Results. Babies at term predominated - 87.8% of cases, respectively 88.2% of cases (p>0.05). The percentage of premature neonates was 12.2% versus 10.1% in the control group (p>0.05). The mean birth weight was 3135.6 ± 67.2 g versus 3216.1 ± 54.3 g in the control group (p>0.05). The neonatal morbidity rate in the study group was 49.4% compared to 22.7% in the control group (p<0.001). The intrauterine growth restriction of the fetus was identified in every 4th child born in the study group (24.7% vs. 12.6%, p<0.05). There were 24.7% cases of perinatal EHI (hypoxic-ischemic encephalopathy) compared with 11.8% in the control group(p<0.05). The incidence of intrauterine infections in neonates was 11.1% compared to 0% in the control group(p<0.01).

Conclusions. The newborns of patients with active tuberculosis of the respiratory organs showed a high percentage of perinatal pathology, ante- and intranatal hypoxia, prematurity, intrauterine growth restriction of the fetus, forming the high-risk group for the development of EHI perinatal involvement, with a complicated evolution of the early neonatal period.

Key words: babies, tuberculosis of respiratory organs, neonatal outcomes

DEPARTMENT OF ONCOLOGY

97. TREATMENT CHARACTERIZATION AND MANAGEMENT OF BORDERLINE OVARIAN TUMORS

Author: Mariana Virlan

Scientific adviser: Tudor Rotaru MD, Associate professor, Department of Oncology

Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova.

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

Introduction. Borderline ovarian tumors (BOT) are malignant epithelial ovarian tumors with a very low incidence, therefore lacking sufficient clinical experience in diagnostics and treatment. **Aim of the study.** This study characterized the histology, clinical features, diagnostics and therapy of BOT including patients treated at the Department of Oncogynecology of the *Nicolae*

Materials and methods. In this retrospective study, patients with BOT treated between 2000 and 2016 were analyzed according to their histological and clinical reports.

Results. A total of 45 patients were enrolled. The median age was 45.6(range=18-83) years. Distribution of histological subtypes was: serous in 31 patients (57.4 %) and mucinous in 14 patients (42.6%). All patients underwent surgery and 6 patients (14.8%) were treated according to actual therapy recommendations during the initial surgery. Six patients (14.8%) received adjuvant chemotherapy contrary to treatment recommendations. In the case of 30 patients (66.7%), the definitive histological result matched in 88.9%. During average follow-up of 30.3 months (range=0-115,5 months), 6 patients (14.8%) developed tumor recurrence after 9 and 29 months, respectively, two patients (3.7%) died of causes other than BOT.

Conclusions. Our study critically demonstrated that until a few years ago, BOTs were not usually treated according to international therapy recommendations chemotherapy and surgery. The rate of tumor recurrence was very low.

Key words: borderline ovarian tumors, treatment, oncogynecology.

DEPARTMENT OF PNEUMOLOGY AND ALLERGOLOGY

98. THE ROLE OF STREPTOCOCCUS PNEUMONIAE IN ETIOLOGY OF COMMUNITY-ACQUIRED PNEUMONIA AMONG ADULTS

Author: Ana-Maria Dumitras

Scientific adviser: Doina Rusu, MD, PhD, Associate professor, Department of Pneumology and Allergology

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

Introduction. Streptococcus pneumonia (pneumococcus) remains the most common bacterial cause of community-acquired pneumonia (CAP), however significant challenges regarding the diagnosis, treatment, and prevention of this infection persist. Although pneumococcus is considered a common CAP etiological agent in children and in adults, the burden of this disease is considerably underestimated since the incidence data are derived largely from bacterial infections, though the most of pneumococcal infections are non-invasive.

Aim of the study. To evaluate the incidence of Streptococcus pneumoniae in etiology of CAP in adults in routine clinical practice.

Materials and methods. We have retrospectively evaluate all CAP patients admitted to a pneumology department in the Institute of Phtisiopneumology *Chiril Draganiuc*, during a one year period. The study cohort included 287 patients: 153 males and 134 females, with an average age of 60 (45-70) years. In order to determine the etiology of CAP microbiological analysis of sputum has been performed: sputum Gram-stain and sputum cultures in 238/287 patients with productive cough. Haemocultures and urinary pneumococcal antigen determination were performed in 49 patients with severe CAP (admitted in intensive care unit). Histological examination of the lungs was considered in 24 patients (fatal cases).

Results. The etiology of CAP was confirmed in 29% (83/287) patients. Streptococcus pneumonia was identified in 25% of cases (21/83 patients): by sputum culture in 6 patients, by urinary antigen determination in 5 patients. Evidence of typical morphological stages of pneumococcal pneumonia was found in 10 patients.

Conclusion. Etiological diagnosis of CAP in routine clinical practice is often difficult, with evidence of an etiological agent in about 1/3 cases. *Streptococcus pneumoniae* is a common pathogen in CAP etiology, but its identification is often difficult.

Key words: etiology, CAP, streptococcus, diagnosis

99. PREDICTORS OF LUNG FUNCTION IMPAIRMENT IN PATIENTS WITH NON-CYSTIC FIBROSIS BRONCHIECTASIS

Author: Irina Volosciuc, Evghenia Scutaru

Scientific adviser: Oxana Munteanu, MD, PhD, Associate professor, Department of Pneumology and Allergology

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

Introduction. In patients with non-cystic fibrosis bronchiectasis (NCFB), lung function is highly variable, from a normal spirometry to an airflow obstruction or restriction.

Aim of the study. To determine the factors associated with lung function impairment in NCFB patients.

Materials and methods. A cross-sectional study on 67 patients with NCFB admitted to a tertiary level hospital in Republic of Moldova was realized. Clinical, radiological - modified Reiff (mReiff) score and lung functional variables were analyzed. The data were presented as mean \pm standard deviation in the case of quantitative variables, and as the absolute value and percentage for qualitative variables. To identify variables independently related to FEV1, and their contribution and specific weight in accounting for the total variance of FEV1, a multiple linear regression analysis was performed.

Results. The cohort consisted of 67 consecutive patients with idiopathic (29 patients, 43%), COPD associated (23 patients, 34%) and post-tuberculous (15 cases, 23%) bronchiectasis. Mean age was 58.19 ± 12.05 years, and 66% of them were mails. More than half of the patients (57%,