Ovarian cancer ranks 7th in the incidence of malignant tumors that can occur in women, with peak incidence between 40 and 65 years. A woman's risk of developing ovarian cancer is 1,4 - 1,8%, with an annual incidence of approximately 57.3 / 100,000 women who reach the age of 75-79 years, representing the fifth leading cause of death cancer in women, and 5-year survival rate for all stages is between 35-38%.

Materials and methods: we study the articles, publications and scientific literature specific for this topic

Discussion and results: Morphological obvious of the intraepithelial carcinoma in fallopian tubes showed that glandular serous epithelium of the distal fallopian tube is the origin of anatomical primary disease in most hereditary ovarian carcinomas type II, then, it seems that the identification of intraepithelial tubal carcinoma with relatively non - invasive and in situ methods, by molecular imaging could lead to an improvement in primary and secondary prevention of diseases. Approximately 5-10% of ovarian cancers develop due to genetic predisposition, by mutations of the BRCA1 gene (17q) and BRCA2 gene (13q) - forming a combination of ovarian and breast cancer, hereditary breast-ovarian cancer (HBOC) syndrome. Other genetic mutations involved in the pathogenesis of ovarian cancer are changes in metalloproteinases, in PTEN, TP53. Around 60% of cases of serous ovarian cancer in stage III and IV are related to have mutations in the TP53 tumor suppressor gene.

Conclusion: By investigating mutations in ovarian cancers genetically determined, we could increase survival by performing prophylactic salpingo-oophorectomy to susceptible persons.

283. INHERITED METABOLIC DISORDERS IN REPUBLIC OF MOLDOVA

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Introduction: Inherited metabolic diseases include different inborn errors of metabolism caused by genetic reasons. It should be noted that each inherited metabolic disorder is rare in population but all together these diseases may affect about 1 in 1000 to 2500 newborns. Some of these diseases are detected by routine screening, other need elaboration of new efficient methods of diagnosis. The aim of this study was to present the current comprehensive information about the distribution, frequency and methods of diagnostic of the inherited metabolic disorders in Republic of Moldova during last 5 years.

Material and Methods: We analyzed publications and medical data for the last 5 years using PubMed, SpringerLink system and IBN to study the incidence, prevalence, causes, symptoms, and modern methods of diagnosis of inherited metabolic disorders in Moldova.

Discussion results: It's known that the main cause of the inherited metabolic disorders is different mutations in genes that produce abnormalities in synthesis, transformation and degradation of proteins, lipids and carbohydrates. Inherited metabolic diseases are characterized by a variety of symptoms that may affect any organ and usually affect more than one. There is no effective therapy for

many inherited metabolic disorders. Current trends in the treatment are aimed at only symptomatic therapy. During the period from 2011 to 2014, in Moldova were examined children with different metabolic disorders using the following methods: fluid chromatography, NMR and mass spectrometry methods. In base of obtained data the National Register of rare diseases was elaborated. It includes 12 metabolic diseases: methylmalonic aciduria, glutaric aciduria, galactosemia, alcaptonuria, glycogen accumulation diseases, lysosomal diseases, mitochondrial diseases and others. Genetic diagnosis methods include PCR analysis, DNA sequencing, Southern blot method, and allow to reveal the problem at an early stage of development.

Conclusion: The elaboration of the National Register of the rare diseases and introduction into medical practice of the molecular methods of diagnostic of inborn errors of metabolism will help to reduce the mortality and morbidity in children due to early detection of problems and their early treatment.

284. GENETIC STUDY OF CLINICAL VARIABILITY IN THE CRANIO VERTEBRAL JUNCTION ANOMALIES

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Introduction: Cranio-vertebral anomalies represent defects of the development in the structures which are located in the transition zone between mobile cranium and relatively rigid spinal column and can involve brain, spinal cord causing various neurological clinic. Study of these conditions is very important and actual in connection with the development of direction in manual therapy as cranio-sacral therapy.

Materials and methods: Theoretical and methodological basis of the study is scientific aspects studied in the domain of congenital vertebrology. The most important part of analysis is based on material of publications which are containing specific studies from the other countries and international statistics.

Results of this research: There were determined health and development particularities of people with cranio-vertebral disorders; substantiated the main concepts in the occurrence of cranio-vertebral anomalies showing controversies regarding the dynamics of its development; found value and interaction of different factors of influence on the development of cranio-vertebral region; gave reasons for the early identification of developmental points anomaly risk of cranio- cervical junction. Investigated data suggests that malformations in the cranio-vertebral region are quite common among patients in the department of neurology. Among patients who come in the neuro-surgery department with atlanto-axial dislocation 25% have congenital variant of displacement. Clinical polymorphism correlates with a variety of changes at the genetic level.GDF3,GDF6 and MEOX1 genes are involved in bone development and mutations in these genes cause heterogeneity in Klippel-Feil syndrome(KFS).