

ipsilateral lower extremity extended till the common femoral and external iliac vein, respectively. Both patients developed preoperative recurrence of haemorrhage: one after the primary physical examination (required temporary hemostasis by compression bandage and short-term resuscitation in conditions of ICU) and other – on the operating table, immediately before surgical exposure. In both cases operation was carried out under local anesthesia, limited excision of skin mark being performed. After clear localization of the external orifice of sinus tract it was closed by applying continuous suture using synthetic non-absorbable thread (polypropylene 5/0).

Results: No major complications were registered in early postoperative period. Primary healing of postoperative wound was observed in one patient, but small wound dehiscence occurred in other, followed by subsequent healing by secondary intention. Recurrent episodes of haemorrhage from inguinal scars at 6 months and 8 months after surgery, respectively, were not declared.

Conclusions: Sinus track formation in inguinal area of “groin injecting” drug users carries a risk of threatening external haemorrhage with recurring character. Continuous suturing of external orifice of groin sinus with synthetic non-absorbable thread can serve as surgical option to achieve sustainable hemostasis in cases of external bleeding. Drug use and addiction possess **negative** consequences for **individuals** and public health, and surgical complications among intravenous injecting are throughout emerging. In this context the urging of medical students must be more active promotion of healthy.

Key words: groin injecting, hemostasis, inguinal sinus formation.

THORACO-LUMBAR SPINAL CORD INJURY, CLINICAL AND IMAGING ASPECTS, SURGICAL TREATMENT

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Introduction: Spinal cord injuries present a major problem worldwide by their increasing incidence, vital outcomes, by the disability and mortality that they produce, by the diagnostic difficulties and complexity of surgical procedures.

In our country the incidence of spinal cord injury is 2 to 17.7% according to some local authors, the average age of damage being 39.4 years, mainly affecting males in the ratio of 4:1. In the framework of polytraumas, in the Republic of Moldova spinal cord injury occurs in 13-30% cases. Medullar impairment is 30%, with a disability of 95-98%. Lethality after spinal cord injuries is 34.4%.

Methods: It is presented the analysis of clinical and anamnesis data, laboratory investigations and surgical treatment of 40 patients with lumbar spinal cord injury and thoraco-lumbar injury from the Republican Traumatology and Orthopedics Center.

Purpose: To analyze the cases of thoraco-lumbar spinal cord injury studying the circumstances in which the trauma occurred, the lesion's location, the persistent clinical signs, diagnostic and surgical method used, in base of observational records of the Department of vertebrology of the Republican Traumatology and Orthopedics Center.

Objectives: To elucidate the injury mechanisms of thoraco-lumbar spinal cord injury in examined patients; To assess the level of spinal lesion most often involved in toraco-lumbar spinal cord injury; To assess the degree of spinal cord damage and persistent neurological disorders following thoraco-lumbar spinal cord injury; Clinical results evaluation of surgical treatment used in thoraco-lumbar spinal cord injury.

Results: The results obtained were: men were involved in 60% cases (n = 24) against women - 40% (n = 16), average age being 36.25 (\pm 2.35) years, with prevalence from rural areas.

Thoraco-lumbar spinal cord injury etiology was varied: fall from a height 50%, traffic accidents 22.5%, falls from one's own height 10%, hit with objects in the lumbar region 10% and other causes 7.5%.

The most affected anatomical level was thoraco-lumbar junction because of its anatomical features, Th12-L2 vertebrae being affected in 70% (n = 28). L3-L5 vertebrae injuries have been less frequent - 27.5% (n = 11).

Neurological damage in the study occurred in 37.5% cases of thoraco-lumbar SCI with the following consequences: monoparesis in 7.5% cases, 10% paraparesis, sphincter disturbances 10% and 5% radiculopathies.

Surgical treatment was applied with the purpose of neural decompression, stabilization and fusion. By posterior access were made 87.5% (n = 35) of surgeries, by anterior access 7.5% (n = 3) and combined approach - 5% (n = 2).

Conclusion: Thoraco-lumbar spinal cord injury is a serious affection of the spine, affecting working population at young age with predominant involvement of men from rural areas. Most frequent causes of spinal injury in thoraco-lumbar region are: catatraumas, road accidents, falls from own height these being responsible of the large number of spinal cord damage. The thoraco-lumbar junction was often subjected of lesion (70% cases). Predominant route of approach for the surgical treatment of SCI of thoraco-lumbar region was the posterior one.

Keywords: Spinal cord injury, thoraco-lumbar.

STUDY ON DISTRIBUTION AND INVOLVEMENT IN PATHOLOGY OF ESBL BACTERIAL STRAINS IN A UNIVERSITY HOSPITAL IN ROMANIA

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Background: The selection and spreading of multidrug-resistant bacterial strains to antibiotics represents a current problem for the medical world due to irrational use of antimicrobial substances. An important resistance mechanism at β -lactamic antibiotics was developed by ESBL-bacterial strains (extended spectrum β -lactamases bacterial strains), usually involved in nosocomial infections.

Patients and methods: The purpose of the clinical trial consisted in assessing the extended spectrum β -lactamases bacterial strains within Enterobacteria isolated from various samples taken from patients who were hospitalized in the Emergency County Hospital in Brasov and also the distribution on the hospital wards.

Results: The most often encountered germs were from the Enterobacteriaceae family (58.42%). The main species found was *Escherichia coli* (70.52%), followed by *Enterobacter* spp. (10.87%), *Klebsiella* spp. (10.11%), *Proteus* spp. (7.54%), *Serratia* spp. (0.65%), *Citrobacter* spp. (0.24%) and *Morganella* spp. (0.07%). The biggest frequency of positive ESBL-bacterial strains was obtained in the case of *E. coli* (52.45%), followed by *Klebsiella* spp. (23.77%), *Enterobacter* spp. (19.12%) and *Proteus* spp. (4.66%).

Conclusions: This study reveals monitoring necessity of multidrug-resistance to antibiotics in hospitals where this phenomenon is increasing and frightening.