twice a week for the groups 1,2,3 to prevent endogenous liver regeneration and allow the stem cells to act. For the fourth group we continue with CCL4 and for the 5 without CCL4 to allow endogenous regeneration for another 6 weeks. The animals were sacrificed at 10, 20 and 40 days after transplantation, and there were collected 5 ml of blood and the liver specimens.

Preventive results: After 6 weeks of CCL4 administration 90% of rats presented weight loss ranging between 5 to 20%, and signs of coagulopathy like periocular bleeding. The 6 rats sacrificed just before the SC transplantation proved the presence of ascites and yellow, nodular liver changes. Histological examination showed the presence of infiltration of the liver with neutrophils, regenerating nodules of hepatocytes and the deposition of connective tissue between these nodules.

Conclusions: Further biochemical, histological and immunohystochemical analyses have to be done on liver specimen and collected blood to evaluate the effects of SC therapy on the end stage of the liver disease.

Keywords: chronic liver disease, allogenic stem cells, intrasplenic transplantation.

DIFFUSE TOXIC GOITER WITH IRRITABLE BOWEL SYNDROME AND SERT GENE POLYMORPHISM

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Introduction: The irritable bowel syndrome (IBS) is a complex disorder that is associated with altered gastrointestinal motility, secretion, and sensation. Serotonin directly and indirectly affects intestinal motor and secretory function and abnormalities may lead to either constipation or diarrhea. The serotonin selective reuptake transporter (SERT), terminates the actions of serotonin by removing it from the interstitial space. Polymorphisms in the promoter region of the SERT gene have effects on transcriptional activity, resulting in altered serotonin reuptake efficiency.

The aim of this study was to assess the potential association between SERT polymorphism and type of intestine disorder in patients with diffuse toxic goiter and irritable bowel syndrome.

Material and methods: We have investigated 38 women with diffuse toxic goiter and irritable bowel syndrome. DNA of all subjects was analysed by polymerase chain reaction based technologies for SERT polymorphism. The patients were divided into 3 groups. The first group included 12 patients with diffuse toxic goiter combined with IBS with a predominance of diarrhea, second group - 12 patients with a predominance of constipation. Third group consisted of 14 persons with thyrotoxicosis without violation of the digestive system.

Results: In a first group of patients we have found all types of polymorphism: 67% homozygous LL alleles carriers gene SERT, 25% - SS-genotype, and only 1 patient (8%) was heterozygous carrier of LS-variant. Among persons of second group were 75% patients with LS-genotype, 25% had SS-variant. In the third group 79% patients had SS-genotype and 21% - LS-genotype.

Conclusion: These results confirm the association between SERT gene polymorphism and diffuse toxic goiter with IBS.

Key words: irritable bowel syndrome, serotonin, gene, diffuse toxic goiter.