

53. CASE REPORT: A 55 OLD WOMAN WITH PSEUDOTUMOR CEREBRI, URTICARIAL VASCULITIS AND SUSPECTED SJOGREN SYNDROME

Sadovici Victoria, Cebanu Mariana, Salaru Virginia

Academic adviser: Mazur Minodora M. D., Ph. D., Internal Medicine Department, State Medical and Pharmaceutical University "Nicolae Testemitanu", Chisinau, Republic of Moldova

Case report: We report a case of a 55 old woman presenting complaints of severe and permanent headache with progressive decrease of visual acuity (VA) for 6 months, xerophthalmia, xerostomia and urticarial eruption. The medical history of the patient is marked by autoimmune thyroiditis and active tobacco smoking (10 cigarettes / day during 20 years). The physical examination was remarkable by a normal body mass index and skin lesions specific for urticarial vasculitis. The remainder of examination was normal. The CBC, biochemical, auto-antibodies and radiological examinations were normal too. The evaluations included the assessment of the cephalalgia: complete neurologic examination, fundus examination, MRI of the brain and a lumbar puncture. The results have revealed a papilledema, a decrease of VA and an elevation of the opening pressure at the lumbar puncture. The diagnosis conclusion was the presence of pseudotumor cerebri, which is a disorder clinically manifested by chronically elevated intracranial pressure of unknown etiology associated with visual abnormalities. The skin biopsy revealed small vessels wall deposits of IgG and C3, and a polynuclear perivascular infiltrate. The last question was the etiology of the Sicca syndrome, who is supposed to be a Sjogren syndrome. The Shirmer test and the salivary gland scintigraphy confirmed our suspicion. We proceeded to salivary gland biopsy, whose result is on pending.

Conclusion: We report a case of a smoking woman who presents a pseudotumor cerebri, urticarial vasculitis where was suspected Sjogren syndrome, defined as a systemic chronic inflammatory disorder characterized by lymphocytic infiltrates in exocrine glands. If the principle of parsimony is used, the three entities can be linked: to our known, in the medical literature where are few case reports concerning the association of Sjogren syndrome and pseudotumor cerebri as a very rare neurological complication. In its turn, the urticarial vasculitis is a known manifestation of Sjogren syndrome.

Keywords: Sjogren Syndrome, Urticarial Vasculitis

54. HEALTH-RELATED QUALITY OF LIFE AND ECONOMIC BURDEN OF KNEE OSTEOARTHRITIS

Salaru Virginia, Pasalu Maria, Cebanu Mariana

Academic adviser: Mazur Minodora, M.D., Ph.D., Professor, State Medical and Pharmaceutical University "Nicolae Testemitanu", Chisinau, Republic of Moldova

Introduction: Patients with knee osteoarthritis have the symptoms that often are debilitating and causing physical impairment, can affect the psychosocial wellbeing of the patient. The impact of knee OA on patient's lives has not been well studied in developing countries.

Purpose and objectives: Of this study was to assess the health-related quality of life (QoL) and burden in patients with OA in Republic of Moldova.

Materials and methods: This study is a retrospective, cross-sectional, nonrandomized, with subjects stratified according to disease severity based on functional limitation and absence of joint prosthesis. Subjects were recruited from primary care and rheumatology. There were 256 patients whom fulfill the American College of Rheumatology classification criteria for OA in the knee. A questionnaire embrace information on demographic and socioeconomic characteristics, function limitation, use of health and social services, and effect on occupation and living arrangements over the previous 12 months. The costs were calculated as direct and indirect. The QoL was assessed by KOOS – Knee injury and Osteoarthritis Outcome Score. This study was conducted according to the principles of the Declaration of Helsinki (1996) and good clinical practice.

Results: There were 256 patients integrated in the study including 196 females and 60 males, mean age 64.9 ± 0.6 years (range 37 to 82 years). Disease duration 8.1 ± 0.02 years (range 1-