reducing the costs of the service, rising awareness of medical issues in society and showing their own example in active civic involvement. As palliative care is in development in Moldova, future doctors should receive relevant education in this branch in order to bring their own contribution.

Purpose ind objectives: The aim of the study is to evaluate medical students' availability, ethical views, barriers and facilities for participating in palliative care programs as volunteers.

Materials and methods: A 6 pieces questionnaire including single/multiple choice and free answer options was designed for the study. The survey was composed from items referring to barriers and facilitation of volunteering, self evaluation of knowledge in terminal illness management, ethical dilemmas and moment of palliative intervention during clinical management. The survey was completed by 42 undergraduate students.

Results: Despite the fact that most medical students self estimate their knowledge and level of information in palliative care as low (45%) or medium (52%) the majority of them (83%) said that would be available and interested to participate in this field as volunteers, main motivations and facilities for the activity constituting: support from an experienced team, educational courses on palliative care and communication. At the same time barriers for volunteer work are lack of time, emotional/spiritual aspects and uncertainties regarding professional capacity. Pain control or psychological interaction between medical personnel and patient are the few ethical issues identified by students as less then 15% gave an answer to open question about moral and deontological dilemmas that could arise within palliation.

Conclusion: Palliative care is an relatively new and optional study subject at the State University of Medicine and Pharmacy from Moldova that is why it is reasonable to regard volunteering activity in this field as a type of medical education gainful for all participants including students, caregivers, patients and state institutions. Thereby it would be opportune to offer methodological and practical support for students towards ethical normative and moral issues within palliative practice.

Keywords: palliative care, volunteering, medical ethics

12. ETHICAL ISSUES IN ELDERLY PATIENT-PHYSICIAN RELATIONSHIP Naghiţa Varvara

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Introduction: Old age is a very difficult age in which people who once were full of life, get to a moment when they can no longer take care of themselves, and their diseases take power over them. Overpowered by pain and scared of death, which seems to be even nearer, the elderly address more and more often to doctors, hoping to find the right solution for the problems that overwhelm them.

Purpose and objectives: The purpose of this project is to disclose the ethical aspects of medical work in dealing with the contingent of elderly patients, to find and motivate the necessity of nursing in their treatment andthe effect of communication between the doctor and the elderly patient.

Materials ad methods: The survey is based on scientific publications, testimonies of 20 elderly persons who are registered at the Social Welfare Chişinău and some clinical cases provided by practicing physicians.

Results: UN sources indicate that today the number of people aged over 60 years in the world has reached 500 million. In 2025 the number of elderly population will reach over one billion, which is about 15 % of the world population. There is also the term "aging of the elderly", which can be explained by increased share of the population aged over 75. Since this demographic problem is growing, physicians are forced to face a greater number of elderly patients with different problems. The aging involves physiological changes of the human body with function decreases. This is why the doctor's main task is to distinguish normal age changes in patient's complaints from symptoms of a disease. And it can only be achieved during a close conversation with the patient, from which the doctor has to extract the maximum possible information in order to provide an

efficient treatment. Because of the same age changes of the patients, like attention weakening and diminishing coherence, the medical act becomes quite difficult. Unfortunately, we live in a busy world and our time is limited, and many old people complain that doctors do not listen, they only give them some vitamins without performing a complete medical examinationor, even worse, they send them home unsatisfied. Such an attitude not only damages the doctor's status in the patients' eyes, but also offends the latter, making them feel unimportant and pointing their loneliness. Thus, because of the lack of time, the doctor let the pathology manifest itself, which is contrary to the essential mission of the doctor to save the life of others. Also, the long queues at the doctor's door lead to deprivation of the necessary curative act for the patient. It is therefore essential to organize a network of training specialists in medical ethics. However, besides treating, the role of medicine also consists in easing and improving the lives of the sick, not only with drugs but also by moral leverage.

Conclusion: Activation of geriatrics at its maximum potential will be possible only when the gaps and the ethical problems which both patients and doctors meet in their way, will be removed and solved. This, however, will be possible only when doctors will have ethical knowledge and will apply it in dealing with their patients.

Keywords: geriatrics, ethics, old age, problems

13. COMMUNICATION IN PARTNERSHIP WITH THE PATIENT: ETHICAL ISSUES Niculita Sergiu

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Introduction: Communication is a set of actions in the transission of information between two persons. The term "communication" is tied to our existence as people, then as a society, because human beings are interdependent and communicative. Without communication and language we, as being that interact and relate in most, or even all through the act of communication, our existence on Earth would be pointless. Communication in relationships also presents a factor that highlights social issues and seeks to answer them through collaboration and exchange of information between individuals. With the advent of communication as a basis for building human relationships has a major influence on communication and the medical practice (doctor – patient), thus having a great impact on the health issues of the patient (correct diagnosis, collaboration between doctor and patient indication of deviations negatively health, etc.).

Purpose and Objectives: Solving problems in cummunication between doctor and patient for better treatment of the disease relying on our ethical aspects.

Materials and Methods: International published materials where are highlighted the issues of communication, using sociological methods to determine a prejudicial relationship between doctor and patient.

Results: Communication takes many froms and is found in various situations, the most important of them being that between doctro and patient, which povides much of the data needed to establish the diagnosis. Also, the communication becomes even the single treatment modality in cases of chronic diseases through advice, support, finding information is required lifestyle disease. Improving relationships between physician and patient involves understanding the complexity and subtlety of interpersonal behavior. Patients' satisfaction with medical care received – patients tend to emphasize the personal qualities of the physician, to the detriment of technical skills, professional. Good communication between doctor – patient will largely decrease the risk of mutual misunderstanding and decrease the risk of a conflict after a medical error. For the effectiveness of good communication is necessary to fulfill some requirements or guidelines: recommendations and guidelines are initially given by the doctor; to use short clear sentences (both doctor and patient as); information issued shuold contain a logical message; patient data and written information, in order to guide when appropriate.

Conclusion: The life and quality of patient should be under medical utmost importance for those involved in the treatment of disease. Communication is the basic pillar that creates the degree