

Endometriosis is a mystery tour as it requires decision making at every stage by the physician and the patient. Endometriosis still stand as one of the most-investigated disorders in gynecology. So is one of the highest priorities for research.

OPINIONS OF YOUNG PEOPLE ABOUT THE ADDRESSABILITY TO PRIMARY MEDICAL CARE AND TO EMERGENCY MEDICAL CARE

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Introduction: The state of health of the young influences directly on the state of health of the next generations. That's why we're mentioning that at this particular group of people, the indicators of addressability after medical prophylactic examinations are low.

Effects of low addressability:

- Irrational expenditures of state budget
- Failure of complete and effective monitoring of the population's health.
- Failure of early diagnosis of many diseases.
- Patient's address to the doctor at late stages of the disease, when the treatment requires great expenses.
- In this way increases the period of incapacity, disability, mortality, etc.

Skipping doctor's appointment is an important medical and economic problem. It has been noticed that adolescents have a higher risk of skipping scheduled consultations. The present study aims to characterize the missed appointments in a multidisciplinary clinic. Moldova has the experience of 13 Friendly Health for Young people Clinics (FHYC) where young people can receive anonymous consultations with multi profile doctors.

Methods: There has been undergone an anonymous survey among different age groups of adolescents. Data from 2011 has been used, gathered from 100 questioned teenagers from the Lyceum of "Mihail Berezschi" from the 16-18 age group, and 100 students in the 3rd/4th year from the 21 - 24 age group. The purpose of questioning was to identify the difficulties encountered when visiting different specialists and the reasons why the appointments were missed.

Results: There were noted the following visits from both age groups, at FHYC: dermatologist (52.7%), gynaecologist / urologist (21.4%), endocrinologist (14.7%). In addition to these, the number of skipped appointments in the first group (21-24 ages) was of 27.7%, while in the second group (16-18 ages) of 21.2%. There was noticed difference according to gender. Girls missed visits more frequently than boys (32.3% compared to 23.4%, $p < 0,001$). Besides, in these age groups the number of visits to the doctors listed above was 3.5 times higher in FYC compared to multidisciplinary clinics. The conducted investigation has determined that a substantial proportion of young people don't address to standard schematic specialists after the prophylactic examination specialists (21% in group 1 and 28% in group 2). The most required specialists are: dermatologist (particularly for people of 16-18 years), gynaecologist (girls of 21-24 years), psychologist, and endocrinologist. There is the need to introduce in Primary Medical Assistance the indicator of performance "Surveillance of the health of the young people through prophylactic examinations on Primary Medical Assistance level" and "Addressability for the service of Urgency Medical Assistance of the young".

The Friendly Health for Young people Centre (FHYC) can raise the level of the addressability among young people index. Therefore, the addressability to the dermatologist, gynaecologist, and urologist is 2-2.5 times higher in FHYC than in FMC. The FHYC is financially supported by local public administration and provides such services in different cities of the republic.

Conclusions: The level of attendance shows the dependence of teenagers according to sex, age and receiving specialist. Attention to such factors is one way of dealing with skipping appointments, which can provide better service to young people. The development of FHYC can significantly affect the attitudes of adolescents to healthy lifestyle and improve the attendance at medical institutions. The European experience shows that the introduction of taxes for missed visits will not significantly affect the attendance in these age groups.

Key words: young persons, modern style of life, addressability, emergency medical care, primary medical care.

THE SURVEILLANCE STUDY OF ANTIBIOTIC RESISTANCE LEVEL FOR THE *STREPTOCOCCUS PNEUMONIAE* AND *STREPTOCOCCUS PYOGENES* STRAINS

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Introduction: The antibiotic resistance, currently, is one of the most pressing health care problems. On April 7, 2011 WHO held The World Health Day, spent under the title “Antibiotic resistance: No action today – no cure tomorrow.” As prevention and control measures in Europe, The European Antimicrobial Resistance Surveillance System (EARSS) is running, which investigates and takes out the level of resistant strains of dangerous pathogens.

Aim: In our study, we conducted a research by the EARSS model for 2 pathogens most often involved in respiratory infections in Moldova: *Streptococcus pneumoniae* and *Streptococcus pyogenes*.

Methods: The researches have been performed at the National Centre for Public Health, Epidemiology Centre for extremely dangerous diseases, Respiratory diseases department. The results of approximately 400 antibiograms, for the 2009-2010 years, were processed.

Results: The incidence of pneumococcal and group A β -hemolytic streptococci infections was estimated among the population of Moldova. The rate of resistant strains of these pathogens to seven antibiotics most commonly used to treat respiratory infections is the following:

Str. pneumoniae: to amoxicillin – 11,82%; to cefuroxime – 21,43%; to ceftriaxone – 4,76%; to ciprofloxacin – 4,35%; to erythromycin – 13,95%; to clarithromycin – 9,52% and to azithromycin – 17,02%.

Str. pyogenes: to amoxicillin – 11,49%; to cefuroxime – 5,26%; to ceftriaxone – 2,56%; to ciprofloxacin – 2,22%; to erythromycin – 16,46%; to clarithromycin – 17,95% and to azithromycin – 20,51%.

Conclusions: It was updated the level of bacterial resistance for *Str. pneumoniae* and *Str. pyogenes* to the antibacterial drugs used in the respiratory infections therapy: amoxicillin, cefuroxime, ceftriaxone, ciprofloxacin, erythromycin, clarithromycin and azithromycin.

Keywords: bacterial resistance, antibiotics, respiratory diseases, *Str. pneumoniae*, *Str. pyogenes*.