Introduction. Tissue regeneration remains a current multidisciplinary issue. Up to 48% of patients with trophic ulcers are at age of maximum productivity. 67% of patients with trophic ulcers become disabled, and at 81% the quality of life considerably decreases. PRF (Platelet-Rich Fibrin) membranes are a new perspective in tissue regeneration.
Aim of the study. To evaluate the effect of fibrin-enriched thrombocytes in tissue regeneration of the patients with trophic ulcers.
Materials and methods. This prospective study, started in January 2017 and included 26 patients, divided into 2 groups: with small and medium-sized lower extremities trophic ulcers with duration of 6-24 months without epithelial dynamics. I group 12 patients have used PRF membranes, including 7 (58.3%) patients with chronic venous insufficiency, 3 (25%) with neuropathic ulcers and 2 patients (16.6%) with arterial ulcers. Out of the 14 patients of the control group, 6 (43%) had venous ulcers, 5 (35.7%) ulcers of neuropathic origin and 3 (21%) ulcers of arterial origin. All patients received general and local basic treatment. The microbiological examination in dynamics was performed at all patients. PRF membranes were obtained by centrifugation of peripheral venous blood under special conditions.
Results. Complete epithelization at 10 months of treatment combined with PRF was achieved in 66.6% (8) patients. In the control group at 10 months of treatment complete epithelization was obtained in 50% (7) patients. The histological comparison between groups demonstrated neovascularization and PMN in I group compared to group II poor in granulation tissue.
Conclusions. PRF is simple and accessible method to use. PRF membranes initiate and accelerate granulation tissue and angiogenesis. At PRF-treated patients, full epithelization of ulcers occurs more rapidly.
Key words: trophic ulcer, platelets, regeneration, PRF

SURGICAL ONCOLOGY

143. THE NEUROGENIC RETROPERITONEAL PRIMITIVE TUMORS

Authors: **Victor Schiopu**
Scientific adviser: Ghidirim Nicolae, MD, PhD, Professor; Lilian Antoci, MD, PhD, Associate Professor Department of Oncology
Nicolae Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova

Introduction. The histological ambiguity of the retroperitoneal space is the cause of the large specter of primitive tumors. Primitive tumors are classified in those with a mesodermal origin, neurogenic, vestigial, retroperitoneal cysts and various tumors. The neurogenic tumors may have different origins: ganglion cell (ganglioneuromas, ganglioneuroblastomas, neuroblastomas), paraganglionic system (paragangliomas, pheochromocytomas) and nerve sheath (schwannomas, neurofibromas, malignant schwannomas). The neurogenic primitives tumors usually present late symptoms or become palpable once they have reached a significant size (>10cm). The medical imaging (USG, CT, IRM) does not distinguish benign and malign tumors, and it does not reveal the histological origin. The biopsy and the histological examination of the removed tumor remain the main diagnostic methods.
Materials and methods. The retrospective study includes 188 cases with primitive retroperitoneal tumors (PRT) from the Gastrology Clinic of IMSP IO Chisinau, between 2005-2017.
Results. Neurogenic primitive tumors have been identified in 23 cases (12.23%), 9 (39.13%) - women and 14 (60.86%) - men. The age of the patients ranged from 21 years to 73 years, with the average age being 47.91 years. The histological profile of neurogenic tumors consisted of neurinoma - 6 cases, neurosarcoma - 6 cases, paraganglioma - 2 cases, ganglioneuroma - 2 cases,

neuroblastoma - 1 case, and neurofibroma - 5 cases, schwannoma – 1 case. The radical surgical removal of the tumor was possible in 22 cases, in one case the removal of the tumor was impossible due to an invasion of the spine and the abdominal aorta. In 18 cases (78.26%) the tumor was safely removed, in 4 cases (17.39%) – a combined operation was performed for the removal of the tumor. The recurrence of pathology occurred in 4 patients (17.39%).
Conclusions. The neurogenic retroperitoneal primitive tumors are rare pathologies with nonspecific symptomatology, the diagnosis of certainty being the histopathological and the basic treatment being the surgical one.
Key words: Primary Retroperitoneal Tumor (PRT), retroperitoneal space (RS), neurogenic tumor

144. PRIMARY RETROPERITONEAL LIPOSARCOMA

Authors: **Valentin Butnari, Victor Schiopu**
Scientific adviser: Corobcean Nadejda, MD, PhD, Department of Oncology
Nicolae Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova

Introduction. Liposarcoma is a common type of soft tissue sarcoma, which occurs most commonly in the extremities (52%), followed by the retroperitoneum (19%). Retroperitoneal liposarcoma (RL) is usually asymptomatic until the liposarcoma is large enough to compress the surrounding organs. It is often misdiagnosed due to its rarity and absence of symptoms. The symptoms of the tumor would not arise until the tumor grows to a certain dimension. Presence of a palpable abdominal mass is the main symptom at diagnosis. The management is surgical intervention. Even with complete removal of the liposarcoma, prognosis remains poor.
Aim of the study. To find the distribution of various histopathological types and grade of retroperitoneal liposarcoma and to evaluate the diagnosis, management, postoperative complications and prognosis of retroperitoneal liposarcoma.
Materials and methods. Current study presented 188 cases with primitive retroperitoneal tumors (PRT) from the Gastrology Clinic of MSPI Institute of Oncology, observed between 2005-2017.
Results. We identified 19 cases (10,10%) with histologically proven retroperitoneal liposarcoma (6 males – 31.57 % and 13 females – 68.42%). The mean age of the 19 patients at presentation was 55.26 years (range 19 - 69 years). No cases were diagnosed using preoperative biopsy. Out of the 19 cases with reported histological subtype, 17 (89.47%) were well-differentiated, 2 (10.52%) were dedifferentiated. All the patients underwent complete resection, of whom 8 (42.10%) received additional visceral organ resection (6 nephrectomy, 1 stomach resection, and 1 right hemicolectomy). However, no patients received chemotherapy or radiotherapy.
Conclusions. Retroperitoneal liposarcoma is a rare disease with a high rate of recurrence. Complete resection is the benchmark for treatment, however the combined resection of adjacent organs is occasionally necessary.
Key words: Primary Retroperitoneal Tumor (PRT), retroperitoneal space (RS), Retroperitoneal liposarcoma (RL).

145. ONCOLOGICAL MORBIDITY AND MORTALITY AMONG HEALTH CARE PROFESSIONALS IN THE REPUBLIC OF MOLDOVA

Author: **Veronica Svet**
Scientific adviser: Mereuta Ion, MD, PhD, Professor, Department of Oncology
Nicolae Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova