

8. DILATED CARDIOMYOPATHY IN ASSOCIATION WITH THE ALCAPA SYNDROME

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Introduction: Dilated cardiomyopathy is a severe condition in which the heart muscle is weakened and no longer has the strength to pump blood throughout the body. The weakened heart is unable to pump more blood, therefore more blood remains to this level after each heartbeat. As larger amounts of blood remain in the lower chambers of the heart, they expand. Over time, the heart muscle loses its shape and becomes increasingly weaker.

Objectives: Study of clinical evolution and ECG of patients diagnosed with associated dilated cardiomyopathy or ALCAPA Syndrome from a basic treatment with IEC, diuretics and B-blocking agents along with the surgical treatment.

Materials and Methods: 10 children of which 9 diagnosed with dilated cardiomyopathy and 1 child who associates ALCAPA syndrome were evaluated by Ross score, NYHA and echocardiographic. Cardiac index measurement using ECG and CT after receiving basic treatment.

Results: The 9 patients with dilated cardiomyopathy treated by the basic therapeutic method have evolved to improve cardiac indexes (Ross and NYHA) showing an increase in left ventricular ejection fraction gather up 20%. The patient with dilated cardiomyopathy and ALCAPA syndrome showed no improvement following therapy being directed to surgical treatment.

Conclusions: Dilated cardiomyopathies in pediatric age have an 80% response rate to basic treatment with IEC, diuretics and B-blockers that lead to Ross and NYHA amelioration. Dilated cardiomyopathy associated with ALCAPA syndrome has one treatment option: heart transplant.

Keywords: evolution, dilated cardiomyopathy, treatment, children, ALCAPA syndrome

9. CLINICAL CHARACTERISTICS OF GRAVES' ORBITOPATHY

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Introduction: Graves' orbitopathy (GO) constitutes a major clinical and therapeutic challenge. GO is an autoimmune disorder representing the most common and most important extrathyroidal manifestation of Graves' disease. Although the pathogenesis of GO is beyond the scope of this study, attention is drawn to the link between the orbit and thyroid, which has important clinical and therapeutic implications. Optimal management of GO requires a coordinated approach addressing the thyroid dysfunction and the orbitopathy.

Purpose and Objectives: To establish the relationship between Graves' disease evolution and the onset of ocular manifestations. To evaluate the activity and severity of GO in our study group.

Materials and Methods: This study is based on the clinical examination of 16 patients, using the Clinical Activity Score (CAS) and the NOSPECS classification of the disease's severity.

Results: During this study, we have seen 16 patients (32 eyes). 12 of these patients presented bilateral involvement, while 4 – unilateral involvement. We have studied the onset of Graves' orbitopathy in relation to the onset of hyperthyroidism, and we've determined that most commonly GO occurs at the same time or follows the hyperthyroidism (up to 81% of cases). The activity of GO was determined using CAS. We've determined that the spontaneous orbital pain, gaze evoked orbital pain, conjunctival redness and the eyelid swelling were the most common manifestations presented by our patients (50–75% of cases), while eyelid erythema was the less common (12.5%). The frequency of active and inactive cases was almost equal, with a minor prevalence of active processes. The disease's severity was appreciated using NOSPECS classification. Most patients presented a minimal grade of severity (43.7% – 7 patients), while 37.5% (6 patients) have presented a moderate grade and only 18.8% (3 patients) – maximal severity. The first two classes of the

NOSPECS (only signs and soft tissue involvement) were the most common, being found in 81.3% (13 cases) and 62.5% (10 cases) of patients respectively.

Conclusions: The amount of minimal and moderate severity of the Graves' orbitopathy is imposing (81.2%) in study group. These results indicate that in the majority of GO cases is early detected. The frequency of the CAS manifestations, as well as the predominance of the NOSPECS classes, matches the results found in clinical randomised studies and literature.

Keywords: Graves' orbitopathy, NOSPECS, CAS, hyperthyroidism

10. THE LEVEL OF SEXUAL HORMONES IN WOMEN OF REPRODUCTIVE AGE WITH CIRROTIC PORTAL HIPERTENSION

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Background: Chronic liver diseases are commonly associated, in dependence of severity and duration of disease, with menstrual cycle disorders such as amenorrhea and anovulation. In most of cases the possibility of pregnancy is poor but sometimes these women become pregnant.

The aim: To estimate the concentration of sexual hormones in women of reproductive age with cirrhotic portal hypertension, in dependence of functional liver reserve Child Pugh.

Materials and methods: We selected 60 women of reproductive age with cirrhotic portal hypertension, caused by chronic virus hepatitis. The functional liver reserve was determined, according to the Child A/B/C -36/10/4. We tested the plasmatic levels of estrogen, progesterone, LH and FSH.

Results: In the first group in 36 cases (60%), where the functional reserve of liver Child Pugh A, was good, the medium level of E2 in all the phases of menstrual cycle was at upper admissible range ($130,7 \pm 30,5$ pg/ml). In the second and the third group with poor functional reserve Child B,C in 24 cases (40%) the level of estrogen have been increased in all the phases of menstrual cycle ($366,6 \pm 46,3$ pg/ml). This fact can be explicated by functional insufficiency of the liver and perturbances of protein synthesis in liver, which cause severe pathogenetic infringements in estrogenic metabolism. The plasmatic medium concentration of progesterone in the first group was $34,5 \pm 3,6$ nmol/l and in group with poor liver reserve it was a breakdown of progesterone contents till $16,7 \pm 3,4$ nmol/l ($p < 0,05$). There were no significant statistic difference between the levels of LH and FSH in presented groups ($p > 0,05$).

Conclusions: The increased value levels of estrogen and poor concentration of progesterone in women with cirrhotic portal hypertension, explain the absence of menstruation and anovulatory cycles in patients with poor liver reserve, which are the main factors of infertility in these patients.

Keywords: Infertility, sexual hormones, portal hypertension

11. THE SPECTRUM OF SENSITIZATION IN SCHOOL-AGE CHILDREN WITH RESPIRATORY ALLERGOPATOLOGY

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Introduction: Allergic sensitization seems to be an important risk factor for subsequent onset of persistent respiratory allergic pathology during childhood and adulthood. Allergic disorders are referred to the most common with trend of increase of sensitization to allergens in the last decade.

Purpose and Objectives: The aim of the study was to evaluate components of atopic sensitization to the most common allergens in children with perennial allergic rhinitis (AR) with/without concomitant bronchial asthma (BA).

Materials and methods: On the base of the Children Clinical Hospital (Chernivtsi, Ukraine)