

Key words: family doctor team, legislation, public services.

77. QUALITY OF LIFE AND MULTIMORBIDITY IN HEMODIALYSIS PATIENTS

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Introduction. Multimorbidity in patients undergoing hemodialysis causes major changes in their lifestyle that affect their quality of life. In Moldova there have been no studies to prove this.

Aim of the study. To examine the quality of life (QoL) level and its correlation with multimorbidity in patients with chronic kidney disease.

Materials and methods. The participants were individuals with end-stage renal failure who received hemodialysis in one outpatient clinic in Chisinau during January and February 2018. The sample included 30 adults; they all received hemodialysis treatment for the minimum of one month. Data was collected using a questionnaire with sociodemographic and clinical variables; it also included the SF36 questionnaire for assessing the quality of life. Multimorbidity, defined as the existence of two or more medical conditions within one person, was assessed as a simple account of diseases.

Results. Of the 30 patients on hemodialysis, 17 (56.6%) were women, the mean age (M±SD) was 47.8±15.3 years. The onset of chronic kidney disease was 37.7±17.5 years; they started the hemodialysis at 46.1±15.6 years, with a duration of 16.23±20.5 months, with 1 to 3 procedures per week. Concomitant diseases were identified in 26 patients, and in 21 (70%) cases multimorbidity was established. The average total score of quality of life was found to be 62.7±12.9 (in a range 47-85) points. Scores of mental health were higher (68.6±13.4) than those of physical health (55.4±14.5, $p<0.001$). It was found that the increasing duration of hemodialysis sessions determined poorer quality of life ($p<0.05$). The total score of quality of life was found to be lower in participants with multimorbidity, especially in the physical domain ($p<0.05$). Furthermore, the number and severity of comorbid conditions correlate significantly with lower QoL ($r=0.5$, $p<0.05$) in patients with chronic kidney disease.

Conclusions. Concomitant medical conditions, multimorbidity especially, have a negative impact on the quality of life in hemodialysis patients.

Key words: hemodialysis, quality of life, multimorbidity

78. ASSESSMENT OF INFANT FEEDING PRACTICES IN THE REPUBLIC OF MOLDOVA

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Introduction. Worldwide, the prevalence of exclusive breastfeeding of infants in first 6 months of life is about 36.4%. In the Republic of Moldova, this indicator reaches the level of 40% in rural areas and 30% in urban areas.

Aim of the study. Evaluation of infant feeding practices in several urban and rural areas.

Material and methods. The study included 100 infants: 50 children from Chisinau city and 50 children from rural areas (Hincesti, Ialoveni and Stefan-Voda) between 10 October 2016 and 23 June 2017. Interviewed mothers answered to a questionnaire containing 180 items, including data about the level of education of parents, nutrition during pregnancy and after birth of mothers, infant feeding practices and food diversification.