

### **Methods and Materials**

Historical: how the phenomena evolved in time during 1981-2013 in Republic of Moldova;

Chronological series: calculation of all comparable homogeneous values, that characterize the modification of a certain phenomena in a certain period of time;

Statistical Methods: quantitative and qualitative analysis of all data that were collected during the research.

### **Discussion Results:**

1. Children's recurrent laryngeal papillomatosis has a incidence from 0.2 to 0.7 for 100,000 children in Republic of Moldova compared to: Norway: 0.10-0.25 for 100,000 children, Sweden: 0.2-0.7 for 100,000 children, Denmark: 0,362 for 100,000 children, Canada: 1,11 for 100,000 children;

2. Average age to diagnose the disease is 4,4 years and is specific for both genders (masculine: femenin 1,2:1) in Republic of Moldova;

3. Rate of tracheotomy is between 1,8% and 64%, 30 average % is specific for children in Republic of Moldova

**Conclusions:** Our cohort of patients is similar to other cohorts regarding the sex distribution and age of onset. Clinical evolution of this disease is various. Some patients have early spontaneous remission; others, on the other hand, suffer from frequent and inexorable relapses lasting over decades to overlapping chronic complications that scar stenosis of the larynx with the imposition of a cannula tracheostomy or malignant transformation. Laryngeal papillomatosis has a huge impact on the life of children that are affected.

**Keywords:** Recurrent respiratory papillomatosis, human papilloma virus, incidence

## **31. OBESITY – THE MAIN PROBLEM RESPONSIBLE FOR METABOLIC DISORDERS**

**Natalia Onica, Irina Ghenciu**

Scientific adviser: Sarbu Oxana, University Assistant, *Nicolae Testemitanu* State Medical and Pharmaceutical University, Chisinau, Republic of Moldova

**Introduction:** The World Health Organization has identified obesity as a global epidemic problem, during the last decades the number of cases, which suffer from it - has grown very fast, as well in our country. It is the most significant cause of damage to the health. It became a public health issue due to the prevalence, costs and its effects. All attention and efforts are geared towards understanding and correcting environmental factors responsible for the increasing prevalence of obesity among the population.

**Materials and Methods:** In this project were investigated 80 persons with obesity. The control group consisted of 20 normal weight persons. Depending on the obesity degree, estimated by calculating the BMIs, the patients were divided in 4 groups: I group - 20 patients with overweight, II group - 20 patients with I degree of obesity, III group – 20 patients with II degree of obesity, IV group - 20 patients

with III degree of obesity. The basal glycemia was dosed by using the gluco-oxidasic method. Analysis of the lipid profile consisted of the determination of total cholesterol (Col), high-density lipoprotein cholesterol (HDL-col), triglycerides (Trig), determining the low-density lipoprotein cholesterol (LDL-col) and very- low-density lipoprotein cholesterol (VLDL). The obtained data assessment was performed with the „StatsDirect” statistical program.

**Results:** The analysis shows a high rise of glycemia ( $p < 0.001$ ) along with the increasing degree of obesity and abdominal circumference values (AC). The positive interrelationship of body mass index (BMIs), AC with values of systolic blood pressure (SBP), diastolic blood pressure (DBP) and glycemia, although low, but reliable, attests an existing risk for developing hypertension (HPN) and diabetes in obese patients, which is dependent on the gravity and type of obesity. Comparative research of lipid metabolism parameters in obese individuals attest a considerable increase of TGI, VLDL and decrease of HDL in patients with II and III level of obesity ( $p = 0.05$ ;  $p = 0.002$ ) compared to overweight patients. The cholesterol and of LDL values show a statistically reliable increase in groups of obese patients compared to control group ( $p < 0.0001$ ) but no indicative changes have been registered while performing a comparative research of both groups. It was discovered a highly significant correlation between AC and concentration of Trig, as well as a negative correlation with HDL concentration.

**Conclusion:** Obesity is the main trigger factor, which will lead to HPN increase and impaired carbohydrate and lipid metabolism. The positive correlation of BMIs, AC with the values of SBP, DBP, glycemia, TGI and negative correlation with HDL, although low, but reliable, can cause development of HPN, diabetes and dyslipidemia in obese patients.

**Key words:** Hypertension, glycemia, obesity.

## 32. ASSESMENT OF PATIENT SATISFACTION TOWARDS PMC SERVICES WITHIN PMSI HC IALOVENI

**Alina Bobeica**

Scientific adviser: Artiom Jucov, PhD, University Assistant, Chair of Family Medicine, *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

**Introduction:** Patient satisfaction represents a patient's perception about the extent to which the requirements were satisfied and fulfilled. Researches in this area suggest that patient satisfaction depends on technical skills, intelligence and qualifications of medical staff. The objective of the study is the assessment of patient satisfaction on the quality of medical care in the Ialoveni PHI HC.

**Materials and methods:** The main aim of our study was to evaluate patients' expectations in the IMSP CS Ialoveni, regarding quality of care, satisfaction with the provision and access. The study was conducted on a sample of 80 respondents from Ialoveni. Basing on completed questionnaires, we found the quality of care received in CS Ialoveni and the level of patient satisfaction.

**Results:** From 80 people interviewed 34 of them are satisfied (42%), 39 are dissatisfied (49%) and 7 respondents are very dissatisfied (9%). The most frequent were registered patients aged between 30 and 55 years – 35 patients (44%). Patients aged over 55 years – 26 (32%) and patients aged to 35 years – 19 (24%).