

TREATMENT OPTIONS IN ERYSIPELAS

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Introduction: Erysipelas remains a pathology training frequency, which requires continuous treatment method.

Purpose and objectives: the appreciation of modern tactics of treatment in erysipelas forms.

Material and method: this is a lot of 241 cases of erysipelas, treated in the clinic in the years 2002-2011. Women / men: 2:1.

Results: The distribution according to clinical appearances was: erythematous erysipelas- 129, erythematobullous erysipelas- 62, bullous erysipelas- 31, gangrenous erysipelas- 19. The elective location of the pathology was feet- 213 cases, in more cases in patients trophic disturbances. The erysipelas of the arms was in 17 cases, the erysipelas of the scrotum in 2 cases, the erysipelas of the mamma in 7 cases and of the head and face in 2 cases. Pathology has been commonplace in employable age 30-60 years. Concurrent disorders: diabetes mellitus-20 cases, venous pathology 33 cases, atherosclerosis gr. II – III –5 cases, cardiovascular pathology- 53cases, obesity gr. II-III –15cases, malign tumor pathology – 10 cases, mastitis – 1 case. Bacteriological test revealed the presence of *Streptococcus aureus*, who in 37 cases has been associated with *St. Aureus*, 7 cases – *Klebsiella*, 4 cases with *E. Coli*. Besides of traditional method of administration of antibiotics of penicillin and cephalosporin groups i/m or i/v in treatment of the erysipelas, we gave the antibiotics our patients local lymphotropic and into the lymph nodes in the affected place. The effect of this method is the direct action of the drug after the active forms of streptococcus, that is reproduction in the lymphatic. We revealed that after these methods of treatment the patients were discharged with 2-6 days dependent upon developmental form. Bullous-necrotic forms (54 cases) require openings and drainage, necrectomy in some cases. Local treatment: in 24 cases of necrotic masses faster has been used preparation from seaweed – Algipor. In 6 cases of massive tissue defect, we performed skin plastic treatment in the second stage. Prophylactic treatment included the administration of Thienam during the next year with a frequency one dose in three months.

Conclusions:

1. Erysipelas is a frequently pathology in patients with employable and in several accompanying disorder appearance in severe morphological forms.

2. Administering a treatment complex, which includes the preexisting pathology cure and erysipelas by using of method of local lymphotropic and into the lymph nodes administration of antibiotics in association with the use of Algipor in local treatment of erysipelas does the conditions for decreasing of the number of relapsing forms of erysipelas and the term of hospitalization and prevent appearance of relapses.

THE INTRACEPTIVE DISORDERS AT PATIENTS DIAGNOSED WITH DEPRESSION

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Introduction: neurological scientific research of depression.

Purpose and objectives: to determine the intraceptive disorders in patients diagnosed with depression.

Materials and methods: Beck questionnaire that highlights the affective state of the subject at the time of interrogation. The Spielberger test to assess the general and momentary state. VMP-2 (Vegetative Motor Profile) – to stand out the motor and vegetative disorders caused by depression.

Subjects: the tests were used on 2 groups, the study group (20 patients diagnosed with depression) and the control group (392 students from the State Medical and Pharmaceutical University “Nicolae Testemitanu”).

Results: the prevalence of depression after Beck and Spielberger equalizes to 100 %. The control group measures 49,5% of subjects with depression (using the Beck scale) and 58 % of subjects with a high level of anxiety (using the Spielberger test). From the medical point of view, there is an influence of depression on the quality of life, but without a linear correlation.

Conclusion: according to the performed study, a high prevalence, in patients with depression, has the next disorders: headaches, insomnia, vertigo, syncope, weight loss, anxiety, fatigue, gastrointestinal disorders.

Keywords: Depression, Beck, Spielberger, PVM-2, disorder.

DYSLIPIDEMIA AND HYPERGLYCEMIA IN HYPERTENSIVE PATIENTS WITH METABOLIC SYNDROME

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Introduction: Metabolic syndrome (MS) is a combination of interrelated risk factors, which include: dyslipidemia (DLP), hyperglycemia, high blood pressure, and abdominal obesity. This coexistence of metabolic disorders promotes atherosclerotic cardiovascular disease, being also a causative factor for type 2 diabetes mellitus (DM). Hypertension is one of the most common manifestations of MS, which has a high prevalence worldwide (25-35% in adults and 60-70% in people over 70 years) due to the global epidemic of DM and obesity. Another association of hypertension and MS is DLP, induced by the action of insulin on lipid metabolism, which increases very low density lipoprotein synthesis in the liver.

Methods: It was a retrospective study of patients from the Institute of Cardiology, the key criterion being grade I-II hypertension. Diagnosis of MS was established according to criteria proposed by NCEP/ATP III in 2005. MS was considered in patients having at least 3 of 5 criteria. DM was established according to American Diabetes Association definition in 2003.

Results: There were 168 hypertensive patients included of which we selected 114 patients with grade I-II hypertension divided subsequently into four groups: with MS and DM (n=32); with MS, but no DM (n=29); no MS and no DM (n=37); no MS, but with DM (n=16). Following evaluation in these groups included determination of lipid and glucose metabolism features.

Patients with MS only had significantly higher TG levels than patients with DM only (2.23 ± 0.04 vs. 1.30 ± 0.06 mmol/l, respectively). Similarly, values of TC and LDL-C were highest in patients with MS only (5.80 ± 0.04 and 4.71 ± 0.03 mmol/l, respectively). Serum levels of HDL-C had shown inverse correlations compared with TG. Calculating the atherogenic coefficient revealed that TC/HDL-C ratio is significantly higher in MS groups compared to non-MS groups, independently of the presence of DM.

Evaluation of glucose metabolism in the study group revealed that 45 (39.5%) patients were diagnosed with type 2 diabetes and 69 (60.51%) patients were nondiabetic, of which 38 (33.3%) patients with