

118. PRIMARY GASTRIC NON-HODGKIN LYMPHOMA: CLINICAL ASPECTS, DIAGNOSIS, TREATMENT

Guzun Tatiana

Scientific coordinator: **Robu Maria**, M.D., Associate Professor, State University of Medicine and Pharmacy "Nicolae Testimîțanu", Chisinau, Moldova

Introduction: NHL (non-Hodgkin lymphomas) are malignant tumors that develop from hematopoietic cells located extramedullary, heterogeneous in terms of morphology and biology. They are the most common malignancies of the hematopoietic system. Of all primary tumors recorded annually, NHL are diagnosed in 5% of males and in 4% of females. Impairment in primary gastric NHL meets quite often. Extranodal location of NHL is recorded in 42% of cases. One of the most eliminates frequent extranodal localization is the gastrointestinal tract (13.3%). Different effect on different compartments eliminates frequent gastrointestinal tract: the stomach eliminates frequent being affected - in 70-75% of cases.

Purpose and Objectives: to study the clinical aspects and treatment results in impaired primary gastric NHL.

Materials and methods: The outpatients records were studied in 84 patients diagnosed with non-Hodgkin lymphoma (NHL) with primary involvement of the stomach, which is registered by the haematologists at the Institute of Oncology in the period 2000 - 2013. Of 84 patients diagnosed with primary gastric NHL, females with 48 and males – 36, with a median age of 57 years.

Results: NHL with primary involvement of the stomach developed frequently in people aged between 51-70 years (50%) and were rarely diagnosed at the age 19-30 years (3.6%). The common location of gastric NHL, was the stomach body (42.8%). In the primary NHL damage of the stomach have been mainly developed aggressive variants (85.7%). Regardless, morphological structure, gastric NHL initially spread in to the lymph abdominal nodes. Extranodal metastases occurred mainly in the liver, spleen, different regions of the tract gastrointestinal. The efficacy of the treatment in gastric NHL depended on the stage of tumor. Gastric resection is an important component in the combined treatment of primary gastric NHL damage.

Conclusions: In primary gastric NHL damage regardless, morphological variant, age and disease stage optimal method of management is combined treatment: Surgical + Radiotherapy + Combined chemotherapy.

Keywords: non-Hodgkin lymphoma, combination therapy

119. ULCERATIVE COLITIS - CLINICAL AND PARACLINICAL FEATURES

Florea Marina

Academic adviser: **Berliba Elina**, MD, Associate professor, Department of Gastroenterology, State Medical and Pharmaceutical University "Nicolae Testimîțanu", Republic of Moldova

Introduction: Ulcerative colitis (UC) represents a major problem in modern gastroenterology, mostly due to the incomplete knowledge on its etiology and pathogenesis and a lack of a "Gold Standard" regarding diagnosis and treatment.

Purpose and objectives: To study the signs and symptoms and the main complications, to appreciate the social impact of the disease, to evaluate the level of accuracy of the paraclinical tests in determining the UC phenotype (extension, activity).

Materials and methods: This is a retrospective study, which focused on the clinical aspects of UC in 105 patients hospitalized between 2011 and 2013 in the Gastroenterology Department of the Republican Clinical Hospital. The precision of the inflammatory markers (erythrocyte sedimentation rate - ESR, C reactive protein - CRP) in appreciating the UC activity was studied on a cohort of 44 cases. The level of UC extension was determined in 49 cases, comparing two methods - colonoscopy and irrigography.

Results: UC affects primarily people of childbearing age and labor force (76.2% - less than 40 y.o.), has a long course (average duration - $4,6 \pm 3,9$ years) and a high level of impairment