and in 3 cases the cochlear implant of the Cohlear Company. Average surgery duration was one hour and 47 minutes. Average duration of post-operative in-hospital stay was 9.23 days.

Results. Out of the total number of patients (n=14), no one suffered of intraoperative complications, and the rate of early and late postoperative complications amounted to 0%.

Conclusions. After analyzing surgical techniques used in the cochlear implantation, as well as the rate of early and late postoperative complications, it has been established that this surgical technique continues to be an effective one and does not cause occurrence of complications, despite the fact that it is a classical technique.

Key words: cochlear implant, sensorineural hearing loss.

SURGERY SECTION II

DEPARTMENT OF GENERAL SURGERY AND SEMIOLOGY no.3

168. VASCULAR DISORDERS RELATED TO INJECTING DRUG USE

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Introduction. Intravenous illicit drug abuse is a significant problem in modern societies, with continuously increasing frequency and a subsequently increasing incidence of vascular complications.

Aim of the study. Was to review the potential vascular complications that could occur in patients using recreational drugs and to evaluate possible treatment regimes.

Materials and methods. We conducted a retrospective study that included 30 intravenous drug addicts, hospitalized during a seven years period with vascular complications at Department of general surgery, Municipal Clinical Hospital no.1 (Chisinau).

Results. Twenty-two (73.4%) patients were younger than 30 years. Twenty-eight (93.4%) cases were diagnosed based on clinical examination and duplex ultrasound, while another 2 (6.6%) – using CT-angiography. The following types of vascular complications were found: in 12 (40%) cases – deep venous thrombosis; in 7 (23.4%) cases – femoral artery pseudoaneurysm, in 5 (16.7%) – postthrombotic syndrome, in 5 (16.7%) – venous inguinal sinus track with hemorrhage, and in 1 (3.3%) case – infected aneurysm of popliteal artery. The treatment was conservative in 14 (46.7%) cases, but 16 (53.3%) patients required emergent surgical intervention for life-threatening conditions. Surgical procedures performed in analyzed group were the following: vascular reconstruction of femoral artery using an autogenous vein graft, triple ligation of femoral artery, closing the inguinal sinus track with definitive hemostasis, and primary above the knee amputation of lower extremity.

Conclusions. Prevention of life-threatening clinical conditions should be the primary goal of the surgical treatment of vascular complications in intravenous drug addicts. The infected arterial pseudoaneurysm with profuse external hemorrhage is the most dangerous vascular complication, the optimal management being arterial ligation. Revascularization of affected limb should be reserved only for patients who do not tolerate resulting ischemia

Key words: drug abuse, pseudoaneurysm, arterial ligation

169. EVALUATON OF RISC FACTORS FOR TROPHIC ULCERS DEVELOPMENT IN PATIENTS WITH NEUROPATHIC DIABETIC FOOT

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