

diseases, heart trauma or involvement in the tumoral process. In the Republic of Moldova, rheumatic origin of valvulopathy, remain with a significant share and are the leading cause of surgical intervention in patients with valvulopathy. Tricuspid insufficiency appeared as a result of rheumatic damage in 15-30% of cases. Prevail tricuspid damage associated with mitral or aortic diseases.

Aim of the study. Study of morbidity, evolution of the disease, methods of diagnosis of tricuspid insufficiency in adults. Evaluation of clinical manifestations of tricuspid insufficiency;

Materials and methods. The study included a sample of 123 patients 57 men and 66 women, aged from 24 to 95 years, during the 2014-2017 period, with tricuspid insufficiency with diverse degrees, pure and associated with other valvulopathy. Patients were presented with clinical signs of Heart Failure, hypertension. All patients were investigated by Doppler echocardiography and were discovered organic as well as functional valvular disorders with unique tricuspid insufficiency, and with tricuspid insufficiency associated with other valvulopathy.

Results. The morbidity analysis by in relation to the affected patients gender, we found that women make the disease 53.65%, compared with men, accounting for only 46.34%. According to etiology, with rheumatic valvular lesions etiology were 30.08%, bacterial endocarditis 8.13%, pulmonary valvular heart disease 9.75%, ischemic cause 22.76%, hypertension cause 10.56%, hypertrophic cause 1.62%, heart dilation cause 3.25%, and 13.82% of multiple associated causes. Patients with clinical signs of Heart Failure: functional class II NYHA-20.32%, III-76.42%, IV-2.43%. Tricuspid insufficiency associated by rhythm and conduction disturbances are: chronic atrial fibrillation - 66.66%, atrial flutter - 6.5% and LBBB- 6.5%, RBBB- 4.06%. Echocardiographic Doppler investigation, show 9.75% with single tricuspid insufficiency and 90.24% with multiple valvular diseases.

Conclusions. Tricuspid valve insufficiency is caused direct by alterations of valves, and indirectly secondary to left heart failure or both of them associated with diverse degrees.

Key words: valve, insufficiency, heart failure, fibrillation

111. RISK FACTORS IN PATIENTS WITH ISCHEMIC HEART DISEASES

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Introduction. Myocardial ischemia is a leader in the structure of cardiovascular morbidity and mortality. The results of the study of the prevalence of cardiovascular risk factors and the influence of modifiable risk factors could decrease the mortality caused by this disease. Metabolic disorders such as hyperglycemia, dyslipidemia and insulin resistance affect arterial function and increase their susceptibility to atherosclerosis, manifesting including increased frequency of cardiovascular complications, both acute and chronic.

Aim of the study. To explore the risk factors in patients with ischemic heart diseases.

Materials and methods. Biochemical blood analysis was performed, i.e. blood glucose determination, total cholesterol level, HDL-cholesterol, LDL-cholesterol, triglycerides, arterial pressure was monitored, patients' body mass index was calculated, the lifestyle of patients was studied, including smoking/tobacco habits.

Results. The study included 60 patients with ischemic heart disease, 30 (50 %) men and 30 (50 %) women with a mean age of approximately (53.4 ± 0.3 years), mean age of occurrence of the disease being – 47.5 years. All patients, when checking in, accused anginal pain – retrosternal, constrictive type, manifesting irradiation in arms when little and medium effort was involved, and decreasing when no effort was present or nitroglycerin was administered. 48 patients (80 %) accused exercitional dyspnea when medium effort was induced (36 patients), while at a lest level

of effort pain was accused by 12 patients. Risk factors were studied: 42 (70 %) of patients were overweight or were obese (BMI > 25 kg/m²), dyslipidemia was determined in 48 patients (80 %) of cases. Of type 2 diabetes suffered 26 (43 %) patients, 57 % the other non-diabetic, smokers were 33(55 %) patients. Different types of essential hypertension being the most common risk factor and found in 60 (100 %) patients, of which 90 % had blood pressure greater the 160/95 mmHg, and tachycardia predominating in 60 % of patients.

Conclusions. Patients with ischemia and metabolic disorders assessed in the survey were of working age (53.4 ± 0.3 years). Diabetes mellitus and hypertension was common pathologies associated with ischemia. Most patients have more than three cardiovascular risk factors, and influencing the modifiable risk factors by promoting a healthy lifestyle may reduce mortality from this disease.

Key words: myocardial ischemia, risk factors

112. THE RATE OF OBESITY AND DYSLIPIDAEMIA AMONG YOUNG MOLDOVAN WOMEN

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Introduction. Dyslipidemia and obesity are recognized modifiable cardiovascular risk factors, major health problems with increasing prevalence. Youth obesity and lipid abnormalities are not enough documented. Asymptomatic young people tend not to appeal to health services, but they may be at cardiovascular risk.

Aim of the study. To estimate the rate of obesity and dyslipidemia in the cohort of female population in the Republic of Moldova.

Materials and methods. The cross-sectional study was performed, including 302 women (17 - 29 years old), apparently healthy, enrolled at Nicolae Testemitanu State University of Medicine and Pharmacy in 2011. Venous blood samples were drawn after an overnight fasting and were subjected to following biochemical lipid parameters determination: *HDL cholesterol*, *total cholesterol (TC)*, *triglycerides*. *non-HDL cholesterol* and *LDL cholesterol* were calculated. *The following anthropometric parameters have been measured: body mass index (BMI), waist circumference (WC).*

Results. Our data showed that over 53% (160 subjects) from the studied young population had at least one lipid abnormality. The rate of hypertriglyceridemia, hypercholesterolemia, high non-HDL cholesterol and low HDL cholesterol was 13.6%, 14.2%, 7% and 34.1%, respectively. 131 female patients (43.4%) were centrally obese and 14.2% were overweight/obese (WHO criteria).

Conclusions. Young females in Moldova have alarming rate of the asymptomatic dyslipidemia and obesity. Our findings support the need of early preventive measures in this age group.

Key-words: obesity, dyslipidemia, risk factor, young.

113. CLINICAL AND IMMUNOLOGICAL CHARACTERISTICS OF SYSTEMIC LUPUS ERYTHEMATOSUS PATIENTS FROM THE REPUBLIC OF MOLDOVA

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Introduction. Epidemiological studies of systemic lupus erythematosus have been reported in the literature in many countries and ethnic groups.