

## 85. HELICOBACTER PYLORI INFECTION AND PREMALIGNANT LESIONS OF THE STOMACH

Elena Lavinia Pastramoiu, Viorel Moise, Voidezan Septimiu

Scientific adviser: Eموke Fulop, MD, PhD, University of Medicine and Pharmacy Targu Mures, Romania

**Introduction.** Premalignant condition and lesions of the stomach such as intestinal metaplasia or atrophy are very wide-spread nowadays and it seems to be determined by various factors. The aim of this study is to evaluate in which measure *Helicobacter pylori* correlates with premalignant lesions of the stomach in our area of the country.

**Materials and methods.** We included in the study a total of 792 patients, from whom we took gastric biopsies for different clinical symptoms, biopsies that have been evaluated in the Department of Pathology, Targu Mures County Emergency Hospital, between January and December 2015. We established if *Helicobacter pylori* infection is present, where the infection is localized at the level of gastric mucosa, the type of the gastric premalignant conditions and we also performed a statistical comparative study between the followed parameters.

**Results.** From a total of 792 patients, 243(30.68%) present the infection with *Helicobacter pylori*. We demonstrated that *Helicobacter pylori* infection is localized with predilection in the antrum of the stomach-154(63.4%), while only 22(9.1%) patients have infection in the body and 67(27.6%) both in the antrum and the body. From the patients diagnosed with *Helicobacter pylori* infection, 37(15.22%) of them present complete intestinal metaplasia, 41(16.87) incomplete intestinal metaplasia and 35(14.40%) atrophy.

**Conclusions.** Our results emphasize the fact that the number of the patients with *Helicobacter pylori* infection that were diagnosed based on biopsies is relatively reduced comparing with the total number of evaluated biopsies. In the cases where this infection is diagnosed, the association with premalignant conditions is statistically significant ( $p < 0.0001$ ).

## 86. EXTRAINTESTINAL MANIFESTATIONS IN INFLAMMATORY BOWEL DISEASE

Turcan Vitalie

Scientific adviser: Tofan-Scutaru Liudmila, MD, Associate Professor, Department of Internal Medicine, Gastroenterology, *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

**Introduction:** Inflammatory bowel diseases (IBD) - ulcerative colitis (UC) and Crohn's disease (CD), have chronic progression evolution with frequent extraintestinal manifestations and increasing incidence in East Europe, inclusive in Moldova.

**The aim of the study** was to investigate the frequency and spectrum of extraintestinal pathology Associated with IBD in Moldova – the region with very high incidence of liver and articular disorders.

**Materials and methods:** The study was open prospective and included 126 patients with IBD (56% female, age of 18-67 years) who were treated in Republican Clinical Hospital in 2015. Diagnosis of ulcerative colitis or Crohn's disease was confirmed endoscopically and histologically. The following methods were used to diagnose extraintestinal manifestation: clinical, ultrasonography, X-ray, biochemical tests, immunological markers etc.

**Discussion results:** 114 (90,5%) patients were diagnosed with UC, 11 (8,7%) with CD and 1 (0,8%) with IBD type unclassified (IBDU). The most frequent extraintestinal manifestation was liver pathology, diagnosed in 30 (23,8%) patients. The spectrum of diseases was broad and included: chronic viral hepatitis B and C – 12 (9,5%), liver steatosis – 9 (7,1%), nonspecific reactive hepatitis - 5 (4,0%), drug induced hepatitis 2 (1,6%), primary sclerosing cholangitis – 1 (0,8%) and primary biliary cirrhosis 1 (0,8%).

Arthropathy was diagnosed in 18 (14,3%) patients. Peripheral arthropathy was more frequent than central arthropathy: peritheral oligoarthritis – 5 (4,0%), poliartitis 7 (5,6%) in comparison with sacroiliitis – 5 (4,0%) and ankylosing spondylitis – 1 (0,8%). Skin and mucosal affectations were observed in 6 (4,8%) patients: aphthous stomatitis – 3 (2,4%), pyoderma gangrenosum – 1 (0,8%), nodular erythema – 1 (0,8%), and Sweet syndrome – 1 (0,8%). Ocular affectation was diagnosed in 4 (3,2%) cases. Extraintestinal manifestations were more frequent in association than as mono extraintestinal disorder – 22 (17,5%) and 12 (9,5%) patients respectively, and the common associations were liver-articular, skin-articular. It was not revealed significant interrelation between activity/extent/localization of IBD and severity of extraintestinal manifestation. Exception have made nonspecific reactive hepatitis, peritheral oligoarthritis, and pyoderma gangrenosum which was characteristic for a severe debut of IBD.

**Conclusion:** An essential number of IBD patients have Associated extraintestinal pathology (27%). Liver diseases were diagnosed more often and skin and ocular lesions less frequent in comparison with literature data.

**Key Words:** inflammatory bowel disease, extraintestinal manifestation

## **87. EVOLUTION OF RESISTANCE TO CEFEPIME IN PATIENTS WITH URINARY TRACT INFECTION**

**Alexandru Emil Baetu, Eموke Dragus, Anca Duca**

Scientific adviser: Adrian Maier, University of Medicine and Pharmacy Targu Mures

**Introduction:** Urinary tract infections (UTIs) are among the most common infectious diseases occurring in either the community or healthcare setting.<sup>1</sup> Uncomplicated UTIs typically occur in the healthy adult non-pregnant woman, while complicated UTIs (cUTIs) may occur in all sexes and age groups and are frequently Associated with either structural or functional urinary tract abnormalities. Examples include foreign bodies such as calculi indwelling catheters or other drainage devices, obstruction, immunosuppression, renal failure, renal transplantation and pregnancy