THE TREATMENT OF THE ULTRASHORT FORMS OF HIRSHPRUNG'S DISEASE IN CHILDREN

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The aim of the study was to estimate the efficacy of sphincterotomy in patients with the rectal forms of Hirshprung's disease with ultrashort aganglionic segment.

Methods. From 1991 to 2015, 203 children with persistent chronic constipation, receiving conservative therapy were observed in our pediatric surgery departments. Confirmed positive effect was not possible despite of the complex conservative therapy. The inspection included X-ray examinations, prophylometry, rectal biopsy by Swenson. Prophylometry revealed hypertone of the anal canal and sphincters in all patients. By the histology data, agangliosis the same was found in all patients and the diagnosis of Hirshprung's disease, ultrashort aganglionic segment was positioned.

For the treatment of these patients were used two methods of surgical intervention: Lynn`s operation from 119 patients (58,6%) and posterior myectomy at 84 patients (41,4%).

Results. Next outcomes were evaluated through 3 months in all patients. After the Lynn`s operation good result was in 34% of patients, a satisfactory- 34%, unsatisfactory result-32% of patients. In patients operated using the posterior myectomy, a good result was 29,8% of patients, a satisfactory-53,6%, unsatisfactory result-16,6% of patients. All patients was carried out step-wise rehabilitation therapy.

Long-term outcomes were evaluated through 12 months in all patients. After the Lynn`s operation good result was in 55% of patients, a satisfactory-45%, unsatisfactory results were not. In patients operated using the posterior myectomy, a good result was 29,8% of patients, a satisfactory-53,6%, unsatisfactory result-16,6% of patients.

Conclusion. In the dynamics of the greatly increased number of patients with good and satisfactory results at the expense of poor results, especially in the group after Lynn`s operation. Consequently, the Lynn's operation showed greater effectiveness for treatment of children with ultrashort form of Hirschsprung's disease.

HISTORY OF TISSUE TRANSPLANTATION IN THE REPUBLIC OF MOLDOVA

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Introduction. The successful history of tissue transplantation in the Republic of Moldova has its origin in the early 1960s. The most frequently tissues transplanted were the skeletal tissues and cornea. Numerous problems in the field were reported within the Joint Programme CoE-EC for 2004 – 2006 by the Council of Europe's experts with further support in the implementation of priority strategies related to human substances procurement and transplantation. The activities concerning the implementation of the legislation in accordance with the European Union requirements started in 2004.

Materials and methods. The Law no. 42-XVI, which sets the framework in the field of transplantation, was developed and adopted by the Parliament on March 6, 2008. In 2010 in compliance with the provisions of the above-mentioned Law the Transplant Agency was established with the major goal to implement efficiently the state policy in the field of transplantation of human organs, tissues and cells. The estimated current needs for tissues are: bone marrow transplants at 40 - 50 per year, valve transplants at 100 patients, and of cornea – at 150.

Results. The first multi-tissue human bank was authorized in 2013. Pursuing the scope to improve donation and transplantation of tissues and cells the existing Law no. 42-XVI was completed by Law no.103 in 2014, and covers all the human tissues and cells. On March 2013 the cornea procurement and transplantation were relaunched. From year to year the total number of tissues transplanted is increasing, so, in 2016 there were 605 tissues transplanted to 232 recipients (46 children) compared to 243 tissues transplanted to 174 recipients (23 children) in 2013.

Conclusion. The establishment of an efficient transplant system contributes to cover the country's needs in tissues for the patient's treatment.