

## POSTERS

### 97. THE EVOLUTION PARTICULARITIES OF RAYNAUD'S SYNDROME

**Alina Brinza**

Scientific Adviser: Svetlana Agachi, Associate Professor, *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

**Introduction.** Raynaud's Syndrome is caused by vasospasm of the small vessels of the fingers, toes, nose, chin, ears, and other protruding parts of the body, triggered by cold and/or emotional stress. It consists of two or three phases (bi- or triphasic) characterized by an initial blanching (ischemia), followed by cyanosis (anoxia) and rubor (reperfusion). The medical importance of Raynaud's syndrome (RS) is to a large extent determined by whether it is a reflection of an underlying autoimmune rheumatic or connective tissue disease as Systemic Sclerosis, Systemic Lupus Erythematosus and Rheumatoid Arthritis.

**The aim** of this study was to assess the frequency and the particularities of Raynaud's syndrome in patients with Systemic Sclerosis (SSc), Systemic Lupus Erythematosus (SLE) and Rheumatoid Arthritis (RA) in Republic of Moldova.

**Material and methods.** We performed a retrospective study, in which were included 150 patients who were hospitalized in the Rheumatology department of Republican Clinical Hospital, during the years 2013-2015: 50 (49 women) of them with SSc, 50 (44 women) with SLE and another 50 (45 women) with RA. The average age of the patients with SSc was  $44,5 \pm 18$  years, with SLE –  $38 \pm 13$  years and with AR –  $39 \pm 8$  years.

The average activity of each disease was: for SSc (EUSTAR) –  $4,5 \pm 1,6$ ; for SLE (SLEDAI) –  $7,4 \pm 2,2$ ; for AR (DAS28) –  $5,1 \pm 2,6$ .

**Results.** The demographic, clinical features of underlying disease in relation to the Raynaud's Syndrome are shown in the Table:

Parameters	SSc	SLE	RA
Number of patients	50	50	50
With RS (%)	90	64	8
Female (%)	97,7	90,6	100
RS as first symptom	64,4	6,2	0

Q We found patients with SSc who were anti-centromere positive have a significantly longer duration until the next disease manifestation compared to those who were anti-Sc170 positive ( $6.4 \pm 0,8$  years vs  $3,2 \pm 0,6$  years). The digital ulcerations were found in 26,6% patients, and most of them (66,6%) were anti-Sc170 positive. The triphasic feature of RS was found in 11,1%, the biphasic – in 51,1% and the monophasic – in 37,7% patients with SSc. Thirty (93,8%) patients with SLE developed RS  $3,5 \pm 1,3$  years after the diagnosis of SLE was established.

Patients presented with RS a mean of  $4,1 \pm 1.2$  years after the diagnosis of RA.

**Conclusion.** The prevalence of secondary RS depends upon the underlying disease. RS secondary to autoimmune disease are more common in women than in men. In SSc the evolution of RS depends on the anti-centromere and anti-Scl70 antibodies. The triphasic feature of RS in SSc was found in only 11,1% patients. RS appears to develop relatively soon after RA and SLE diagnosis in the majority of cases.

**Key words:** Raynaud's Syndrome, systemic sclerosis, systemic lupus erythematosus, rheumatoid arthritis, digital ulcers.

## 98. EXTRINSEC DETERMINANTS OF PULMONARY TUBERCULOSIS

**Alina Gaina**

Scientific adviser: Evelina Lesnic, MD, Assistant Professor, Chair Pneumophysiology, *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

**Background:** Tuberculosis (TB) represents a classic example of an infectious disease linked with the social determinants of the health.

**The aim of the study** is the assessment of social, demographic, economical and hygienic characteristics of patients with pulmonary tuberculosis according to the spectrum of drug-resistance.

**Material and methods.** It was realised a retrospective and selective case-control study of 82 patients with pulmonary TB registered in the Municipal Hospital of TB during the period 1.1.2014 to 1.3.2014. Including criteria in both groups were adult patient (age > 18 years), the diagnosis of the new patient with pulmonary TB. Study design consisted in the division of cases in two groups: first group – included 49 drug susceptible TB; second group - 33 MDR-TB cases.

**Results and discussions.** Distributing patients by sex established the predominance of men in comparison with women in both groups: 32 (65.31%) men vs 17 (34.69%) women in 1st group, as well as in the 2nd group 19 (57.57%) vs 14 (42.42%) women,  $p < 0,001$ . Patients younger than 44 years prevailed in both groups 39 (79.59%) vs patients older than 44 years 10 (20.41%) in 1st group and 24 (72.72%) cases vs 9 (27.27%) cases in the 2nd group,  $p < 0,001$ . Low educational level prevailed insignificant in the 1st group 19 (38.78±6.96%) vs 11 (33.33%) in the 2nd group. Economically disadvantaged groups were most prevalent in both samples: 41 (83.67%) in the 1st group vs 26 (78.78%) in the 2nd group; single-civil status prevailed in the 2nd group 18 (54.54%) vs 12 (24.49±6.14%) in the 1st group. Tobacco smokers were two third of the patients: 38 (77.55%) in the 1st group and 24 (72.72%) in the 2nd group. Alcohol abusers were 12 (24.49%) in the 1st group and 4 (12.12%) in the 2nd group. Lack of health insurance was revealed at 32 (65.31%) cases in the 1st group and 20 (60.61%) patients in the 2nd group.

Assessing the type of household was revealed bad conditions in both groups: bad state private apartment owned 24 (48.98%) in the 1st group and 11 (33.33%) cases in 2nd group and old house in bad state 8 (16.32%) in the 1st group and 7 (21.21%) in 2nd group.