

• There were no differences between groups in terms of maternal mortality or serious maternal morbidity;

**Keywords:** Breech presentation; risk factors; caesarian section; natural delivery

## 80. MODS IN CHILDREN AFTER CARDIAC SURGERY WITH EXTRACORPOREAL CIRCULATION

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**Introduction:** Cardiac surgery with extracorporeal circulation (ECC) is associated with systemic inflammatory response (SIRS) that can evolve up to multiple organ dysfunction syndrome (MODS) and death. Children are at increased risk of developing MODS, due to the particularities related to ECC and immature organ systems. The mortality is directly correlated to the number of failed organ systems: 30-40% if one organ system fails, 50-60% if two organ systems fail and 80-100% when three or more organ systems fail.

**Purpose and Objectives:** Determination of incidence and mortality of MODS in children after cardiac surgery and particularity analysis of the organ insufficiencies.

**Materials and Methods:** From 421 children undergoing various cardiac surgeries during the period 2010-2013, treated in the department of cardiac Intensive Care of Republican Clinical Hospital Chisinau, were selected 16 (3.8%) children who developed MODS background of SIRS, with or without subsequent association of sepsis. The diagnosis was confirmed by clinical and explorative complex criteria.

**Results:** Average age of patients was 21.95 months, of which: under 1 year - 8 (50%), from 1 to 3 years - 6 (37.5%), from 3 to 6 years - 2 (12.5%) children, respectively. There was a predominance of girls (10 girls versus 6 boys). Respiratory failure was developed in 15 (93.7%) patients. The average duration of artificial ventilation was 8.87 +/- 6.95 days, statistical significant difference between the duration of artificial ventilation in patients treated and died were not been determined. Malabsorption syndrome, paresis associated with intestinal failure was determined in 12 (75%) patients. The renal system was involved in 14 (87.5%) patients, 7 (43.75%) show signs of acute kidney injury, and 6 (37.5%) develop acute renal failure. Cerebral insufficiency was found to be in 9 (56.25%) patients, systemic intravascular coagulation syndrome in 5 (31.25%) patients. In 5 (31.25%) patients with MODS the sepsis was associated, confirmed by positive blood cultures and procalcitonin >10 ng/ml.

**Conclusions:** Mortality of children with MODS was the 37.5% (6 children) correlated to the number of affected systems, often developed into respiratory failure, gastrointestinal, cerebral and renal. Statistical differences between ECC duration and aorta clamping in deceased patients and MODS treated were not been determined.

**Keywords:** children, MODS, cardiac surgery

## 81. SCREENING FOR RONCOPATHY OF POPULATION FROM CENTRAL REGIONS OF RM

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**Introduction:** The well known fact is that healthy dream is the necessary component of human emotional part. The dream's quality is influenced by the number of reasons, of which the most important is derangement of passing of air flow through the narrowed respiratory airways which leads to the phenomenon called "Roncopathy". The problem of this phenomenon and the association with it of sleep apnea remains an actual problem not only at otorhinolaryngology domain, and has a lot of consequences which influence the everyday life quality, needs the involvement of specialists from

almost all domains as: surgeons, sexologists, etc. A small number of scientific researches are dedicated to this problem, which involves a reduced number of populations and doesn't reflect the entire seriousness of this problem. A number of screenings concerning roncopathy have been already done in EU and USA and special associations were founded. Such organization doesn't exist in the RM, only tendency to highlight the seriousness of this problem threw the screening that was performed in 2008 by Olaru A. and associate professor Gagauz A. That is why we decided to tackle deeper this pathology, which isn't seen as a problem; and to observe how well the members of society know themselves threw screening of population from central regions of RM, performed in period October 2013-February 2014.

**Materials and methods:** during this screening 2010 persons were questioned, between 17-78 years old. We record a questionnaire with 34 questions, and used centimeter band.

**Results:** The number of those who snores is continuously decreasing with age. The highest incidence of roncopathy is between 46-65 years old. The highest incidence of sleep apnea is between 61-65 years old. The oldest man who doesn't snore is 72 years old. From the totally number of those who snore the highest incidence is among drivers. The majority of women snore lying on the back. Usually people snore in 1 or 3 positions, and rarely in 2. All people who snores 68,97% have increased BMI. The majority of women and men snore from 6 to 10 years. 39,8% from affected people are smoking, among them 12,19%. 42,71% from those who snores eat a lot before going to bed, among them women 31,81%. Men more frequently supported cranial trauma (18,44%). 83,8% from all patients with sleep apnea are men. Urban men snore more frequently. The incidence of high blood pressure is 35,92% and is almost the same between male and female.

**Conclusion:** We investigate the roncopathy as a social problem in RM, with more persons and criteria. The most affected are those whose BMI is increased, with otorhinolaryngological pathology and male gender.

**Keywords:** Incidence, roncopathy, sleep apnea

## 82. OSTEOPOROSIS IN MEN

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**Introduction:** Osteoporosis is a disease characterized by low bone mass, deterioration of bone tissue and skeletal fragility consistent with increased risk of fracture. It is a chronic multifactorial disease complex that often develops silently for decades until fractures occur not characteristic. It is shown that there are over 150mln people suffering from this disease. 20% of all osteoporosis cases occur in men.

**Purpose and Objectives:** Clinical-study, indices DXA and FRAX score in men with osteoporosis.

**Materials and Methods:** We performed a study of 40 men > 50 years, hospitalized in Department of Rheumatology and Arthrology of Republican Clinical Hospital.

**Results:** We found that 55 % of men had osteopenia and 45% , osteoporosis. Men using glucocorticoids have a much lower bone density ( T-score -3.1 ) than men not receiving glucocorticoids ( T score -1.7 ) . Observed with age and decrease T score so persons aged 50-60 years had the mean T score of -1.9 compared with men aged 60-70 years in the T-score was -2.4 and much higher compared with age > 70 years at the T-score was significantly lower ( -3.2 ) compared with men with a BMI of 50-69 ani. Men with BMI <20 T-score was -3, 31 compared with -2.1 at BMI > 20. Men with a rational as > 950 mg / day T-score was -1.75 , and the second group (by rational Like 850-950mg/zi ) T-score was -2.05 . The third group of men who have the smallest rational Ca, about 750-850 mg / day , are most prone to pathological fracture because their T-score is -3.15 . Male smokers had T-score lower than non-smokers , so the T-score at smokers was -2.64 and non-smokers was -2.36.

**Conclusions:** Osteoporosis emerged as nosologic unit is very frequently detected in RM even in men of working age. In disease development were presented with high frequency following risk factors: age, smoking, BMI, corticosteroid, intake reduced Ca.