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**Background.** The presence of an acute inflammatory and destructive process in the abdominal cavity is commonly a contraindication to the one-stage laparoscopic herniorrhaphy.

**Material and methods.** From 2010 to 2017 986 children, 5-14 years of age, were admitted to hospital with a clinical picture of acute abdomen for surgical treatment. During laparoscopy in 53 patients (33 boys and 20 girls) a persisted processus vaginalis (PPV) was found: unilateral in 48 cases and bilateral in 5 cases. In 37 children from this group various destructive forms of acute appendicitis (in 10 cases complicated by local peritonitis with or without intraabdominal abscess and in 7 – by general peritonitis) were diagnosed as well as 10 - pelvioperitonitis, 4 - acute mesenteric lymphadenitis, 1 - ovarian apoplexy, 1- torsion of omentum. All patients underwent simultaneous procedures - both inflammatory focus sanitation and subcutaneous endo-assisted ligation (SEAL) of PPV.

**Results.** There was no conversion in any case. When the inflammatory focus was reorganized (appendectomy, ovarian resection, etc.) SEAL was performed according to our modification. SEAL duration was not more than 8 minutes for unilateral hernia and 10 minutes for bilateral one. Postoperatively, all children received a standard therapy. In all cases the postoperative period was favorable. Complications in abdominal cavity or inguinal canals were not observed. Ultrasound examination and blood tests confirmed a complete relief of the inflammatory process. All patients were discharged with full recovery.

**Conclusion.** Simultaneous laparoscopic herniorrhaphy in children with acute inflammation in the abdominal cavity does not increase the risk of postoperative complications.

## A RETROSPECTIVE CLINICAL STUDY OF 735 SCOLIOSIS TREATED BY POSTERIOR SEGMENTAL RACHISYNTHESIS

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This is a retrospective study of 735 patients with scoliosis who underwent surgery in Pediatric Orthopedic Department of Central Emergency Hospital for Children "Grigore Alexandrescu" Bucharest and also in the private hospitals "Regina Maria" and "Sanador" in a 15 years period between 1999 and 2013.

The study relates to the cases of scoliosis treated by segmental rachisynthesis by posterior approach, but also includes some cases in which the posterior and the anterior approach were combined. The patients were between 6 and 44 years old and most of them were female (82%). We used different techniques of rachisynthesis such as: SCS (Spinal Clip System), Moss-Miami, XIA, CD-Legacy, USS II.

Regarding etiology, 93,12 % of scoliosis were idiopathic forms, 2,03% congenital, 1,09% in patients with Recklinghausen disease, 1,09 % in Marfan syndrome, 0,94% in cerebral palsy, 0,63 % in both spinal amyotrophy and posttraumatic and 0,47 % in muscular dystrophies.

According to topographic form, 37,66 % were double thoracal and lumbar scoliosis, 29,06 % thoracal scoliosis, 18,28% thoracolumbar, 13,12 % lumbar, 1,25 cervicothoracal and 0,63 % triple curve scoliosis.