## DANG GUI SHAO YAO SAN (DSS) IN THE TREATMENT OF PRIMARY DYSMENORRHEA Arathy Nair, Lucia Fiser

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Background. Painful cramps in the lower abdomen occurring during menstruation without obvious pelvic organic lesions is known as primary dysmenorrhea. DSS is a traditional Chinese herbal formula consisting of 6 herbs namely Angelica sinensis, Paeonia lacitifora, Ligusticum chuanxiong, Poria cocos, Astractylodes macrocephala and Alisma planta*go-aquatica* in ratio of 3:16:8:4:8:4. **Objective of the study.** To explore scientific research regarding the efficacy, mechanisms and safety of DSS in the treatment of PD. Material and methods. We searched for studies published in electronic databases (PubMed, Cochrane Library, CNKI) over the last years by using search strategy. We included randomized controlled trials and cohort studies that reported the use of DSS for PD. The main efficacy outcome was the relief of menstrual pain intensity quantified by validated pain scales including visual analog scale. Results. There were twenty studies (2000 participants) it resulted that DSS had an adjunct treatment effect on reducing the intensity of menstrual pain compared with placebo or no treatment group with statistically significant difference (Mean difference =2.50, 95 % CI 3.00-2.00, p < 0.001). The DSS group showed a reduced rate of recurrence. Most adverse events are mild and transient, including gastrointestinal symptoms and dizziness. DSS is used for the treatment of PD with anti-inflammatory, antispasmodic, and analgesic effects. The major components of these formula, namely those of Danggui (Angelica sinensis) and Shaoyao (Paeonia lactiflora), can regulate the synthesis of prostaglandins, improve blood flow, and modulate the nervous system, all of which will greatly relieve the pain. Conclusion. Danggui Shaoyao San formula in treatment for primary dysmenorrhea has shown itself to be a safe and effective approach with analgesia, improved quality of life, and a decreased recurrence rate. Keywords: Danggui Shaoyao San, primary dysmenorrhea, Chinese medicine.

## PROGNOSTIC FACTORS IN GUILLAIN BARRE SYNDROME Oswin Roy

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**Background.** Guillain-Barre Syndrome (GBS) is known to be an acute polyneuropathy with huge variability in patient outcomes. It is manifested by a sudden onset of weakness, followed by paralysis of the legs, arms, respiratory muscles, and face. **Objective of the Study.** Identifying prognostic factors that are crucial for predicting patient recovery and guiding treatment strategies. **Material and methods.** This literature review includes data from many different sources like PubMed, JAMA, British Journal of medicine, Revue de Medicine Interne. **Results.** The findings brought forth many key prognostic factors that include age, severity of initial weakness, time to peak disability, and the presence of certain electrophysiological abnormalities. Age and rapid progression to peak disability were associated with poorer outcomes, while early intervention with immunotherapy was linked to improved recovery rates. The theoretical model also highlighted the importance of early diagnosis and tailored therapeutic strategies based on individual prognostic profiles. **Conclusion.** Understanding the prognostic factors in GBS can greatly increase the efficacy of clinical decision-making and management of patients. This theoretical analysis provides a framework for future empirical research and underscores the need for personalized treatment approaches in GBS care. **Keywords:** Guillain Barre Syndrome, Prognosis, Acute polyneuropathy, Electrophysiological abnormalities.