

**Conclusion:** Endothelial dysfunction is common in patients with systemic autoimmune diseases and is associated with traditional cardiovascular risk factors, more significant are, level of LDL in 11 (73,3%) and hypertension in 9 (60%). Among non-traditional risk factors we note the role CRP level in 7 (46.6%) and abnormality of ankle-brachial index - in 6 (40%) that correlates with the duration and activity of disease.

**Keywords:** Endothelial dysfunction, systemic autoimmune diseases, cardiovascular risk factors markers of endothelial dysfunction.

## **114. CORRELATIONS BETWEEN GASTROESOPHAGEAL REFLUX DISEASE AND OBSTRUCTIVE SLEEP APNEA**

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**Introduction.** Obstructive sleep apnea (OSA), also referred to as obstructive sleep apnea-hypopnea—is a sleep disorder that involves cessation or significant decrease in airflow in the presence of breathing effort and is characterized by recurrent episodes of upper airway collapse during sleep. The negative intrathoracic pressure presented in apnea leads to gastroesophageal reflux.

Gastroesophageal reflux disease (GERD) occurs when the amount of gastric juice that refluxes into the esophagus exceeds the normal limit, causing symptoms with or without associated esophageal mucosal injury.

**Objective.** My objective is to make correlations between OSA and GERD in a group of Romanian and French patients with OSA and GERD symptoms.

**Materials, methods.** I studied 100 patients, 44 women and 56 men. The diagnosis of OSA was established by overnight polysomnography. The severity of OSA was estimated by IAH (apnea-hypopnea index). To evaluate GERD symptoms I used GERD questionnaire. Other parameters that were observed were the age, sex, alcohol consumption (g/day), body mass index (BMI), day somnolence expressed by Epworth scale and the activity by Dijon scale.

The statistics were made in Excel 2016 and SPSSv.20. The correlations were interpreted with the Pearson index (r).

**Results** In the studied group were 44 women and 56 men.

The average age was 52,32 years, average IAH for Romanian group was 32.56/h, average Epworth score for the whole group was 8.85 points, the average BMI = 29,4 kg/ m<sup>2</sup> (34,03 for Romanians), the average GERDQ score was 9,3 points and the average Dijon score was 12.3 points.

The correlation between GERDQ and IAH was significantly positive with  $r = 0.35$ .

IAH was strongly correlated with BMI ( $r = 0.525$ ).

GERDQ has strong correlations with BMI for Romanians but not for French patients ( $r = 0.45$  vs.  $r = -0.21$ ). The most powerful positive correlation was between GERDQ and the alcohol consumption ( $r = 0.428$ ) especially for the Romanian patients.

Epworth was correlated with BMI for the whole group ( $r = 0,3$ ) and with the age ( $r = 0.34$ ), especially for the French group. ( $r = 0.65$ )

Also GERDQ and Epworth scale were negatively correlated with Dijon scale.

**DISCUSSIONS.** Researchers in North Carolina conducted a study in 181 patients with sleep apnea and nighttime GERD symptoms in 2003 and the conclusion was that the treatment with nCPAP decreased the frequency of nocturnal GERD by 48%. Also there are studies suggesting that the treatment with IPP for GERD decreases the number of apneas.

### **Conclusions**

1. Obesity is a main risk factor for OSA and GERD.
2. Men present more severe GERD and OSA than women for the Romanian group.
3. GERD is more severe at the Romanian patients who drink more alcohol.
4. GERD is more severe if the patients have more severe OSA.

**Key words.** GERD, OSA, Pearson, BMI

## **115. CLOSTRIDIUM DIFFICILE INFECTION IN PATIENTS WITH INFLAMMATORY BOWEL DISEASE: RISK FACTORS**

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**Introduction.** Recent epidemiologic studies have shown that patients with inflammatory bowel disease (IBD), ulcerative colitis (UC) or Crohn's disease (CD) are at increased susceptibility Clostridium difficile infection (CDI) compared with the general population. The objectives of this study were to assess the incidence and risk factors for CDI in UC patients in a tertiary center from North-Eastern Romania.

**Material & Methods.** Data of all UC and CD patients admitted at the Institute of Gastroenterology and Hepatology, Iasi, Romania between January 2014 and December 2014 were analyzed. In patients with concomitant CDI, risk factors for CDI were identified.

**Results.** A total of 56 UC and 45 CD patients were included in this study, among whom 7 with UC and 5 with CD were identified as having a concomitant CDI. The incidence of CDI in UC patients was 12.5 %, and 11.1% in CD patients. Most of the patients with UC included in the study were men (78.5%) and had active left side colitis. On univariate analysis, age > 60 years (OR = 2.76; CI=1.45-29.6,  $p = 0.023$ ) and hemoglobin < 10 mg/dl (OR = 1.93; CI=1.19-18.5,  $p = 0.043$ ;) were Associated