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# ABSTRACT BOOK

## HEALTH RISK FACTORS AND PREVENTION OF INJURIES AND DISEASES

*Material of 3rd International Conference on Non-communicable Diseases „Health risk factors and prevention of injuries and diseases”, funded by NIH USA, Fogarty International Center „iCREATE: Increasing Capacity in Research in Eastern Europe” grant number: 2D43TW007261-11*

June 5<sup>th</sup> – 7<sup>th</sup>, 2019  
Chișinău, Republic of Moldova

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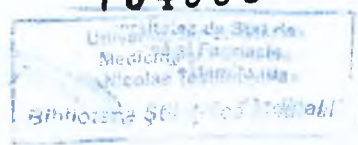
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517 adolescents aged 15–17 years. For evaluation of psychosocial factors a questionnaire was designed. The D-SIB questionnaire was used for assessment of direct self-injurious behavior. A composite scale was created based on the first five items of the D-SIB questionnaire: cutting or sticking sharp objects into skin, self-burning, preventing wounds from healing/self-biting, head banging or self-punching (Cronbach's Alpha = 0.611).

**Results.** It was determined that cutting / sticking and carving / scratching were the most prevalent types of self-injurious behavior. It was shown that the measure of the composite scale depends on gender and girls were more inclined for self-harm than boys. The main psychosocial predictors of self-injurious behavior were determined such as parental unemployment, alcohol consumption, lack of sleep and breakup with a partner (the last predictor had substantial effect in girls).

**Conclusion.** It was concluded that rate of direct self-injurious behavior in vocational school students is low but some psychosocial factors could make negative impact on it. The program of psychological assistance for adolescents was designed based on these findings and the psychosocial interventions to prevent repeated deliberate self-harm were conducted for this population.



## TRAUMATIC BRAIN INJURIES AMONG CHILDREN - A RETROSPECTIVE STUDY

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**Introduction.** Traumatic brain injury (TBI) is the leading cause of disability and death in children and adolescents, with approximately 5 in 1,000 children experiencing a TBI each year and 1 in 30 children suffering a TBI by age 16 years. TBI in children result in a range of traumatic injuries to the scalp, skull, and brain that are comparable to those in adults but differ in both pathophysiology and management. The differences are attributable to age-related structural change, mechanism of injuries based on physical ability of the child, and the difficulty in neurological evaluation of pediatric populations. The aim of this study was to explore the particularities of TBI among children in the Republic of Moldova.

**Material and methods.** A retrospective study was conducted among children patients with TBI at the Municipal Children's Hospital Valentin Ignatenco - a tertiary medical institution for emergency health care. It was applied a questionnaire, completed on the basis of medical records according to ICD10 codes. The collection

period was August, 1 – October, 31, 2018. The data were uploading using the existing electronic data collection tool - Red Cap and analyzed trough Microsoft Excel. Data collection was performed by a resident neurosurgery and a scientific researcher. The ethics committee's approval has been obtained.

**Results.** There have been identified 56 cases of TBI in children aged between 0-17 years old, of which 22,6% male and 14,6% female; most cases being in the age group 0-6 years old (48,3%), followed by group of 10-14 years old (21,4%). In more than half of cases, injury appears in urban area, 32,1% in group of 0-6 years old, of the remaining cases in the rural area 30,3%. The major cause of the intracranial injuries was through falls (64,3%), the most affected group being 0-6 years old (13, 8%). On the second place there were road accidents (26,8%) with the most cases in the age group of 0-6 and 15-17 years old (8,9%), followed by assault/violence (8,9%). More than injury occurred at home (39,3%), followed by recreation area (10,7%), transport area (8,9%). Less than 1/2 of the cases were registered in August 39,3%, between 10.00-14.00 (42,2%), 20.00-06.00 (19,6%).

**Conclusion.** Among children, the most vulnerable age of TBI were from 0-6 years old and 10-14 years old, and most TBI are caused at home as a result of falls and recreational and playgrounds, followed by road accidents. The results of the study impose to develop prevention measurements for this target group.



## **RISK OF TRAUMA - HUGE IMPEDIMENT IN YOUNG ATHLETES PERFORMANCE**

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**Introduction.** In addition to all the benefits that sport has on our body, it also presents a certain risk, especially sport-related traumas. The international bodies, such as the International Olympic Committee, have declared recently the protection of athletes' health, in particular the prevention of trauma, as one of the major objectives. The achievement of some effective programs for preventing trauma in athletes allows maintaining of good health, enhancing sports longevity and reducing treatment costs and subsequent rehabilitation of athletes. One of the most obvious advantages is also the potential for improving the performance of athletes. This advantage is particularly important as a motivating way of coaches to apply strategies for preventing trauma in

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