CONSACRAT ANIVERSĂRII A 75-A DE LA FONDAREA USMF "NICOLAE TESTEMIȚANU"

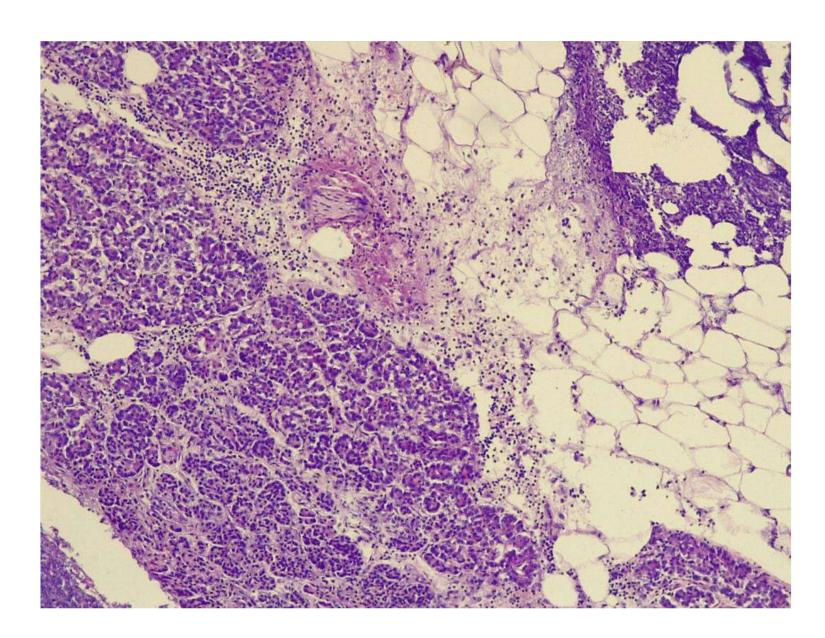
PANCREATIC MANIFESTATIONS OF THE SYNDROME MODS / MSO

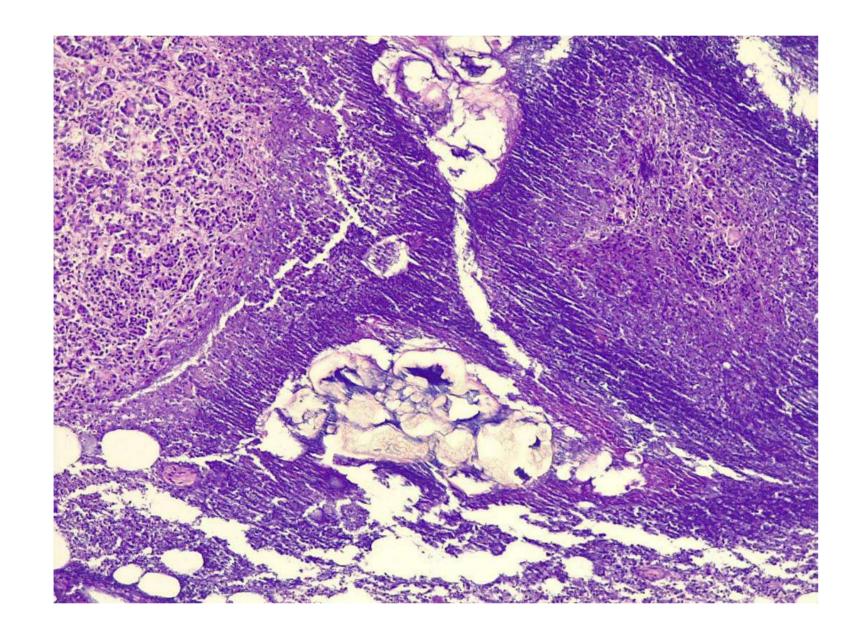
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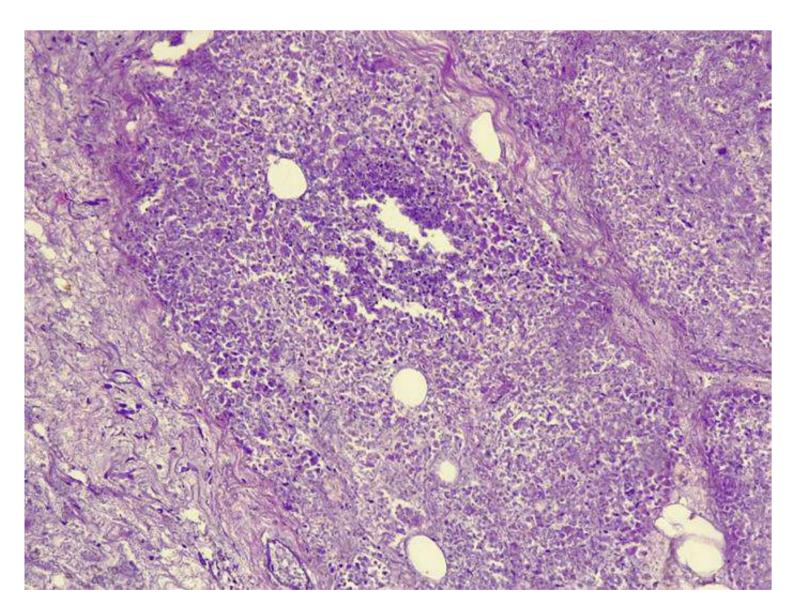
Introduction: Acute necrotizing pancreatitis generates MODS / MSOF syndrome repeatedly, at first onset and then on necrosis infection.

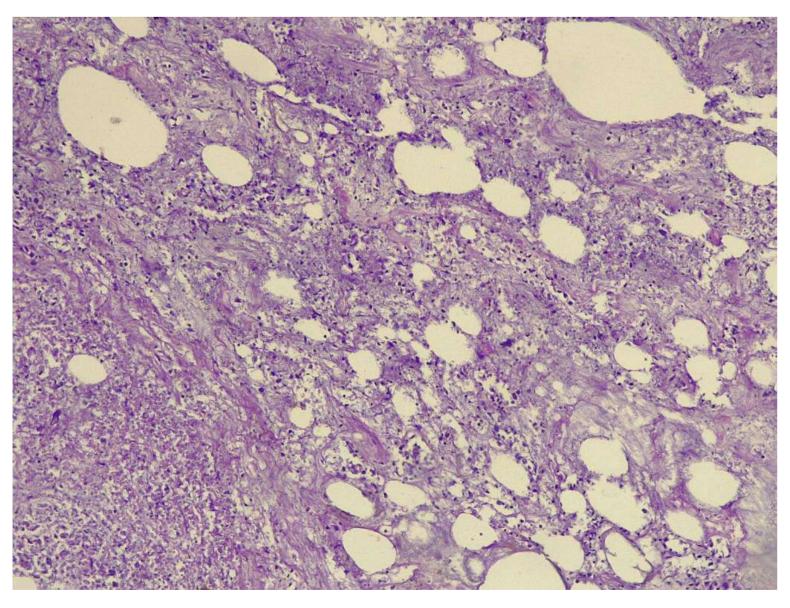
Keywords: PA MSOF MODS PAN BPCO





Necroza parenchimului pancreatic (acinilor, ductelor, insulelor Langerhans), necroza a țesutului adipos din interstițiul pancreasului, spațiul peripancreatic, hemoragii focale, necroza peretelui vascular, extinsa cu infiltrație celulara, predominant leucocitară





Necroză focală atât în parenchimul pancreatic, căt și în țesutul adipos pancreatic și peripancreatic (citosteatonecroză), insoțite de infiltrate inflamatorii

Purpose: Elucidation of pancreatic manifestations in severe systemic diseases accompanied by MODS / MSOF syndromeElucidation of pancreatic manifestations in severe systemic diseases accompanied by MODS / MSOF syndrome.

Material and methods: Clinic-morphological study included 198 cases of death over a period of 5 years (2015 - 2020). Age over 50 years predominates - 170 cases (85.6%); men - 103 (52%), women 95 (48%) cases. The duration of hospitalization in the ATI department varied: 1 day - 25%, more than 10 days - 18%.

Results: Primary diseases: liver cirrhosis, myocardial infarction, BPCO, chronic heart disease were more than half cases. The MODS / MSOF syndrome occurred: cardiorespiratory failure 167 cases (84.3%), liver failure (90 cases (45.4%), acute renal failure 100 cases (50.5%), acute brain failure 39 cases (19.7%). Detected pancreatic morphological manifestations: parenchymal and adipose necrosis, diffuse, extensive and focal - 49 cases (24.7%); pancreatic and peripancreatic necrosis on the background of pancreatic fibrosis - 119 cases. (60.1%); pancreatic autolysis accompanied by outbreaks of necrosis -32 case. (16.2%).

Conclusions:MODS / MSOF syndrome burdened with severe systemic disorders generates secondary pancreatic necrosis. The pancreatic response that occurs is usually without obvious clinical manifestations, it must be anticipated in the initiated complex treatment.