77. ACUTE HEPATITES C IN PREGNANCY-A CASE REPORT

Ciobanu Elena

Academic advicer: **Tofan-Scutaru Liudmila**, M.D., State Medical and Pharmaceutical University "Nicolae Testemiţanu", Chisinau, Republic of Moldova

Introduction: Expressed cytolytic syndrome in quarter 2-3 of pregnancy may create great difficulties in diagnostic and therapeutic approaches. Potential prognostic risk increases the importance of detailed differential diagnosis and adequate therapeutic conduct.

Material and methods: A case report of acute hepatitis C, with onset in the 22nd week of gestation, that put issues of early diagnostic and management. 34 years old woman has been addressed to the SCR, Chisinau with the diagnosis of reference: intrahepatic cholestasis of pregnancy; chronic hepatitis of unidentified etiology, high activity. Fourth pregnancy with normal obstetrical history.

Results: The only accuse was persistent cutaneous pruritus which disrupts sleep. Gravidarum dermatitis was suspected before the hospitalization in the department of infectious diseases. In the referral: ALT -526.8 U/l, AST -482.7 U/l, total bilirubin -30.5 mmol/l, conjugated bilirubin -23.2 mmol/l, the viral hepatitis markers was negative. The patient was hospitalized in the hepatology department, where ALT was 426.7 U/l, AST -307.1 U/l, total bilirubin -24.4 mmol/l, conjugated bilirubin -15.1 mmol/l, biliar acids -6.2 mmol/l, aldolase -12 U/l. Cutaneous pruritus intensity decreased after beginning the treatment with ursodeoxycholic acid. Acute hepatitis C was established after repeated tests for viral hepatitis markers.

Conclusion: Etiology of liver disease in pregnancy may present diagnostic difficulties. It's very important to know the features of possible liver pathologies caused by pregnancy and to remember about the possible association with pregnancy independent conditions.

Keywords: Acute viral hepatitis C, pregnancy, pruritus

78. THE ROLE OF CURB-65 SCORE IN EVOLUTION OF COMMUNITY-ACQUIRED PNEUMONIA Dulgher Maxim

Academic adviser: Gavriliuc Alexandru, Assistant Professor, State Medical and Pharmaceutical University "Nicolae Testemiţanu", Chişinău, Republic of Moldova

Introduction: Community-acquired pneumonia (CAP) is a cause of considerable morbidity and mortality in adults, leading to high rates of hospitalizations, especially in the elderly. The 6-point CURB-65 score, one point for each of: Confusion, Urea >7mmol/l, Respiratory rate \geq 30/min, low systolic (\leq 90 mmHg) or diastolic (\leq 60 mmHg) Blood pressure, age \geq 65 years, enabled patients to be stratified according to increasing risk of mortality into different management groups. There are 3 groups: 0-1 points—low severity, these patients may be suitable for treatment at home, 2 points — moderate severity, short-stay inpatient treatment or hospital-supervised outpatient treatment, and \geq 3 points—high-severity, inpatient treatment, and for the patients with score 4 or 5 treatment in ICU Purpose and objectives: To assess the usefulness of the CURB-65 score in the management of CAP, and to determine the outcome in relation to the degree of severity using CURB-65.

Materials and Methods: 90 patients admitted to the Institute of Phthisiopneumology "Chiril Draganiuc" with CAP were studied retrospectively. The study group was formed by 43 (47.8%) women and 47 (52.2%) men. The average age was 58.89 ± 18.45 (95 % CI: 55.02 - 58.99) years. The study is based on the analysis of the CURB-65 score to predict the mortality and the need for hospital or ICU admission of patients with CAP, correlated with local criteria for hospital admission and intensive care unit (ICU) admission.

Results: 17 patients (18.9%) were with CURB-65 score 0, 30(33.3%) with score 1, 31 (34.4%) with score 2, 8(8.9%) with score 3, 3(3.3%) with score 4 and 1(1.1%) with score 5. The ICU admission rate, based on presence of 2 or more criteria for ICU admission from the national guideline for CAP was 30% (27 patients), 6 of whom (22.2 %) required mechanical ventilation. 7 patients (7.8%) died, one of them had the CURB-65 score of 2, 3 - score 3, 2 - score 4, and 1 - score 5.

Conclusion: Use of CURB-65 score alone in management of patients with CAP may underestimate the real severity of illness – only 43(47.8%) of admitted patients have CURB-65 \geq 2, which is the criteria for hospital admission. Based on CURB-65 \geq 3, high-severity pneumonia was in 12 of cases, which represents only 44% of patients with high-severity pneumonia defined by using criteria (2 or more) for ICU admission from the national guideline for CAP. According to this, clinical judgment is essential when deciding on the management of all patients with CAP.

Keywords: CURB-65, community-acquired pneumonia, severity, management

79. STIGMA AND DISCRIMINATION OF PEOPLE WITH MENTAL HEALTH ISSUES AMONG ADOLESCENTS

Esanu Andrei, Diana Ungureanu

Academic Advisers: Deliv Inga, M.D., Ph.D., Associate professor, Chihai Jana M.D., Ph.D., Associate Professor, State Medical and Pharmaceutical University "N. Testemitanu", Chisinău, Republic of Moldova.

Introduction: According to the National Program of Mental Health for 2012-2016 in Republic of Moldova the process of deinstitutionalization, decentralization and reorganization of the mental health system is enhanced, in order to bring mental health services to the community and to facilitate inclusion of people with mental disabilities in society. Based on examples from countries with high socio-economic level the deinstitutionalization process began much earlier, about 40-50 years ago, and one of the major problems which made this process more difficult was the high stigma and discrimination against them. However in Moldova stigma and discrimination against people with mental disabilities in society is poorly studied.

Purpose and objectives: To evaluate stigma and discrimination against people with mental disabilities among adolescents, to determine the causes and conditions in which this stigma and discrimination occur among adolescents.

Materials and methods: The study is made in 3 schools from Chişinău, Bălți and Orhei cities, in each school were included 25 students, total 75 adolescents. To evaluate stigma among adolescents the AQ-8-C test was administered, elaborated by Corrigan (2005). To evaluate discrimination the adolescents were interviewed using semi-structured questionnaire.

Results: In the study was determined that the low level of acceptance towards the people with mental health issues is largely determined by the prejudices in society regarding these persons. Therefore, 57 (from 75) of participants consider that children with mental disorders should be educated in special schools, 46 believe that people with mental health issues are unable to work, 44 think that these persons are dangerous and should be isolated, 21 consider that people with disabilities may not have family. Stereotypes frequently found in our society towards people with mental health problems are – debilitated, unable to work, dangerous, to be isolated, may not have family, sinful, poor.

Conclusion: In Republic of Moldova were performed very few studies with reference to stigma against people with mental health problem, however our study shows that level of stigma is very high among adolescents -76% of interviewed adolescents don't want to study together with mentally ill people; 59% believe that these persons are dangerous and should be isolated; 28% think that society has to prohibit these persons to create families. To have a genuine inclusion of persons suffering from mental disorders in the community, the society needs to be educated in order to reduce stigma and discrimination against these persons.

Keywords: Stigma, Discrimination, Mental Health, Disabilities, Adolescents