133. GENDER DIFFERENCES IN ISCHEMIC STROKE

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Introduction: Stroke is a major problem worldwide. Nowadays, ischemic stroke is the first cause of long-term disability in the word and the second leading cause of death worldwide. The World Health Organization estimated that 5.7 million people die annually of an ischemic stroke. Sex differences in ischemic stroke are increasingly being recognized. Women have not only a higher risk for making a stroke but also a higher rate of mortality, disability, depression and post-stroke dementia, as compared to men. Differences between woman and man in ischemic stroke are observed across the epidemiologic studies, pathophysiology, treatments and outcomes. Epidemiologic studies reveal a clear age-by-sex interaction in stroke prevalence, incidence and mortality. Women's (45-54years) premenopause prevalence of stroke is smaller in women than in men of the same age but the stroke increased twice among women in the postmenopausal period (75-85 years) compared to men of the same age. These postmenopausal phenomenons, along with life expectancy are reasons for women to have a stroke at an older age onset and suffer more severe strokes. Thus, a primary focus of stroke prevention has been based on steroid hormone-dependent mechanisms. Sex hormones affect different (patho) physiologic functions of the cerebral circulation. In addition, strokes appear to be more adverse in women than in men, based upon older age, longer prehospital delays and eventually differences in treatment.

Purpose and Objective: To emphasize evolutionary peculiarities, risk factors and etiology of cerebral vascular accidents according to gender.

Materials and Methods: This study included 169 patient with ischemic stroke registered during 2013 (January to September) of which 79 (46.7%) men and 90 (53.3%) women.

Results: The differences between men and women showed the incidence in women was lower than in men aged 61-70 years and younger, but had higher incidence in women aged 71 years and older (P<0.05). Common vascular risk factors like obesity (46,83% vs 68%, P<0.001), small vessel disease (8.86% vs 20%, P<0.05) are more frequent in women but heart disease (60.75% vs 56.66%, P>0.05), hypertensive angiopathy (73.4% vs 38%, P<0.001), headaches (20.25% vs 10.2%, P>0.05), history of stoke (34.17% vs 26.6%, P >0.05) are more frequent in men. Atherothrombotic subtype of ischemic stroke was more common in male (32% male vs 11% female, P<0.05), while cardioembolic in women (26.6% male vs 32.2% female, P>0.05). NIHSS score estimates the severity of the stroke and we did not observe any differences between women and men (69% male vs 69.62% female). The Rankin Scale was used to evaluate the outcome of handicap and it was significantly higher in women than in men (22.22±4.38 vs. 6.32 ± 2.73 , P<0.01). Stenosis (50% -70%) at the bifurcation of the common carotid artery occurs frequent in women than in men (2.53±1.76 vs. 13.33±3.58, P<0.01). Frequently the ischemic stroke is higher in women in the carotid area (70% vs 77,3%, P>0.05) but in men in the vertebrobasilar area (22% vs 13.63%, P>0.05.)

Conclusion: We found that ischemic stroke was lower in women than in men aged 61-71 years and higher in female who are older than 70 years. Our study did not find significant gender-specific differences in stroke severity but find that female gender was a significant predictor of disability and handicap.

Keywords: Ischemic stroke, score NIHSS, Rankin scale

134. BIG UTERINE MYOMA AT AN EARLY AGE – CLINICAL CASE Virlan Mariana, Craciun Alina

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Introduction: Uterine myoma is a benign mesenchymal tumor from smooth muscle tissue.

Uterine myoma is one of the most common female tumors. Statistics show that uterine myoma is found in 20% of the female population.

Purpose and objectives: We report an additionally case of uterine myoma.

Materials and Methods: A 20 years old female patient was admitted with an giant abdominal tumor which raised in two months with an uterine provenience. This tumor was confirmed by clinical examination, USG and CT-scan.

Result: During the surgery, was suspected a malignant uterine tumor. This patient support a total hysterectomy surgery, but histological examination and immunohistochemical analysis proved the benign uterine tumor. Three months after initial diagnosis and surgery the patient is asymptomatic and was scheduled for very close follow up.

Conclusion: This case presents an interes with: an early age of the patient, the rapid evolution of tumor process, difficulties in clinical and histological diagnosis, and in the origin and nature of the tumor (benign or malignant).

Keywords: Uterine myoma, early age

135. HEMOGLOBIN AS NOVEL CARDIOVASCULAR RISK FACTORS IN FATTY LIVER Wesam Khalaily

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Introduction: As it affects almost every third individual in the population in the Western world, non-alcoholic fatty liver disease (NAFLD) represents the most common cause of chronic liver disease and the most common cause of liver transplantation. Many metabolic, hemodynamic, hormonal, prothrombotic and pro-inflammatory cardiovascular disease (CVD) risk factors exist. Prior research suggests that hemorheological determinants, including whole blood viscosity, fibrinogen, and hematocrit may be risk factors for ischemic or coronary heart disease. However, the detail relationship between serum hemoglobin concentrations and CVD has not been clearly clarified.

Purpose and objectives: We analyzed the potential mechanisms of the association between increased hemoglobin and CVD risk in NAFLD.

Material and methods: The materials are collected by searching keywords (nonalcoholic fatty liver disease, cardio vascular diseases risk factors and hemoglobin) from medical database, such as: Pubmed, Medline, Embase, Cochrane Register.

Results: The hemoglobin is positively correlated with well-known cardiovascular risk factors such as BMI, blood pressure, fasting glucose, total cholesterol, and smoking status after adjusting for age. The exact mechanisms whereby increased hemoglobin in NAFLD might lead to a higher risk of CVD are unknown, but the main hypothesis is that increased hemoglobin concentrations lead to increased blood viscosity, thereby raising peripheral resistance and reducing blood flow and perfusion to the heart. In turn, a reduction of perfusion has been suggested to accelerate ischemic heart disease. High level of accumulated iron itself can increase cardiovascular risk by oxidative stress and lipid peroxidation. Hemoglobin concentration could affect the cardiovascular system through oxygen supply and blood viscosity. In addition, elevated hematocrit level may activate platelets by releasing adenosine diphosphate. It is essential to investigate this association in the future.

Conclusions: The emphasis was on the potential role of increased hemoglobin as a marker of moresevere liver damage and fibrosis in the spectrum of NAFLD. Abnormal rheological characteristics of blood due to increased hemoglobin might represent an additional mechanism that contributes to the development of CVD; these could lead to the development of novel therapeutic approach in CVD prevention.

Keywords: Nonalcoholic fatty liver disease, cardio vascular diseases risk factors, hemoglobin