

## SURGICAL TREATMENT OF INGUINAL HERNIA

**Strisca Gh., Ragulin A.**

*Academic adviser:* Isac I., M.D., Ph.D., Associate Professor, State Medical and Pharmaceutical University "Nicolae Testemițanu", Chisinau, Republic of Moldova

**Introduction:** Incidence of inguinal hernia rises day by day. Causes of this problem are multiple, and exceed the limits of this work.

**Aim:** Study of surgical treatment of inguinal hernia in admitted patients of surgical clinic and municipal clinical hospital Nr.1 and to determine the most commonly used method.

**Methods and materials:** In achieving of marked aim, we have made a retrospective study in 120 patients group treated in surgical ward of Municipal Clinic Hospital Nr 1 during the 2010 year. All patients had free hernia and were admitted by schedule. In this group were enrolled 88 men and 32 women, with average age 58 years.

Patients with hernia on right side were 55(47%), left side hernia 62(51%) and bilateral hernias 3(2%). Under local anesthesia were treated 92 patients, spinal anesthesia 19 patients and general intravenous anesthesia 9 patients.

Preoperative period in 113 cases was one day, 7 patients were admitted in the day of surgery.

**Results:** On the study group was used the following methods of inguinal channel plasty:

By Spasocutchi method were treated 16 patients; By Kimbarovski method were treated 7 patients; By Bassini method were treated 12 patients; By Postemski method were treated 6 patients; By synthetic mesh method were treated 79 patients.

Synthetic mesh plasty were performed by no-tension method, according to Lichtenstein technique. Synthetic mesh was applied retro funicular with an incision in upper angle and formation of an opening for spermatic cord.

In postoperative period 25% in patients with synthetic mesh plasty had discomfort and foreign body sensation, 2% needed analgesics due to persistent pain. Moderate pain in the day of discharge presented 10% of patients. In patients without a mesh 15% of cases experienced testicular edema on the surgery side, which resolved by itself in 4-5<sup>th</sup> day. Usually patients who had surgery with synthetic mesh were discharged 2-3 days before others who had surgery by traditional methods.

**Conclusions:**

1. Traditional methods of hernioplasty had complicated and long lasting postoperative healing.
2. Surgical treatment of inguinal hernia with synthetic mesh represents a modern option and very effective due to removal of local tension cause of relapse.
3. It is necessary to study evolution of synthetic mesh surgery patients from distance to appreciate its influences on the integrity of spermatic cord.

**Key words:** inguinal hernia, surgical treatment, synthetic mesh.

## EFFICACY OF PROFLOSIN<sup>®</sup> IN CONSERVATIVE MANAGEMENT OF URETERAL STONES

**Banov P.**

*Academic adviser:* Ceban E., M.D., Ph.D., Associate Professor, State Medical and Pharmaceutical University "Nicolae Testemițanu", Chisinau, Republic of Moldova

**Introduction:** Medical expulsion therapy is a first – line for treatment of small ureteral calculi. Tamsulosin is the studied drug, but data received regarding its effectiveness are controversial and its administration is discussible. We aimed to assess the effect of tamsulosin as adjuvant therapy for ureteral calculi.

**Material and Methods:** There were 64 patients examined with primary and recurrent ureterolithiasis. The presence of ureterolithiasis was assessed by ultrasound and/or radiological examination of upper urinary tract. Patients were analyzed for age, gender, stone size (>7 mm excluded) and location (side, upper, medium and lower 1/3 of ureter, kidney stones excluded), presence of UTI, chronic concomitant diseases. The patients were randomly divided into two groups – Group I – 44 patients underwent the standard therapy with addition of Proflosin® (Tamsulosin 0,4 mg) Berlin-Chemie/Menarini once a day, and 20 patients (Group II) – standard therapy only. Patients were offered a closely monitored trial for spontaneous stone passage in 4-week period prior to definitive therapy. The stone expulsion rate, VAS score and number of colic attacks, time of stone elimination and possible side effects of medication were observed.

**Results:** All patients completed the study and none was excluded due to side effects. No significant differences were found between the groups for age, gender, stone size and location. Mean patient age was  $45\pm 6,8$  years. There were 26 females and 38 males. The stone-free rate was 88,6% in Group I (39/44), compared with 70,0% (14/20) in Group II. Mean of colic attacks was  $2,6\pm 0,3$  in Group I compared with  $7,2\pm 0,8$  in Group II ( $p>0,001$ ), and VAS score was 4 and 7 in Group I and II respectively. A mean stone expulsion time of 8,2 and 14,5 days was recorded for Group I and II respectively, and this difference was statistically significant ( $p<0,001$ ).

**Conclusions:** The adjunction of tamsulosin for conservative management of ureteral calculi decrease the time of stone expulsion, number of colic attacks and amount of analgesics. The Proflosin® demonstrated no clinically significant adverse effects, while proving to be a safe and effective treatment option.

**Keywords:** tamsulosin, ureteral stones, expulsion therapy, Proflosin®.

## ROLE OF $\alpha$ -BLOCKERS AS ADJUNCTIVE THERAPY FOLOWING SCHOK-WAVE LITOTRIPSY OF RENAL CALCULI

Marinov A., Banov P.

*Academic adviser:* Ceban E., M.D., Ph.D., Associate Professor, State Medical and Pharmaceutical University “Nicolae Testemitanu”, Chisinau, Republic of Moldova

**Introduction:** It was demonstrated the effectiveness of the  $\alpha$ -blockers for medical expulsion therapy in urolithiasis. We aimed to assess the effect of Tamsulosin adjunctive therapy following ESWL for renal calculi.

**Methods:** In prospective study were included 49 patients who underwent ESWL therapy for renal stones (>1,5cm) from May 2011 to 2012. Patients were randomized into two groups. Group I (tamsulosin group) – 29 patients received standard therapy + Proflosin® (Berlin-Chemie/Menarini) 0,4 mg once a day, Group II (control group) – 20 patients received standard therapy only. Patients were evaluated for stone expulsion, colic attacks, amount of analgesics and side-effects.

**Results:** The groups were comparable for age, gender and stone size. Mean patients' age was  $48,3\pm 13$  years (Mean $\pm$ SD). There were 25 females and 24 males. Mean stone size was  $1,56\pm 0,14$  cm (Mean $\pm$ SD). There was no significant difference between the groups regarding stone expulsion rates, in Group I it was 93,1% (27/29) and in Group II – 90,0% (18/20). The mean expulsion time (Mean $\pm$ SE) in Group I ( $5,2\pm 0,8$  days) was shorter than in Group II ( $7,8\pm 1,0$  day), and this difference was statistically significant