

vedere de la 100 până la 20%, a microflorei – de la 52 până la 9 la 100 leucocite, a mărit cantitatea de leucocite vii până la 37,5±7,6%, a micșorat numărul de leucocite distruse până la 62,5±7,6%. Expunerea la vacuum a micșorat numărul total de celule până la 4,5%, a microflorei – până la 1 la 100 leucocite, a mărit numărul de leucocite vii până la 87,5±6,4%.

**Concluzii:** Aplicarea vacuum-ului crează condiții optime pentru desfășurarea normală a procesului de regenerare a plăgii.

#### THE EFFICACY OF VACUUM IN TREATMENT OF FOURNIER GANGRENE

**Introduction:** After debridement of Fournier gangrene in a new formed wound, can remain the rests of necrotic tissue, blood particles, microorganisms, which can be incomplete excised by the classic methods of wound festering.

**The aim of study:** To demonstrate the efficacy of vacuum in process of aggressive debridement of Fournier gangrene.

**Material and methods:** We present 22 patients with Fournier gangrene, wounds of which after aggressive debridement, were exposed to the action of vacuum, with negative pressure of 0.72 bar, time of 5-10 minutes till the appearance of capillary bleeding. The efficacy of this method was demonstrated by the examination of microorganisms' quantity in a wound and cytological data before and after debridement, and after vacuum.

**Results:** The quantity of microorganisms' in a wound till the debridement was  $5.4 \times 1.03 \times 10^6$ , after debridement –  $6.3 \pm 1.4 \times 10^4$ , after vacuum –  $5.5 \pm 1.2 \times 10^3$ . The cytological examination had showed that debridement reduced the total number of cells from 100 till 20%, the microorganisms – from 52 till 9 per 100 of white blood cells, increased the number of healthy white blood cells till 37.5±7.6%, and minimized the number of destructed white blood cells till 62.5±7.6%. The vacuum had been reduced the total number of cells till 4.5%, the microorganisms' – till 1 per 100 white blood cells, increased the number of healthy white blood cells till 87.5±6.4%.

**Conclusions:** The vacuum induces the optimal conditions for normal process of regeneration of the wound.

#### SUBOCLUZIE INTESTINALĂ PRIN ACTINOMICIZĂ FORMĂ TUMORALĂ (CAZ CLINIC)

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**Caz clinic:** Se prezintă cazul unui bolnav în vârstă de 65 de ani cu sindrom subocluziv intestinal cronic, scădere ponderală cca 20 de kg în ultimul an. La examenul obiectiv: formațiune tumorală palpabilă în fosa iliacă stângă de cca 15/20 cm. Colonoscopia evidențiază stenoza sigmoidiană la cca 15 cm de la orificiul anal. Nu s-a prelevat fragment pentru biopsie. S-a intervenit chirurgical. S-a găsit un bloc tumoral sigmoidian mare și un mic abces între acesta și vezica urinară. S-a practicat colectomie segmentară pe sigmoid. Evoluție postoperatorie favorabilă. Surpriză la examenul anatomo-patologic: actinomicoză.

#### PARTIAL INTESTINAL OBSTRUCTION DUE TO TUMORAL FORM OF ACTINOMYCOSIS (CASE REPORT)

**Clinical case:** We present the case of a patient aged 65 years with the syndrome of chronic bowel obstruction, and about 20 kg of weight loss during last year. On physical examination: palpable tumoral mass in the left iliac fossa of about 15/20 cm. On colonoscopy sigmoid stenosis at approximately 15 cm from anus is detected. No tissue was taken for biopsy. On surgery was found a large sigmoid tumor and a small abscess between it and the urinary bladder. Segmental sigmoid colectomy is performed. Postoperative evolution was favorable. Surprise on histopathological examination: actinomycosis.

#### RUPTURA POSTTRAUMATICĂ DE ATRIU DREPT CU HEMOPERICARD DUPĂ TRAUMATISM TORACIC ÎNCHIS PRIN ACCIDENT RUTIER, REZOLVATĂ ÎN SERVICIUL DE CHIRURGIE GENERALĂ (CAZ CLINIC)

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**Caz clinic:** Autorii prezintă un caz de ruptură de atriu drept în urma unui traumatism toracic închis fără fracturi costale și fără marca traumatică tegumentară, ca urmare a unui accident rutier. Bolnava în vârstă de 31 de ani este adusă la Spitalul Județean de Urgență Tr-Severin la circa 30 de minute de la producerea accidentului, prezentând stare generală gravă, colaps vascular periferic, stare comatoasă. Investigațiile imagistice (ecografie, CT) evidențiază numai hemopericard. S-a intervenit chirurgical prin toracotomie stângă și sternotomie parțială. S-a găsit ruptura de auricul drept, pentru care s-a practicat ligatura plăgii auriculare. Perioada postoperatorie a fost fără complicații, pacienta a supraviețuit.

#### TRAUMATIC RUPTURE OF THE RIGHT ATRIUM WITH HAEMOPERICARDIUM DUE TO BLUNT CAR CRASH ACCIDENT THORACIC TRAUMA, RESOLVED IN DEPARTMENT OF GENERAL SURGERY (CASE REPORT)

**Clinical case:** The authors present a case of the right atrium rupture following a blunt chest injury as a result of a car crash accident, without rib fractures and traumatic marks of skin. The patient aged 31 years is transported to Emergency County Hospital Tr-Severin approximately 30 minutes after trauma, presenting poor general condition, peripheral vascular collapse, and coma. Imaging studies (ultrasound, CT) reveal haemopericardium only. Left thoracotomy and partial sternotomy was performed. Auricle rupture was found, which required ligation of auricle wound. Postoperative period was uneventful, and the patient survived.