

fetal distress characterized by increased heart rate, exacerbate or reduced fetal movements – in 37 cases (37.8%) and perinatal death – in 4 cases (4.1%). Therefore, perinatal mortality was 4.08%.

Depending on the clinical and laboratory results, diagnosis of severe preeclampsia was established in 71 cases, the 27 others being mild. Among women who gave birth per vias naturalis in 11 women labor began spontaneously, in 6 cases was performed amniotomy. Epidural anesthesia was performed in 58 (71.6%), 23 cases (28.3%) being under general anesthesia (the ratio 3: 1).

Conclusion: This study showed that preeclampsia is Associated with an increased risk of maternal and fetal morbidity. Prematurity, intrauterine growth restriction have to be anticipated and dealt with in preeclampsia. A good neonatal intensive care unit will help improve neonatal outcomes.

Key Words: preeclampsia, fetal and maternal morbidity, complications in pregnancy.

142. TUMORS OF PELVIC BONES

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Introduction: Bibliographic analysis of data confirms that incidence of tumor of pelvic bones is on the increase and remains a difficult and current oncology. The epidemiological survey, clinical and morphological research and surgical treatment of tumors of pelvic bones increases the vigilance.

Materials and Methods: To realize the purpose were subjected retrospective review the medical records of 53 patients treated in Oncology Institute in the department Musculoskeletal tumors and tissues tumors during 2011-2015. All patients were treated surgically. Postoperative material was taken for histological examination.

Discussion results: The most tumors pelvic bones tumors group were assessed as malignant (45.28%), the first being chondrosarcoma, (35.84%) are benign and (18.86%) pseudotumoral injuries. From the benign tumors chondroma is on first place, and from the pseudotumors prevails processes fibrous dysplasia of the coccygienne vertebrae. Report men:women in the group of patients with bone tumors of the pelvis is 1.4:1. In most cases affected was the age between 40-60 years. Depending on the location of the tumor process more frequently affects the body and the right wing of iliac bone, pubic bone and vertebrae coccygea. Ischial bone is rarely involved. In patients with benign tumors and pseudotumoral lesions commonly was biopsied and marginal resection of iliac bone. In 7 cases after removing tumors pelvic bones were used preserved allografts for substitution of the defect.

Conclusion: Between malignant tumors of pelvic bones the highest incidence has primary chondrosarcoma and metastasis without primary outbreak found. In most cases the neoplastic process involving pelvic bone and vertebrae as coccygienne. The pubic bone and bone sciatic are affected in unique cases. The surgery for tumors of the pelvis bone involve defect filling with allograft preserved. It is necessary to implement new methods of treatment with a view to improve the quality of treatment in tumors of the pelvic bones.

Key Words: tumors, pelvic bones, allograft.

143. DISTINCTIVE FEATURES OF A GUN SHOT THORAC OABDOMINAL INJURY IN TANGENTIAL WOUNDING

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Introduction: Thoracoabdominal injuries are the most serious injuries at the war or peace time, representing one of the most difficult problems of emergency surgery. Difficulty of the diagnosis, a significant number of tactical and diagnostic errors and complications in health care characterize them. The so-called tangential wounds are when there is a large destruction of bone structures, and internal organs, notwithstanding the fact that the wound channel extends longitudinally in the soft tissue of the chest and abdominal wall without damage to the diaphragm due to the high kinetic energy of the wounding element. They occur gunshot thoracoabdominal wounding.

Materials and methods: The analysis of 49 clinical cases of injuries in the area of anti-terrorist operation in eastern Ukraine, who were treated at the Military-medical clinical center of the central region. The diagnosis of thoracoabdominal injury was confirmed radiographically and intraoperatively.

Discussion results: All analyzed injuries related to severe group. The shape of the wound channel was observed: through injury in 20 (48.8%), blind in 24 (49%) and tangential in 5 (10.2%) patients. In all cases the tangential wounds in the chest and abdomen were deep linear wounds. There was not a violation of the integrity of the parietal pleura and peritoneum therefore, these injuries were non-penetrating. The inlet of the wound channel in 21 (42.8%) case was in the abdominal wall (abdominothoracal injured). Depending on the dominant pathological process in injuries surgery began with the chest in 4 (8.1%) or abdominal cavity in 45 (91.9%) cases. Injuries of abdominal organs was observed in all the wounded with thoracoabdominal trauma, including isolated damage, found in 15 (30.6%), combined - in 34 cases, the damage to two organs of the abdominal cavity in 23 (46.9%) patients, three - in 9 (18.4%), four - in 2 (4.1%).

Complications in thoracoabdominal wounds were in 34% of cases, which is twice greater than when isolated thoracic injuries had been observed. The mortality rate during thoracoabdominal injuries was 16.3%, whereas in isolated injuries it was about 5%.

Conclusion: Thoracoabdominal injuries are serious injuries with high morbidity and mortality. A special place in the structure of thoracoabdominal trauma occupies tangential wounds, which despite the fact that they are non-invasive require a rapid diagnosis and an active surgical tactics.

Key Words: thoracoabdominal injuries, tangential wounds, surgery, gunshot.