(13%); nipple leaks – 2 cases (3%), pain – 1 case (2%). Tumor sizes ranged from 1.0 cm to 5.5 cm. Thirty-eight patients had tumors smaller than 2 cm, 24 patients had tumors with sizes between 2 and 5 cm and 1 patient had tumor of 5.5 cm. There were diagnosed 3 patients (5%) with stage I; 13 patients (21%) with stage IIA; 39 patients (62%) with stage IIB; 4 patients (6%) with stage IIIA; 4 patients (6%) with stage IIIB. Out of 63 patients, 42 patients (67%) received preoperative treatment: chemotherapy – 39 patients (61.9%), radiotherapy – 3 patients (4.7%). Of the patients receiving chemotherapy, 5 patients took 2 courses, 16 patients – 3 courses, 14 patients – 4 courses, 2 patients – 6 courses, 2 patients – 8 courses. Surgical treatment of malignancies was performed by two methods: single mastectomy – 18 malignant tumors (28.5%), Madden radical mastectomy – 45 malignant tumors (71.5%). Key words: breast cancer, evolution, treatment.

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94. CONTEMPORARY SURGICAL AND CHEMOTHERAPEUTIC TREATMENT OF BORDERLINE SEROUS OVARIAN TUMORS

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Introduction. Borderline ovarian tumors are a special group of tumors that have histopathological character and lie between benign and malignant ovarian tumors. 15 to 25 % of gynecological tumors are borderline ovarian tumors, whereas serous and mucosal tumors in the histological majority are borderline affecting the reproductive age. Borderline ovarian tumors or semi-malignant tumors are a group of lesions that show some malignant character (moderate cellular atypia, epithelial stratification, reduced mitotic activity), but without stromal invasion.

Aim of the study. The purpose of this paper is to present the statistical results and to analyze the data from the published literature concerning this pathology with respect to the surgical and chemotherapeutic treatment of borderline ovarian tumors.

Materials and methods.. The retrospective study was performed with a group of 40 patients who are suffering from tumors with low-malignancy and a good long-term prognosis. Surgical treatment is the fundamental treatment of borderline ovarian tumors, but there are some debates concerning chemotherapeutical treatment.

Results. După structura istologică, în ovarienă tumorală se limitează la un punct tipic seros prevalent în 64%, urmat de mucinoase cu 31% și tipul endometroid i-au revenit 5%. Diagnosticul intraoperator al tumorilor ovariene de frontieră s-a bazat pe: concreșteri papilomatoase în 31 de timp cu 78%, ruperea capsulei tumorii depistată la 5 paciente ce a constituie 14%, afectarea bilaterală ovariană la 17 paciente (47%), ascendentă în 6 poate cu 16,6%.

Conclusions. According to the histological structure, in the borderline ovarian tumors the serous type prevailed in 64%, followed by mucinous 31% and endometroid type took up 5%. The intraoperative diagnosis of borderline ovarian tumors was based on: findings papillomatous in 31 cases with 78%, tumor capsule rupture detected in 5 patients who constituted 14%, bilateral ovarian involvement in 17 patients (47%), ascites in 6 cases with 16.6%.

Key words: borderline ovarian tumors, malignity, surgical treatment.