

of heart failure. The objective of this work is to present a method for optimizing the diagnosis of HF with irrelevant clinical features or associated with other diseases, clinical masking HF. According to international statistics, the determination of BNP and NT-proBNP proved to be useful in diagnosis of left HF in patients with suspected HF and in the differential diagnosis of severe dyspnea of cardiac or respiratory etiology. The natriuretic peptides (ANP, BNP, CNP, DNP) constitute a family of cardiac polypeptides which presents three main proprieties: natriuretic, diuretic and vasodilating. BNP is a natriuretic hormone released primarily by the myocardial cells from the left ventricle (LV) in response to increased volume expansion and wall stress. An elevated BNP or NT-proBNP level is a marker of increased LV filling pressure and LV dysfunction. BNP or NT-proBNP determination, has both diagnostic (BNP - normal: 100-500pg/ml; NT-proBNP – normal: <75 years - <125 pg / ml, > 75 years - 450 pg / ml) and predicting value in the evolution of HF. Serum level of BNP and NT-proBNP is age-dependent, it increases in cases of renal failure, atrial fibrillation and it decreases in obesity. Diagnostic thresholds of BNP and NT-proBNP are different in case of presence of these factors.

Venous Thromboembolism - A Never Ending Story

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The marking richness of venous thromboembolism in the current medicine, within all the medical and surgical specialities, represents a first characteristic of this pathology, demonstrable through statistics, but unfortunately, discouraging regarding the survival of pulmonary embolism. The dimension of the theme incites to its research, through the amplitude of the issue, of the different pathology generically reunited under the recently adopted name of venous thromboembolism, both on the national and on the international plan, on the other part it discourages, because from many points of view there are no final solutions in the field of medical research regarding this disorder. At the world level, in each year this disease affects a number of over 5 million people. In Europe, the deaths caused by thromboembolic events are 10 times more than those through traffic accidents, and 100 time more than those through AIDS. According to the data, 30 % of the patients who had a thromboembolic accident will die in the first month after. In september 2008, European Heart Journal published Guidelines on the diagnosis and management of acute pulmonary embolism - The task Force for the Diagnosis and Management of Acute Pulmonary Embolism of the European Society of Cardiology, paper that demonstrates the researchers' interest regarding the theme. Venous thromboembolism has been described as the most preventable disease in the hospital, in internal medicine clinics, oncology clinics, also in general surgery, obstetrics and gynecology clinics and orthopaedic and traumatology clinics and also the most preventable disease. Thus, mortality could be reduced by prompt diagnosis, early prognostic and more intensive treatment in patients with adverse prognostic despite the currently available evidence. It is need a multidisciplinary diagnostic and treatment approach. We will present to you results of a multidisciplinary study focused on venous thromboembolism in patients admitted during 12 month, to the Emergency Room, to the Ist Medical Cardiology Clinic, to Oncology Clinic in “St Spiridon” Hospital Iasi, to the Ist Obstetrics and Gynecology Clinic “Cuza Voda” Hospital, Orthopaedic and Traumatology Clinicin “St Ioan” Hospital Iasi. The most important application of our study is to save the patient life, with our hope to improve the knowledges in this scientific field.