

(29.5%) stage IA2, 1522 (43%) stage IB1, 48 (13%) stage IB2. Of 16 studies that have been reported fertile results are 47.9% (397/829), birth rate with 59.5% (514/864), premature birth rate 61.9% (302/488) and abortion rate in the second trimester was 71.8% (26/362).

Conclusions. This article focuses on current options for conservative surgery in early cervical cancer associated with long-term oncologic efficacy, keeping reproductive function. Treatment that determines fertility conservation, radical trachelectomy is favourable, and carefully selected women can maintain fertility and get a pregnancy.

Key words: conization, radical trachelectomy, cervical cancer, early stage, conservative

101. BREAST CANCER IN MEDICAL WORKERS DEPENDENT ON MENOPAUSAL STATUS

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Introduction. Breast cancer in medical workers is higher than the general population, and is growing steadily and continue.

Aim of the study. Studying breast cancer in medical workers dependent on menopausal status

Materials and methods.. The study was carried out on 196 female medical staff with a mammary gland camera, over the years 2010-2018. The study was conducted based on the questionnaires of the breast cancer doctors, and on the observation and outpatient records.

Results. Of the 196 women medical personnel included in the study for the given period, with the oncological pathology of the mammary gland confirmed histologically, only 5 persons (2.5%) were in the fertile period, 28 (14.4%) were in the premenopausal period, 25 (12.7%) were in the menopause period and 138 (70.4%) in the postmenopausal period. In stage I TNM, 7 (12.7%) were detected in the pre-menopausal period, 4 (7.3%) in the menopause period and 39 (70.9%) in the postmenopausal period. In stage II TNM (n = 103), in the postmenopausal BC period in medical workers was confirmed in 14 (13.6%) patients, in the menopause period 9 (8.7%) and in the postmenopausal period in 80 (77.7%) patients. In stage III TNM (n = 23), the diagnosis of BC in medical workers was appreciated in the postmenopausal period in 6 (25%) patients, in the menopause period in 8 (33.3%) and in the postmenopausal period in 10 (41.7%). In stage IV TNM, predominantly, in 7 (53.8%) BC in medical workers was determined postmenopausal.

Conclusions. Breast cancer in medical workers has increased over the years, and has a higher incidence of breast cancer in medical workers is in the pre- and postmenopausal period, compared with the fertile period and the menopause, but in the general population, stages I and II are more frequent.

Key words: doctors, medical workers, breast cancer, menstrual periods, menopause.

102.MALIGNANT TUMORS ASSOCIATED WITH PREGNANCY

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Introduction. Cancer during pregnancy is uncommon. But when it does occur, it can be a complication for the mother and the health care team. Pregnancy itself does not appear to affect

how well the cancer treatment works. But if a woman's diagnosis or treatment is delayed due to pregnancy, the cancer may have a larger effect, and this may lead to more risks associated with the cancer. The diagnostic and therapeutic management of the pregnant patient with carcinoma is very doubtful since it involves two persons, the mother and the fetus. Obstetricians and oncologists should offer maternal treatment and fetal well-being at the same time.

Aim of the study. Studying malignant tumors associated with pregnancy.

Materials and methods.. The study constituted the retrospective analysis of the primary documentation (clinical observation card, ambulatory card) of 14 patients with malignancies associated with cancer within the IMSPIO and the Mother and Child Center during the years 2015-2018 in the Republic of Moldova.

Results. In 2015 we found 3 patients with cancer associated with pregnancy, of which, 2 patients were diagnosed with pregnancy associated with breast cancer (14.3%), 1 pregnant patient with cervical cancer (7.1%), and patients with ovarian cancer and pregnancy were not detected. In 2016, 4 patients (28.6%) were detected, of which, 2 patients with breast cancer associated with pregnancy (14.3%), 1 pregnant patient associated with cervical cancer (7.15%), 1 pregnant patient associated with ovarian cancer (7.15%). In 2017, 3 patients (21.4%) were detected, of which, 1 pregnant patient with breast cancer (7.1%), 1 pregnant patient associated with cervical cancer (7.1%) and 1 pregnant patient associated with ovarian cancer (7.1%). And in 2018, 4 patients (28.6%) were detected in total, of which, 2 pregnant patients with breast cancer (14.3%) and 2 pregnant patients with cervical cancer (14.3%).

Conclusions. Summarizing the years 2015-2018 were detected 14 cases of patients with malignancies associated with pregnancy, of them the most commonly associated are; breast cancer, cervical and ovarian cancer, so 7 patients in total were obtained with breast cancer and pregnancy. 5 patients with cervical cancer and pregnancy. 2 patients with ovarian cancer and pregnancy. Thus we can conclude the importance of studying cancer associated with pregnancy, studying the first signs of impairment, diagnosis and correct treatment during pregnancy and preventing these diseases during woman course with pregnancy, assuming the safety of her and her fetus.

Key words: breast cancer, ovarian cancer, cervical cancer, malignancy, pregnancy,

RECONSTRUCTIVE MICROSURGERY

103. FREE MINI- FLAPS IN FINGERS' SOFT-TISSUES DEFECTS RECONSTRUCTION

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Introduction. Reconstruction of fingers with skin and soft tissue defects remains challenging. Optimal reconstructive treatment should be simple, reliable, cost effective, and provide pliable, sensitive, and cosmetically similar tissue that will allow adequate function. A free flap of appropriate size may provide ideal surgical solution, since is associated with shorter time of returning to work and satisfactory function and aesthetic appearance.