

Affective Reactions in Oncologic Patient

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The patients with cancer should be considered as patients, who are located under the ascendancy of strong stress. The diagnosis of malignant process is combined with the especially strong emotional experiences, which destroy the most important stereotypes of behaviour, manufactured in the course of the life. The study of the reaction of patients on the conducted therapy, the determination of a change in mental status was the purpose of our work. In the department of conservative rehabilitation with the day hospital of oncology policlinics they passed the treatment of 55 patients (13 of the department of mammology, 27 - urology even 15- gastrology). The average level of anxiety, determined according to the scale HAM- A, composed 23,7+/-2,1 (from that moderated to that expressed). The average level of depression, determined according to the scale HAM- D, composed 31,6+/-3, 2. Treatment with the use of different psychotropic preparations and psychotherapeutic sessions was implicated. The shown complex treatment makes it possible to improve psychological state in 47 (85,4%) of patients, who pass treatment (8 patients (61,5%) with breast cancer, 26 (96,3%) urological cancer patients, and 13 people (86,7%) with stomach cancer). In these patients the decrease of complaints establishes, patients become calmer, psychological reactions more adequate, mental tension is reduced, appears confidence in the conducted treatment. The average level of anxiety HAM- A, composed 12,4+/-1,8 . The average level of depression HAM- D, composed 11,3+/-2, 2. Naturally, any treatment with the use of different preparations and any psychotherapeutic session cannot completely free patient from the thoughts and reactions; however, they can and must limit the intensity of emotion, contribute to the development of the psychotherapeutic program of protection, which would lead to the social adaptation of cancer patient.

An Audit of Compliance with National/Local Guidelines Staff Involved in Intrathecal Chemotherapy

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Vinca alkaloids, ordinarily administered intravenously (IV), if administered via intrathecal chemotherapy (ITC) almost certainly causes fatal myoencephalopathy. This audit measured adherence to national and Trust guidelines regarding safe prescription, dispensing, issuing, transporting and administration of ITC. The objective was to assess whether only appropriately trained staff on the medical, pharmacy and nursing registers were involved at every stage of ITC delivery. It also sought to recommend changes for better practise. Data on staff involved was obtained from prescription sheets in patient notes and pharmacy copies. Additionally departmental registers and training certification forms were scrutinized. In total 11 patients received between them 59 ITC prescriptions. Only 83.1% of prescriptions were filed and completed. 10.2% were not filed whereas 6.7% were incompletely filled. Nevertheless whenever a staff name was filled in prescriptions, 100% were on the register. The registers show that, apart from 1 new doctor who had been in post less than a year but who had received appropriate training in this Trust, all registered staff had had annual competence reviews. Commendably, all 17 ITC prescriptions which were administered on the same day as an IV prescription, 2 of which were vinca alkaloids, were only issued from pharmacy after receiving proof that the IV prescription had been infused, demonstrating best practise. The audit

demonstrates better filing and documentation is imperative so a complete paper trail is available if mishaps happen. The audit recommends patient involvement in pre-ITC safety checks, auditing prescription filing, and increased awareness during ITC training of complete documentation.

Anticoagulant Therapy in Elderly Patients

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The pathology of recent years is dominated by lung thromboembolism, the more worrying factor as the algorithms for prophylaxis and treatment of diseases with high embolic risk are properly applied in medical practice and perform only of 75% antithrombotic protection. The aim is to present the benefits and risks of anticoagulant treatment in elderly patients with cardiovascular disease. Anticoagulant treatment is at least as important as for the other age groups because elderly patients have combinations of cardiovascular diseases and comorbidity which have anticoagulant treatment indications. We performed a retrospective study on 781 patients over 65 years, admitted between January 1, 2009 and March 31, 2010 in Medical Clinic IV, Department of Geriatrics. Statistical study followed their distribution by age, average residence, gender, cardiovascular diseases, anti-coagulant treatment indication and methods of implementation. From 781 patients, 758 cases (97%) were hospitalized for cardiovascular disease of these, 545 (72%) received anticoagulant therapy, 152 (20%) received also antiplatelet and 61 (8%) did not receive any of these forms. Adverse effects of anticoagulation therapy were recorded at 1.5% of patients. All these patients were under chronic anticoagulation therapy with antivitamin K and required permanent or temporary interruption. Anticoagulant therapy in the elderly is under-utilized due to fear of unwanted side effects taking into consideration the problems of monitoring chronic treatment with K antivitamin at home.

Anxiety and Depression Symptoms in Patients with Diabetes Type 2

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The aim of the study is to find out the frequency of emotional dissociations, and determine the rate of evidence of changes at psychological state in dependence of sex, age, duration of diabetes, frequency of glycaemic control, body mass index. Materials and methods: 60 patients with diabetes type 2 have been investigated, which included 29 women and 31 men at the age from 41 to 70 (the average age is 55 years; SD 5.88) with the duration of illness from 2 up to 18 years (the average is 7.8 years; SD 4.05) in conditions of Department of Endocrinology, Municipal Clinic Hospital "Sf. Treime", Republic of Moldova. It was used the Hospital Anxiety and Depression Scale (HADS). Based on data of HADS, the high levels of anxiety (mean 8.73 ± 0.39 ; SD 3.08) and depressing symptoms (mean 6.45 ± 0.39 ; SD 3.06) were revealed in patients with diabetes type 2; and the true correlation $r = 0.97$ depression = $2.8711 + 0.4098 * \text{anxiety}$; $p < 0.05$) was found out. Clinically evident features (HADS score ≥ 11) of anxiety and depression were 28% and 11% correspondingly. Subclinical forms of anxiety and depression (HADS score 8-10) were 42% and 25% correspondingly. Such as anxiety, depression was met more often in women. It was shown that the frequency of depression is picking up with the age in men but in women these regularities were not found out. With the raising of duration of disease significantly goes up frequency of anxiety ($p < 0.05$) and depression ($p < 0.05$) in men. It has been found out much higher level of anxiety ($p < 0.01$), but not