

indices of maternal and fetal mortality and morbidity, relating to births outside health facilities, hierarchy are included in the first five root causes of these pathologies.

Results: In the study, we examined cases of unexpected births in Clinical Municipal Hospital Nr.1, during the period 2011-2013 (in 2011 were 8300 births, of which 22 unexpected births (0,27 %); in 2012 – 8400 births, of wick 35 unexpected births (0,42 %) and in 2013 - 8450 births, 36 unexpected births (0,43 %)) analyzing the causes, major complications, ongoing process and subsequent health of mother and child.

Conclusions: (1) Unplanned births phenomenon remains an actual topic of discussion and research since the incidence of the phenomenon is slowly growing and there are no large studies in this chapter. (2) Poor socio-economic conditions and ineffective health education of the population remain the main causes of this phenomenon. (3) Rates of complications and consequences for mother and child certainly remain frequent (p 0.0001 - 0.03) among unexpectedbirths compared withnormal births occurring in maternity. (4) At the moment there are no clear criteria of approach for the physician arrived unexpected in the room where the unplanned birth occurs. (5) Considering the risk for mother and baby, unplanned birth represents a real danger to maternal and child health, tending to rise steadily maternal and fetal morbidity and mortality rate.

Keywords: Unexpected birth, maternal mortality, fetal mortality

85. ETIOLOGY AND OUTCOME OF PEDIATRIC BURNS

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Introduction: Burn injury in children continues to be a major epidemiologic problem around the globe. Nearly a fourth of all burn injuries occur in children under the age of 16, of whom the majority are under the age of five. Most burn injuries are minor and do not necessitate hospital admission.

Materials and Methods: In a retrospective and prospective study of 156 patients aged 0-18 years with thermal burns, grade I, II, IIIAB and IV hospitalized for burns over two years period (2012-2013) patients characteristics, circumstances of burn injury and prevalence of established predisposing factors were determined, in burn department of the Institute of Mother and Child and the Intensive Care Unit in Chisinau.

Results: High frequency of thermal burns injuries in children in the age group 1-5 years due to the high physical activity with relatively poor motor coordination (66.93%). Boys (59.5%) may have a high prevalence of burn accidents in comparison with girls (40.5%). Because boys more an active and troublemaker than girls. 59%percent of the children's injuries were scalds, with 71 percent of those caused by hot liquids and 29 percent caused by hot food. In 84,74% of burn injuries in children were hospitalized. According to the data 45.5% of the patients their admission are in the first 6 hours after exposure to burn injury and so about 20.51% of the patient arrive after 72 hours. Most of the patients were hospitalized with mild injuries (40.47%) and that due to early hospitalization of the patient.

Conclusions: Research found that the frequency burns in children up to 18 years is on rise in recent years. The predominant etiologic factor structure are scald injury (58.99%) and superficial burns predominate among clinical forms (51.04%).

Keywords: thermal burns, children, surgical outcomes

86. PARTICULARITIES OF SURGICAL TREATMENT IN SENILE CATARACT

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Background: The number of persons with senile cataract is continuously increasing, that's why, actually, surgery techniques have become less invasive, more appealing to patients, lower risk, and efficacious in treatment. Phacoemulsification (Phaco) and extracapsular cataract extraction (EEC) are basic methods in cataract surgery, and are used widely worldwide.

Methods: We reviewed literature and emphasized major modern techniques used in cataract surgery. Also we present our comparative study of phacoemulsification and extracapsular extraction on a representative group of patients. We compare subgroups (treated by Phaco and EEC) using the following comparative criteria: age, residence, place of work, days of hospitalization, visual recovery and outcome after surgery, complications etc. Data were analyzed using modern statistical tools and have passed veracity tests (t-student criteria).

Results: Patients that underwent Phaco tend to have a shorter period of hospitalization, recover more quickly their visual performances, have fewer complications and in the end have a better outcome.

Conclusion: Contemporary management strategies should give to the patients the chance to choose and to be treated by best method. Phacoemulsification appears to be the gold standard in actual management of senile cataract. Thus we should inform patients and primary medicines that early diagnostic and treatment is mandatory for the best outcome.

Keywords: cataract, phacoemulsification, extracapsular extraction

87. THE ROLE OF NITRIC OXIDE IN THE CLINICAL EVOLUTION OF THERMAL BURNS IN CHILDREN

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Introduction: Nitric oxide (NO⁻) plays an important role in sepsis and polytrauma. The study shows that in thermal burns NO⁻ is increased.

Materials and Methods: Burns, Reconstructive Plastic Surgery Department, Institute of Mother and Child, Department of Surgery, orthopedics and pediatric anesthesiology of IP SMPPhU, "Nicholae Testemitanu", the Laboratory of Biochemistry of IP SMPPhU, "Nicholae Testemitanu". In the study were included patients aged 0-5 years, with thermal burns of II, IIIA -B, IV degree. Burn area was more than 10 % TBSA.

Results: In this research, a statistically reliable increase in the concentration of NO⁻ at all stages of clinical evolution in children with thermal burns was demonstrated: in the toxemia phase - by 41 %, after surgery - by 54 % compared with control group. This reflects a vascular hypoactivity, myocardial dysfunction, the need for specific fluid resuscitation, inotropic therapy to improve oxygenation as well as an adequate analgesia and acid-base resuscitation.

Conclusions: These data suggest that during the shock, in children with thermal burns, there is an increased level of NO⁻ caused by gram-positive and gram-negative bacteria, which have been identified in patients in the study. Also, the formation of large amounts of NO⁻ in the smooth muscles of blood vessels causes vascular hypoactivity (vasoplegia) to exogenous and endogenous vasoconstrictor agents. We conclude that our research suggests that NO⁻ is a central mediator of hemodynamic disbalances in burn shock.

Keywords: nitric oxide, thermal burns, children, burn shock

88. CHANGES IN SERUM TRANSFERRIN LEVEL IN THE CLINICAL COURSE OF THERMAL BURNS

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Introduction: Patients with severe burns present major multisystem pathophysiological changes. Pathophysiological imbalances include severe hypovolemia secondary to plasma loss, hypermetabolism and immune dysfunction. It is associated with septic complications, multiple organ failure syndrome, with triggers the systemic inflammatory response and infection. The uncontrolled development of these phenomena can lead to MSOF and, in some cases, to death.