

according to the social economical level identified that 70 (76%) were retired individuals. People with disabilities were 10 (11%). No financial support was established in 12 (13%) cases. Harmful habits were established in 38 (42%) cases with active smoking. Chronic alcohol consumption was identified in 18 (20%) cases. Intravenous drug use in anamnesis was established in 1 (1%) cases. Were in tuberculous contact 12 (13%) cases. Assessing the tuberculosis anamnesis was detected a previous antituberculosis treatment in 28 (30%). The majority 78% were diagnosed with infiltrative form, however severe, extended with bilateral localisation were diagnosed in 33 (36%) cases. Microbiological positive were 25 (27%), however the conventional cultures established mycobacteria in 45 (49%) cases. All patients were treated with first line antituberculosis drugs which conducted to a successful outcome in 70 (75%). Low outcome included death 6 (6%), failure 3 (2%) and lost to follow up of 6 (6%).

**Conclusions.** People older than 65 years are an age group affected by TB if there are several common risk factors established: male sex, social vulnerable state, harmful habits (active smoking, alcohol consumption) and comorbidities. One third of the group resulted in poor treatment outcome. It can be concluded that a complex approach to patients older than 65 should be done, not only in mun. Chisinau, considering the epidemiological state of tuberculosis in the Republic of Moldova.

**Key words:** Tuberculosis, comorbidities

## DEPARTMENT OF NEUROLOGY

### 142. YOUNG ADULTS WITH ISCHEMIC STROKE IN THE REPUBLIC OF MOLDOVA'S TERTIARY NEUROLOGY CENTER

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**Introduction.** Ischemic stroke in young adults is a rising health problem with multiple risk factors and a big socio-economic impact.

**Aim of the study.** The aim of the study was to characterize the cohort of Moldovan young ischemic stroke patients.

**Materials and methods.** Was done a retrospective medical records evaluation of 1687 patients with ischemic stroke treated in tertiary neurology center from January 2018 till December 2019. Were identified 59 patients aged 50 and less and included in the study. To all the study patients was analyzed the risk factors profile, clinical presentation, neuroimaging, and comorbidities.

**Results.** The study cohort consists of 67.9% men and 32.1% women, mean age – 42.95±6.7. In 82.1% was the first-ever stroke and 17.9% - recurrent. The middle cerebral artery territory was affected by 76.8%, mostly in the left hemisphere – 46.4% and posterior territory – 19.6% with brainstem location in 12.5%. The first clinical presentation was motor deficit – 60.7%, speech impairment – 23.2%. NIHSS was 10.03±5.14. Neuroimaging shows: ischemic lesion – 94.6%, concomitant lacunar infarcts/leukoaraiosis – 28.6%, old strokes – 19.6%. Large vessel occlusion was documented in 12.5% (left side – 75%), stenosis – 30.4% (mean 43.5±15.7%)

and vertebral artery hypoplasia – 25%. In 55.4% of patients, the sedimentation rate was elevated and in 26.8% - leukocytosis. Only 41.1% of patients were on anterior treatment and 7.1% had anticoagulant drugs. In 26.8% patient different types of infection were documented prior to stroke onset.

**Conclusions.** Moldovan cohort of young adults with ischemic stroke presents the same risk factor profile as older adults with the trigger role of infections in the stroke onset.

**Key words:** stroke, young adults, risk factors

### 143. THE INFLUENCE OF PSYCHOLOGICAL FACTORS ON THE ABILITY TO EXPERIENCE ORGASM IN WOMEN OF REPRODUCTIVE AGE

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**Introduction.** Female sexuality is a controversial issue due to its embarrassment, great complexity, and scarcity of scientific research. About 44% of women suffer from sexual dysfunctions and 15-20% have orgasm difficulties (Shifren, 2008). Due to the complexity of the factors that influence the female sexual response, including sexual desire and arousal, emotional intimacy, general and sex-specific anxiety, and distress about the situation, it is hard to establish the etiology of anorgasmia in women. However, it was found that the most important risk factor for female sexual dysfunction is impairment of mental health, especially affective disorders (Rosen, 2009; Pedersen, 2017). Lack of subjective arousal and pleasure are linked to anxiety, whereas depression has negative effects upon orgasmic experience. Often neglected by clinicians, female sexual dysfunction has a significant impact on interpersonal functioning and overall quality of life

**Aim of the study.** To determine psychological disturbances which can have a significant impact on the ability of women to experience orgasm

**Materials and methods.** In this study participated 129 women of reproductive age (18 to 47 years), from which a sample of 29 women was selected based on the criteria of being sexually active in the last 4 weeks. The study was based on self-report questionnaires: Symptom Checklist-90 (SCL-90) and the Female Sexual Function Index (FSFI). The selected women were separated in 2 groups: who have orgasm most of the time and with orgasm difficulties, based on the results of FSFI. A comparative analysis was performed and Student T-test was applied in order to confirm the statistical significance of clinical findings.

**Results.** We have found that women from the group with orgasm disorder had significant ( $p<0.05$ ) higher values on 3 scales – hostility, obsessive-compulsive and phobic in comparison with those who can experience orgasm. However, there were no statistical differences in the dimensions of anxiety and depression, although in the literature there is evidence that these can limit women's arousal and therefore frequency of orgasm.

**Conclusions.** It can be concluded that women who have difficulty in experiencing orgasm are more aggressive, have thoughts which they don't have control over and have irrational fears. This leads to difficulty in having sexual fantasies, experiencing relaxation and pleasure. Due to the negative thoughts and fear, they can't express their feelings and can't communicate their sexual needs and preferences with their partner. In addition, they might have a misinterpretation of sensations perceiving them as threatening rather than pleasurable, which will sabotage the