extirpated, with the ovary ptreservation. Because of the concretion of the capsule with the posterior side of the ligamentum, the attempt to keep the uterine tube failed and the decision was made to perform tubectomy. The postoperative period was without any particularities, the patient was discharged on the 5th postoperative day. The histological examination revealed the morphological peculiarities of a papillary cystadenoma at the limit of malignancy or, more preferably, of the borderline type, serous. Twenty-one months after surgery, the patient remained asymptomatic.

Conclusions. The clinical case presented is the fourth case of paraovarian/paratubar borderline tumor in pediatric patients, documented in the literature at that time. Ovarian conservation, with maximum preservation of fertile function, are currently the unanimously accepted tactics.

Key words: borderline, paraovarian tumor, malignancy, teenager

DEPARTMENT OF PEDIATRICS

207. ADRENAL NEUROBLASTOMA IN CHILDREN. ANALYSIS OF CLINICAL SERIES OF 6 CASES.

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Introduction. Neuroblastoma is the most common solid tumor in infants and young children and accounts for 8% of all childhood tumors. The prevalence is 1 in 7000 live births. Some studies show a two-phase incidence with a "pick" before the age of 1 year and the second between 2-4 years respectively. Neuroblastoma with localization in adrenal glands was found in each of 100 children who died in the first 3 months of life. The exact etiology remains unknown.

Aim of the study. To highlight the: clinical, laboratory, imaging and histopathological particularities and also the results of the surgical treatment of the adrenal neuroblastoma, in stages IV and IV.S.

Materials and methods. We conducted a retrospective and prospective study of a clinical series of patients with adrenal Neuroblastoma. Series, being analyzed from the perspective of the existing database in actual literature. We have evolved the clinical, laboratory and imaging particularities.

Results. Patients were divided into 3 sides according to age (0-6) months -3 patients (50%), (6-12) months - 2 patients (33%), (> 12 months) - 1 patient (17%). Gender distribution being: 2 girls (33%) and 4 boys (67%). Suggestive symptoms for the presence of a tumor were found preoperatively in 5 (83%) patients, with the exception of one patient in whom the tumor was found accidentally. The symptoms appeared in various associations in those patients. The diagnosis was established during the antenatal period for 1 (17%) patient, the other 5 (83%) - postnatal. Laboratory investigations revealed: anemia – 2 (33%) children, increased LDH activity in 4 children, increased ferritin in 4 (67%) cases. The value of the exploratory diagnostic imaging was clearly superior to the laboratory analyzes. Surgical treatment was performed in all 6 cases presented. All patients benefited from adjuvant treatment after surgical intervention. Adjuvant therapy consisted of the administration of Etoposide 50 mg, Doxorubicin 10 mg Carboplatin 10 mg, Cyclophosphanan 300 mg.

Conclusions. The treatment of neuroblastoma is multimodal and depends on the extent of the lesions, the research data, the staging criteria. The neuroblastoma has a reserved prognosis when regional ganglia are involved and serum glycosylated ferritin is increased.
Key words: Neuroblastoma Ferritin

208. VISUAL DISTURBANCES DIAGNOSE IN CHILDREN AFTER HEAD TRAUMA

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Introduction. Even if medicine science undergoes a continous development we may still outline that brain injury still be considered as one the most frequent medical condition all around the world. As far as the statistic outline that the rate of brain trauma among children is all the time in progress rating double as speaking about age between 7 and 18 years, still we find difficult evaluating this category of patients. That is why visual disturbances that may outcome of a brain trauma in a child will hace a define role in its future development as an adult. The managment comes quite different when we speak of children versus adults, requesting an adequate approach for visual post traumatic deficiencies apreciation.
Aim of the study. Aim of the study is to determine and classify visual disturbances that appear after head trauma in children in order to assess a personalized approach.
Materials and methods. The study was a case control research based on 49 patients hospitalized at the neurosurgery department suffering from a traumatic brain injury (TBI) and 49 patients with visual disturbances but with no brain injury in the past five years. The patients have undergone a full ophthalmological evaluation by using all of the standart and auxillary investigations required. Since the research has been provided for children, the diagnose approach has been selected individually since the patients were hospitalized at different age and general status.
Results. Results showed a loss of visual acuity in the first 72 hours after trauma number being determined in 41 (83,7 %) patients after TBI, mostlly diagnosed with hyperopia indexes while undergoing autorefractometric evaluation in 45 (91,8%) patients. There have been also determined changes in visual field examination in the acute stage after trauma, patients presenting fixation loss in almost 44 (89.8%) patients establishing visual field disturbances of a differen area in almost all of this patients. Recording to the contrast sensitivity test we may also outline a clear disturbance for color perception being present in 46 patients after TBI that in 94% cases. We may also outline that 45 children presented convergence insufficiency with an average near-point of convergence (NPC) ranged between 7-9 mm.
Conclusions. The research noted once again that children present a full spectrum of vision alteration being a process established fast but with clear pecularities for a full recovery. Due to some distinguished aspects in cerebral blood flow regulation, the pediatric age group is subject to the development of intracranial hypertension (ICH), the cause of the development of which is the expansion of the brain. This reveals the cause for the acute onset of visual disturbances after head injury in children. Also it has been revealed that most of the standart ophthalmologic