NOSPECS (only signs and soft tissue involvement) were the most common, being found in 81.3% (13 cases) and 62.5% (10 cases) of patients respectively.

Conclusions: The amount of minimal and moderate severity of the Graves' orbitopathy is imposing (81.2%) in study group. These results indicate that in the majority of GO cases is early detected. The frequency of the CAS manifestations, as well as the predominance of the NOSPECS classes, matches the results found in clinical randomised studies and literature.

Keywords: Graves' orbitopathy, NOSPECS, CAS, hyperthyroidism

# 10. THE LEVEL OF SEXUAL HORMONES IN WOMEN OF REPRODUCTIVE AGE WITH CIRROTIC PORTAL HIPERTENSION

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**Background:** Chronic liver diseases are commonly associated, in dependence of severity and duration of disease, with menstrual cycle disorders such as amenorrhea and anovulation. In most of cases the possibility of pregnancy is poor but sometimes these women become pregnant.

**The aim:** To estimate the concentration of sexual hormones in women of reproductive age with cirrhotic portal hypertension, in dependence of functional liver reserve Child Pugh.

Materials and methods: We selected 60 women of reproductive age with cirrhotic portal hypertension, caused by chronic virus hepatitis. The functional liver reserve was determined, according to the Child A/B/C -36/10/4. We tested the plasmatic levels of estrogen, progesterone, LH and FSH.

**Results:** In the first group in 36 cases (60%), where the functional reserve of liver Child Pugh A, was good, the medium level of E2 in all the phases of menstrual cycle was at upper admissible range (130,7 $\pm$ 30,5pg/ml). In the second and the third group with poor functional reserve Child B,C in 24 cases (40%) the level of estrogen have been increased in all the phases of menstrual cycle (366,6 $\pm$ 46,3pg/ml). This fact can be explicated by functional insufficiency of the liver and perturbances of protein synthesis in liver, which cause severe pathogenetic infringements in estrogenic metabolism. The plasmatic medium concentration of progesterone in the first group was 34,5 $\pm$ 3,6 nmol/l and in group with poor liver reserve it was a breakdown of progesterone contents till 16,7 $\pm$ 3,4nmol/l (p<0,05). There were no significant statistic difference between the levels of LH and FSH in presented groups (p>0,05).

Conclusions: The increased value levels of estrogen and poor concentration of progesterone in women with cirrhotic portal hypertension, explain the absence of menstruation and anovulatory cycles in patients with poor liver reserve, which are the main factors of infertility in these patients.

**Keywords:** Infertility, sexual hormones, portal hypertension

## 11. THE SPECTRUM OF SENSITIZATION IN SCHOOL-AGE CHILDREN WITH RESPIRATORY ALLERGOPATOLOGY

### Myslytska Ganna, Onufreiiv Olena, Sazhyn Sergii

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**Introduction:** Allergic sensitization seems to be an important risk factor for subsequent onset of persistent respiratory allergic pathology during childhood and adulthood. Allergic disorders are referred to the most common with trend of increase of sensitization to allergens in the last decade.

Purpose and Objectives: The aim of the study was to evaluate components of atopic sensitization to the most common allergens in children with perennial allergic rhinitis (AR) with/without concomitant bronchial asthma (BA).

Materials and methods: On the base of the Children Clinical Hospital (Chernivtsi, Ukraine)

35 school-age children of 6-18 years old with perennial AR, 18 of whom were sick with concomitant BA, were examined.

Hypersensitivity to 18 mite, epidermal, fungal allergens and insect cockroach allergen which mostly determine the perennial allergic clinical manifestations, and pollen (grass, trees) allergens significant for seasonal allergic manifestations, was studied according to the skin prick tests (SPT).

**Results:** In 35% of patients the presence of sensitization to only one group of allergens was revealed, particularly in the 5% - to epidermal allergens of cat and dog and in 30% - to house dust mites. In the other children the sensitization to at least one of house dust mites and one other group of studied allergens was found. Polysensitization was found: in 35% of children to at least one more group of allergens, in 15% - up to two and in 5% - to all the studied four groups of allergens.

In the groups of children with concomitant asthma and AR and exclusive AR no any differences in sensitization to fungi allergens according to prick tests were revealed.

**Conclusion:** In more than half of children with respiratory allergies not only hypersensitivity mite allergens (D.pteronyssinus and D.farinae), but also a significant sensitization to at least one more group of aeroallergens was revealed.

Keywords: Children, allergic test, sensitization.

# 12. CASE REPORT: COMPUTER TOMOGRAPHY PRESENTATION OF WEGENER'S GRANULOMATOSIS IN A 10-YEAR-OLD BOY WITH RENAL SYNDROME.

Popușoi Diana

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**Background:** The term pulmonary-renal syndrome consists of a group of complex and often severe disorders, although rare in incidence, and includes Wegener's Granulomatosis (WG) which is a predominantly small-vessel vasculitis associated with antineutrophil cytoplasmic antibodies (ANCAs). There are few reports describing its clinical features and outcome in children. We report computed tomography (CT) findings in a 10-year-old boy referred to our Pediatric Department.

Materials and Methods: A 10-year-old boy presented in April 2013 with rhinitis, fever and dry cough. He was prescribed antibiotics with moderate improvement of the general condition. His examination results were unremarkable except low hemoglobin level (9.9 g/dL) and markedly increased erythrocyte sedimentation rate (44 mm/h). A month later he had been admitted to Nephrology Unit with complaints of proteinuria, hematuria and anemia. In June he developed also arthritis. In October 2013 the child was admitted to the Pediatric Intensive Care Unit in a severe condition. Antineutrophil cytoplasmic antibodies (ANCA) were positive with antigen specificity for myeloperoxidase (anti-MPO 37 KU/L). The other laboratory results included: mild anemia and leukocytosis; proteinuria (69 mg/kg/day); increased blood urea nitrogen (BUN) and creatinine (10.4 mmol/L and 123 mmol/L, respectively). Thoracic CT revealed a solitary nodule 1.5x1 cm in the posterio-basal segment of the inferior lobe in the left lung. Renal biopsy with fine needle revealed pauci-immune crescentic glomerulonephritis. He was diagnosed as WG from the clinical, radiologic, laboratory and morphologic findings and was given treatment with methylprednisolone and cyclophosphamide.

Results and discussion: The CT findings of pulmonary WG include multiple nodules or masses with or without cavitation, and are particularly helpful to identify cavities within nodules. The ANCA-associated pulmonary-renal syndrome, ANCA positive with antigen specificity for myeloperoxidase (anti-MPO), is almost always caused by microscopic polyangiitis and this association can be manifested as rapidly progressive renal failure, as happened with our patient.

Conclusions: Our aim in presenting this case is to alert clinicians that, even without the definitive histological diagnosis, it is possible, based on clinical history and physical examination, and whenever possible serological tests (ANCA and anti-GBM), to start immunosuppressive therapy, that can avoid the irreversible loss of renal function and interrupt the fatal course of lung complications.

Keywords: Pulmonary-renal syndrome, ANCA, vasculitis