test, Nijmegen's questionnaire, questionnaire for somatoform reactions, questionnaire for respiratory dysfunction.

Discussion results: There was found that people with higher reflexes tend to have lower scores in SCL-90 and higher scores on Spilberger's anxiety test, Beck's depression test, Nijmegen's questionnaire, questionnaire for somatoform reactions and questionnaire for respiratory dysfunction, but there was obtained a significant difference only between people with "semiconvulsive" reflexes and "convulsive" ones on Nijmegen questionnaire (M=21,77+6,9 and M=27,46+11,7 respectively with p<0,05)

Conclusion: Although there are some visible tendencies in psychological tests for people with different intensity of patellar reflexes, there isn't a direct correlation between reflexes intensity and psychological profile in patients with mood disorders.

Key Words: reflexes, psychological tests, convulsive hiperreflexivity, Nijmegen.

52. BRUXISM AND ITS COFACTORS: PSYCHOEMOTIONAL, VEGETAT IVE AND MOTOR ASPECTS

Paula Fala, Gheorghe Bordeniuc, Romaniuc Dumitru

Scientific adviser: Ion Moldovanu, MD, PhD, Professor, Department of Neurology, *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova, Victor Lacusta, MD, PhD, Department of Alternative and Complementary Medicine, *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

Introduction: Bruxism is a parafunctional activity, consisting of excessive teeth grinding and jaw clenching. It affects at least 15-20% of the general population, and it is estimated that 85-90% of people experience at least one episode of bruxism during their lifetime. Awake bruxism has a higher prevalence in women, in contrast to sleep bruxism, that is more prevalent in men. The objectives of our research are the following: analyzing the quantitative indices of awake bruxism under the influence of stress, nicotine, caffeine and alcohol; assessing the diagnostic possibilities for the fractal analysis of cardiac rhythm.

Materials and methods: There were studied 19 patients with awake bruxism and 19 persons without bruxism. The influence of bruxism cofactors was quantified. There were analyzed the quantitative indices of bruxism, the EMG activity of the masseter muscle and the fractal analysis indices of the heart rate (sample entropy - SampEn, correlation dimension – D2). There were used the Polispectr-Ritm, Neuro-MVP diagnostic equipment and the $Sleep\ Guard\ SG5$ device (USA).

Results: All the studied cofactors had a higher intensity in bruxers than in non-bruxers, with the highest statistical significant difference observed for emotional stress (p<0,001) and alcohol consumption (p<0,01). Bruxers are more likely to smoke more cigarettes than non-bruxers (p<0,02). Caffeine consumption is two-fold higher for bruxers in comparison to non-bruxers (p<0,03). The surface electromyography has shown changes under the influence of all cofactors, the highest A_{max} value was recorded under the influence of alcohol (p<0,01). The lowest influence on the bioelectrical activity of

the masseter muscle was observed for caffeine and nicotine. The most significant changes (p<0,05) for SampEn index were observed under the influence of alcohol. For the D2 index, the influence of alcohol and stress are more significant (p<0,001) in comparison to nicotine and caffeine (p<0,05).

Conclusion: In patients with awake bruxism, the intensity of factors increases in the following order: caffeine<nicotine<alcohol<stress; the number of episodes, their total duration and the bioelectric activity of masseter muscle increases under the action of the cofactors in the following order: alcohol<nicotine<caffeine<stress. Differentiated evaluation of the action of daily cofactors in patients with awake bruxism can be achieved based on the fractal analysis of the heart rate, which reflects the peculiarities of quantitative manifestation of awake bruxism episodes.

Key words: awake bruxism, instigating factors, fractal analysis

53. CHANGES OCCURED IN THE PSYCHOLOGICAL BEHAVIOR IN CHILDREN WITH A SURGICALLY CORRECTED CONGENITAL HEART DISEASE

Noémi-Julia Fori, Alina Elena Ticalo, Mihai Stanca, Denis Pasc

Scientific adviser: Amalia Fagarasan, MD, PhD, Associate Professor, University of Medicine and Pharmacy Targu Mures, Romania

Introduction: Congenital heart disease is a malformation of the heart, aorta or other large blood vessels, that is the most frequent form of major birth defect in newborns. The objective of the study is to analyze the psychological changes that occur in patients after corrective surgery for congenital heart disease and the relation between the type of congenital heart disease and the psychological symptoms.

Material and Metods: This is a retrospective study on a number of 43 patients admitted in the section Pediatric Cardiology III of Institute of Cardiovascular Disease and Transplant Targu Mures, between 01.01.2008-31.12.2015, diagnosed with congenital heart disease who undergo surgery and psychological evaluation.

Discussion results: 86% of the studied patiens had complex congenital heart disease and only 14% presented simple congenital heart disease.67% of them are males, 33% females and 60% were from an urban background and 40% from a rural background. In 88% of the patients occured changes in their psychological behavior and the results show a correlation between emotional lability, hipersensitivity and female genders. No correlation were found between the type of the congenital heart disease the the psychologial symptoms.

Conclusion: The type of the congenital heart disease has no effect on the psychological symptoms that occur in patients after corrective surgery for congenital heart disease.

Key words: congenital heart disease, psychological symptoms.