's disease (PD) is one of the major progressive neurological disorders for which preventative or long-term treatment strategies are not available. Despite intense research over the last decade, PD etiology is still not completely understood. PD appears to stem from the result of complex gene interactions with environmental factors. The most common risk factors for the development of PD are the use of pesticides, traumatic brain injury, the rural environment, and the use of coffee and smoking are considered as protective factors.

**Aim of the study.** Exploring the incidence of risk factors and protective factors in Parkinson's disease for the sick population in the Ialoveni district of the Republic of Moldova.

**Materials and methods.** We conducted a prospective transverse study that included 20 patients diagnosed with PD in the Ialoveni district. By phone call, the patients responded to a questionnaire that included 10 questions about the causative and protective factors of the disease.

**Results.** The group of 20 patients, with mean age - 69 years (54-86 years), included 7 women (35.0%) and 13 men (65.0%). Eight out of 20 patients were exposed to the action of chemicals used in agriculture. Family history named 3 people with relatives suffering from the same