

tachycardia with first degree atrioventricular block, second degree atrioventricular block type I and type II, associated with left ventricular dysfunction - we need to consider: a pacemaker malfunction, congestive heart failure or an acute coronary syndrome (cardiology consult); Neurological causes – a possible transient ischemic attack (neurological consult); Orthostatic hypotension as a complication of type 2 diabetes mellitus and/or possibly the effect of antihypertensive medication – the patient is suffering from grade 3 hypertension) (diabetology consult); vertebrobasilar insufficiency secondary to spondyloarthropathy (rheumatology consult); Treatment and lifestyle modification non-compliance, frequent at the geriatric patient (a thorough anamnesis).

Results: The clinical exam, paraclinical tests and interdisciplinary consults established that the treatment and lifestyle modification non-compliance led to an acute decompensated heart failure.

Discussions: The particularity of this case resides in the extensive investigations needed to establish the cause of a syncopal episode in a geriatric patient with multiple comorbid conditions. Medical advice and supervision should be the hallmark of her future life. This case presentation wishes to emphasize the need to open doctor-patient relationships, efficient and complete anamnesis, and also the importance of therapy adhesion.

Keywords: geriatric patient, syncope, treatment non-compliance.

21. RISK FACTORS OF TEENAGE OBESITY

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Introduction: Today, nearly a third of youths are overweight or obese, more than 23 million children and teenagers. Since 1980, the obesity rate has more than doubled (from 5.0% to 12.4%) among children aged 2-5 years, almost tripled (6.5% to 17%) among children aged 6-11, and more than tripled (from 5.0% to 17.6%) in adolescents aged 12-19 years both in developed countries and in the developing ones. According to WHO, the prevalence of teenage obesity and overweight, in Romania is 10.6% for girls and 18.6% for boys. According to national data, in Republic of Moldova, in 2012, there were 3171 cases of obesity in children aged 0-18 years, of which 969 new cases. Incidence is 13.16 and prevalence is 43.06 cases per 10,000 population. It was necessary to study this problem in our region. So the purpose is to study risk factors of obesity in adolescents from Pedagogical College "Vasile Lupu" in Orhei and Colleges of Medicine in Orhei and Chisinau.

Materials and methods: The study group consisting of 250 adolescents from Pedagogical College "Vasile Lupu" in Orhei and Colleges of Medicine in Orhei and Chisinau was divided into 3 groups depending on BMI and sex. For obesity body mass index (BMI) have to be at or above the 95th percentile for gender and age, while for overweight at or above the 85th but below the 95th percentile and for normal weight BMI from 5th to 85th percentile. It was a clinic-statistical retrospective study and it was conducted for the period of 2013-2014. There were developed two questionnaires, one for teens and one for parents, which included questions on anamnesis, food investigation, the investigation of physical activity and harmful habits. BMI was calculated using BMI Calculator Excel. Statistical analysis using t-Student test. CI = 95% if $p < 0.05$ and OR.

Results: In the study group of 250 adolescents aged 15-18 years from the Pedagogical College "Vasile Lupu" and College of Medicine in Orhei and Chisinau, the frequency was 14.4% overweight and obesity frequency was 17.6%. Overweight was presented mainly in girls 10.4% and obesity cases in boys 11.2%. At the age of 17 to 18 years there has been a progressive increase in body mass as both girls and boys. The analysis of results and the identification of risk factors was performed using the values obtained for $p < 0.05$ and $OR > 1$.

Conclusion: Risk factors for obesity in teenagers have been identified: the presence of obesity in first-degree relatives, the small number (<2) meals per day, eating fast food, lack of physical activity, time spent watching TV and not respecting the sleep-wake.

Keywords: Teenagers, obesity, risk factors