



THE PHENOMENON OF AGEING IN THE REPUBLIC OF MOLDOVA: ITS MEDICAL AND SOCIO-BIOETHICAL DIMENSION

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The rapid aging of the population in the Republic of Moldova is causing profound and ongoing changes in the healthcare system and social structures. The phenomenon of senescence presents increasingly complex medical, social, and bioethical challenges, requiring fair and sustainable public policy responses. The aim of this paper is to analyze aging in the Republic of Moldova, highlighting medical, social, and bioethical aspects, to propose appropriate and effective solutions. The study was conducted through analysis of specialized literature, demographic and health statistical data from 2018–2023, complemented by qualitative and comparative evaluations of public policies on elderly care in the Republic of Moldova. Descriptive, interpretative, and bioethical methods provided thorough understanding. In the year 2023, 21.4% of the population of the Republic of Moldova was over 60. Most of them suffer from chronic diseases, such as hypertension (67%), diabetes mellitus (24%) and cognitive disorders (19%). Access to health services is limited and 38% of the elderly are uninsured. Studies showed that 58% of respondents perceived age discrimination. Important ethical issues include reduced autonomy, social isolation and difficult palliative care decisions, highlighting the urgent need for fair policies and respect for the dignity of older people. The phenomenon of senescence in the Republic of Moldova requires a comprehensive approach integrating medicine, ethics, and social policies. Developing applied ethics adapted to the geriatric context is essential to ensure dignity and equity in the care of elderly people.

COMPARATIVE CHARACTERISTICS OF POSTOPERATIVE DYNAMICS IN THE TREATMENT OF PITUITARY ADENOMAS WITH CAVERNOUS SINUS INVASION

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Pituitary adenomas are the most common hypothalamic-pituitary tumors, accounting for 10% of intracranial neoplasms. Although benign, they can infiltrate the dura mater and destroy the skull base. Extension into the cavernous sinus occurs in 10-15% of cases, and their removal is a difficult task. Analysis of postoperative dynamics generated by surgical approaches (endoscopic transsphenoidal, extended lateral, microscopic, extra-intradural) in the treatment of invasive cavernous sinus tumors. For this comparative analysis, a systematic review of the specialized literature was performed with specific references to the published findings by Sharipov O., Kitano M., Cappabianca P. and Kutin M.A., Snyderman C.H., Gardner P. The selection criteria included clinical trials and relevant specialized journals published between 2000 and 2025. Visual disturbances were common pre-op (standard EETSA: 74.2%, Microscopic Transsphenoidal: 51.4%), with notable improvements post-op (standard EETSA: 61.3%, Microscopic Transsphenoidal: 65.1%). Post-op worsening was higher in the Extra-Intradural (28.6%) and Microscopic Transphenoidal (10.1%) approaches. Hypothalamic/endocrine disturbances predominated pre-op in the Extra-Intradural group (78.6%). Improvements varied, but worsening was higher in the Extra-Intradural (28.6%). Post-op diabetes insipidus was most common in the Extra-Intradural approach (35.7%), compared to the other approaches (2.9% - 10.07%). Meningitis and seizures were rare. Endoscopic approaches favor good visual recovery and a low incidence of major complications with more radical resection. The Extra-Intradural approach, effective for complex cases, involves higher risks of worsening neurological deficits and postoperative complications.