

Aim of the study. The knowledge and information about this syndrome is necessary to pay special attention during nose surgery and awareness of the diagnosis of ENS for its prevention.

Materials and methods.. ENS symptomatology was evaluated using SNOT 20 or 22 (Sino-Nasal Outcome Test). Then SNOT-25 was used to evaluate symptomatology of ENS. New ENS6Q (Empty Nose Syndrome 6 Question-naire) was also used for evaluation. ENSIA proposed a modified fifty-five SNOT test (55) to evaluate ENS symptoms. This proposed SNOT-55 is based on SNOT-25 by adding thirty new articles.

Results. Empty nose syndrome affects a small number of the population. The incidence is not known, as there is no specific research in this area. The absence of incidence studies is directly related to the lack of awareness of ENS among health professionals. This resulted in the absence of diagnostic criteria and the omission of an ENS diagnosis in the patient records. ENS appears as a result of turbine surgery and may occur within a few months. Every turbinate procedure can cause ENS if it performed too aggressively. Some turbine interventions increase the probability by ENS, for example partial or total resection of the lower nasal turbinates or cauterization of the mucosal surface. At the moment, ENS can be diagnosed in the clinical setting and the diagnosis is able to be further supported by diagnostic tools available outside the clinical setting. The conservative management of the ENS is based on irrigation and hydration of the nose to maintain the remaining mucosa and should be performed to extend as best as possible the life of the patient. Permanent nose care is burdensome and time consuming.

Conclusions. The quality of life is significantly reduced in patients with ENS. ENS has an impact on employment, physical health, social and financial aspects of the patient's life. While nasal reconstruction operations and treatments with regenerative drugs can lead to symptom improvement, it is important to remember that turbine tissue cannot be replaced or recovered and there is no cure for ENS.

Key words: Empty Nose Syndrome (ENS), nasal surgery, nasal turbinates

DEPARTMENT OF PNEUMOPHTISIOLOGY

155. FEATURES OF PULMONARY LIMITED TUBERCULOSIS IN ACTUAL EPIDEMIOLOGICAL CONTEXT

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Introduction. The limited forms of pulmonary TB are the clinical radiological forms that affect less than 3 pulmonary segments and these are: nodular pulmonary TB and the limited forms of infiltrative pulmonary TB - broncho lobular infiltrate, round and oval infiltrate.

Aim of the study. To assess the clinical and outcome features of pulmonary limited TB.

Materials and methods. A retrospective, longitudinal, selective study, which included 48 cases of pulmonary limited TB hospitalized in the Municipal Clinical Hospital of Phthisiopneumology during 2017.

Results. Limited forms of pulmonary TB are more frequently diagnosed among females 30 (62%) vs males 18 (38%), young people, aged younger 45 years old 32 (67%) vs 16 (33%) elder 45 years, and patients with urban residence 22 (46%) compared with rural ones 25 (53%).

The role of the social risk factors was diminished by low life conditions in 28(58%) patients. Active smoking was identified in 26 (54%), heavy alcohol consumption was established in 8 (17%). The most of the patients 14 (29%) were detected by passive way, of which 12 (25%) cases were symptomatic. Screening of the high risk groups allowed the detection of 10 (21%) cases performed by the general practitioner and of 4 (8%) by the pulmonologist. All cases have never been treated for TB previously. Microbiological investigation revealed acid-fast-positive cases in 4 (8%) and GeneXpert in 5 (10%) cases. Epidemiological risk factors, such as TB contact and the membership of an infectious clusters were established in 8 (17%) and, accordingly, in 4 (8%) cases. The clinical-radiological diagnosis of pulmonary infiltrative was established in most cases 32(67%), with predominant localization in the upper segments S1 and S2 in 27 (56%) cases. All patients were treated using the first anti-TB drugs. Successfully treated were 40 (92%) and 4 (8%) were lost to follow-up due to improvement of the general state and lack of desire to complete the treatment.

Conclusions. Most patients with pulmonary TB with limited forms encountered the social vulnerability. However, they timely contacted healthcare services, especially a general practitioner. Limited forms were localised predominantly in the upper segments, had a low indicator of microbiological positive results. Early detection of limited forms of TB has improved the outcome of the disease and can serve as a good example of an efficient case-management.

Key words: limited tuberculosis (TB), screening, outcome.

DEPARTMENT OF PNEUMOLOGY AND ALLERGOLOGY

156. EXTRAPULMONARY MANIFESTATIONS IN SARCOIDOSIS PATIENTS

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Introduction. Sarcoidosis is a systemic granulomatous disorder of unknown cause that predominantly affects the lungs, more commonly seen in young adults. Considering the systemic character of the disease and that a great proportion of patients with sarcoidosis don't present any symptoms, it is important to actively screen for other organ involvement

Aim of the study. To identify the rate of extrapulmonary manifestations in patients with pulmonary sarcoidosis.

Materials and methods. We have analyzed 41 consecutive sarcoidosis patients admitted to the Institute of Pthisiopneumology Hospital, Chisinau, Republic of Moldova within 2017-2019 years.

Results. In our study group the mean age was 54.5 ± 6.3 years, most of them were women (27 (68.8%)), predominantly non-smokers (39 (78%)). We found extrapulmonary manifestations in more than a half of patients (25 (60.9%)). 11 out of 25 (44%) had 2 extrapulmonary manifestations. The most frequent extrapulmonary manifestation was skin lesions, found in 13 (31.7%) cases, joints involvement manifested by arthralgia and joint pain has been registered in 7 (17%) cases. Other manifestations were: eye lesions –found in 4 (9.7%) patients, peripheral lymph nodes – 4 (9.7%) individuals, liver involvement manifested as hepatomegaly – in 2 (4.8%) cases, 3 (7.3%) patients had hypercalciuria, 3 (7.3%) patients had spleen enlargement