with CDI and UC. Most of the patients with CDI and CD were older and had an active colonic form, anemia and increased level of leucocytes.

Conclusion. CDI was detected in one of fourth patients admitted with a UC or CD flare. Older age and anemia could represent risk factors of CDI in patients with inflammatory bowel disease.

116. COMPLICATIONS OCCURRENCE DURING METHOTREXATE THERAPY IN RHEUMATOI D ARTHRITIS

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Introduction: Methotrexate (MTX) is now considered the first-line DMARD agent for most patients with Rheumatoid Arthritis (RA). It has a relatively rapid onset of action at therapeutic doses (6-8 weeks), good efficacy and ease of administration. But it can also determine the appearance of side-effects, especially pulmonary and haematological. The objectives of the study are to reveal the most frequent complications that occur during the treatment.

Materials and methods: The research is based on the information from medical records of patients that have been hospitalized at Clinical Republican Hospital during 2015. A cohort of 50 RA patients (47 women, 3 men), aged between 32-74 years (with a mean age of 53 years), was studied for the occurrence of side-effects. 37 patients (74%) were on MTX treatment.

Discussion results: Adverse broncho-pulmonary side-effects were observed in 7 patients (18,9%), with a mean disease duration of 5 years. All of the cases were confirmed by the X-ray. Anaemia was present at 14 patients (37%), only 4 of them (28,5%) presented mild anaemia and 10 patients (71%) – moderate anaemia. The mean disease duration was of 6 years.

Four patients (10,8%) abandoned the treatment, three of which (8,1%) developed drug intolerance, and in one case for an unknown reason.

Conclusion: Pulmonary, haematological and other side-effects are not a rare event during MTX therapy in RA. Improved education of patients and physicians should certainly lead to a decreased number of complications by stopping the treatment as soon as the early symptoms of damage occur.

Key-words: Methotrexate, Rheumatoid Arthritis, side-effects.

117. HIGH-RESOLUTION CT QUANTIFICATION OF BRONCHIE CTASIS: CLINICAL AND FUNCTIONAL CORRELATION

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Introduction: With the widespread availability of HRCT it has been realized that bronchiectasis remains a common and important cause of respiratory disease. To evaluate the relationships between the extent and severity of bronchiectasis on CT and clinical symptoms, spirometric abnormality, and sputum characteristics.

Materials and methods:We prospectively evaluated 40 patients with non-CF bronchiectasis confirmed by chest HRCT. Etiology, radiological modified Reiff score, microbiological profile and lung function tests were analised.

Discussion results: Among the 40 enrolled patients (mean age was $56,32\pm14,7$ %, men-48%) with bronchiectasis, the etiology was established in 70%. The most common underlying causes were past tuberculosis (32%) and COPD related (13%). In a smaller number of cases bronchiectasis were related rare causes (5%). Obstructive pattern was observed in 90 % (with a mean FEV1% $46\pm23,9\%$). Patients with cystic bronchiectasis (77%) were significantly more likely to grow Pseudomonas (23%) from their sputa and to have purulent sputa than were patients with cylindric or varicose bronchiectasis. Patients with cystic bronchiectasis had significantly lower FEV1 ($44\pm23,8\%$) and FVC ($57\pm21,2\%$) values than did patients with cylindric bronchiectasis FEV1 ($65\pm21\%$) and FVC ($72\pm13\%$). Reiff score correlated with FEV1 (r = -0.662, p < 0.05) and with FVC (r = -0.656, p < 0.05)

Conclusion: In this patient population, we found weak but significant correlations between the degree of morphologic abnormality on CT and the extent of physiologic impairment. Cystic bronchiectasis was Associated with sputum purulence and with the growth of Pseudomonas. CT classification of the type of bronchiectasis may be useful as an index of severity of the disease.

Key Words: FEV1-forced expiratory volume in 1 second, HRCT- High-resolution computed tomography

118. PARTICULARITIES OF ROSACEA IN WOMEN. CONTEMPORARY METHODS OF DIAGNOSIS AND TREATMENT

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Introduction. The main particularities of rosacea in women are the discomfort and uneasiness caused by the mild forms and their consequences (scars, pigmentation of skin), that can give rise to a considerable self-depreciation and, in turn, to a decrease in the quality of life. In such a way, this issue can lead to social inadequacy (or social inhibition) expressed into different degrees of evolution. The aim of this study is to assess the effectiveness of the topical treatment of women affected by rosacea using the dermatocosmetic MetroCreme Ivatherm.

Materials and methods. We have conducted a prospective, observational and descriptive study of 10 cases of papulopustular rosacea Associated with demodecosis, for ten women hospitalised and treated in IMSP SD si MC in 2015.