

93. LACRIMAL TRACT DISEASES: DACRYOCYSTITIS TO ADULTS AND CHILDREN**Cristina Slobozean***Academic adviser: Vladimir Boișteanu, M.D., Ph.D., State Medical and Pharmaceutical University "Nicolae Testemițanu", Chișinău, Republic of Moldova*

Introduction: The disease has a slow onset and develops as a result of total obturation of the canal lacrimo nasal inflammatory processes caused the nasal cavity, the ethmoid region of the nose and other injuries. Chronic dacryocystitis is detected predominantly to women (5:1) and meets the young age between 30-45 years, the channel is narrower by about 2 mm. Due to technical and scientific progress would not actually in the literature are several techniques, methods of diagnosing and restoring nasal drainage lacrimo both drug - conservative as well as surgical , each with advantages and disadvantages. Lacrimal tract pathology has a negative impact not referring to the cosmetic, and socioeconomic, for it is a limitation in obtaining jobs as: drivers, soldiers, surgeons, pilots, teachers, etc. Another importance for studying the pathology is that muco-purulent secretion removal of lacrimal bag conjunctival cavity can cause chronic conjunctivitis that leads to ulcer development cornean. According to the literature, purulent dacryocystitis can cause purulent corneal ulcer in patients 40-50 a 100 patients. This ulcers are a danger to vision , representing the most frequent cause of corneal leucomului formation Dacryocystitis early detection and diagnosis , treatment and recovery of patients with lacrimal tract pathology requiring medical and social importance, although according to the literature and clinical practice , diagnosis and treatment of lacrimal disorders are largely successful, but it requires permanent to ophthalmologists great attention because complications arise which can not be resolved until the end.

Materials and methodes: In this study was analysed relevant articles on the topic, using PubMed, Hinari data base and other internet and literary sources. The study was conducted on a group of 24 patients adults and 10 patients children with dacryocystitis complication of Ophthalmologists clinic for the period of 1 year (2012-2013). Data were processed using computer programs Microsoft Word, Excel, Stats Direct Statistical Software Version 1,9,5.

Results: Patient age was between 30-75 years and 4-7 months for children and average of 50(±1,98). 8%(2) of them were males and 92% (22) were women and 30%(3) of them were males and 70%(7) of them were girls for statistic of the children. Symptoms of complications was hiperlacrimation (100%).

Conclusions: (1) Drug method is a noninvasive method and probing combined with nasal lacrimo gated channel is advantageous simplicity and efficiency which enables disappearance muco-purulent secretion and restoring patency naso - lacrimal. (2) Method modified by us ophthalmologic USMF, "Nicolae Testemitanu " has an advantage that can be considered as an alternative process, because it can be used in outpatient. Recidivism data treatment method dacriocistitelor chronic, resulting from age and disease diagnosis and treatment prior wrong. (3) The method used by us is physiological, providing anatomical route, providing training horses aesthetic that leaves no visible scar on the skin. (4) The advantage of the method consists of applying drug in patients with different pathologies that have a contraindicatiee General Surgery dacryocystitis.

94. CORALIFORM STONES. ASPECTS OF ETIOLOGY, CLINICAL AND TREATMENT. (REWLITERARY)**Sirghi Grigore***Academic adviser: Ceban Emil, M.D., Ph.D., State of Medical and Pharmaceutical University "Nicolae Testemițanu", Chisinau, Republic of Moldova*

Introduction: Urolithiasis occupies a prominent place in the structure of urological diseases, due to its relatively high incidence, frequent relapses and adverse consequences for the kidneys that it can cause. Patients with urolithiasis is 25 to 41.5% of all hospitalized patients to specialized departments of urology. Coraliform stones are defined by the presence of renal concretions which occupies the entire basin and at least two calyces. It is a private entity, well defined by etiology, forms of presentation, clinical course, treatment methods and therapeutic outcomes.