



## **ADOLESCENT ANXIETY – A CONTEMPORARY CHALLENGE FOR MENTAL HEALTH**

**V Cartaleanu, A Cebanu, I Nastas**

**Department of Mental Health, Medical Psychology, and Psychotherapy of the State University of Medicine and Pharmacy Nicolae Testemitanu Chișinău, Moldova**

Adolescence is a critical stage of development, marked by biological, cognitive, and social changes. Anxiety disorders affect approximately 31.9% of adolescents worldwide. The importance of understanding and addressing these issues is the increase in the incidence of cases in recent years. Determining the prevalence, impact and early symptoms in adolescents, for timely intervention, which can prevent progression to more severe forms and long-term consequences. An extensive review of the specialized literature was conducted by evaluating articles from the last 5 years published in internationally recognized medical databases, such as PubMed, NCBI, Medscape, The Journal of Pediatrics, WHO, as well as the Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM-5). The prevalence of anxiety disorders increases significantly after the age of 12, with a peak incidence between 14-17 years. It has a multifactorial etiology: genetic factors (family predisposition); environmental factors (academic stress, family conflicts), excessive use of social media, the COVID-19 pandemic. Common symptoms are: excessive fear, avoidance of social situations, irritability, sleep problems, and difficulty concentrating. Intervention methods include: CBT, SSRIs in moderate/severe cases, education. In the absence of adequate treatment, these symptoms can lead to social isolation and other mental disorders, such as depression. Anxiety is a common mental disorder among adolescents, having a significant impact on their social and emotional functioning. It is essential to address it early, with family support and the inclusion of psychological services in schools, in order to be prevented as early as possible.

## **MANAGEMENT OF SPINAL TUMORS: DECOMPRESSION VS STABILIZATION – RETROSPECTIVE CLINICAL EXPERIENCE**

**C Vizir, V Galearschi, D Ruban, V Timirgaz**

**Department of Neurosurgery of the State University of Medicine and Pharmacy Nicolae Testemitanu, Republic of Moldova**

The management of spinal tumors requires personalized treatment based on neurological status, lesion location, and extent. This retrospective study analyzes the clinical experience of patients with spinal tumors, comparing the effectiveness of decompression and stabilization techniques in their treatment. Analysis of the effectiveness of decompression and stabilization techniques in the management of spinal tumors, clinical outcomes in the period 2020-2023, neurological improvement and spinal stability. The retrospective study included 42 patients diagnosed with spinal tumors (14 primary, 28 metastatic), operated on during 2020–2023, within the INN "Diomid Gherman". Patients were evaluated using the ASIA scale, Karnofsky score and SINS score for tumoral spinal instability. Postoperative surveillance was for a minimum of 6 months. The interventions consisted of: Spinal decompression by laminectomy (n = 30), segmental transpedicular stabilization (n = 35), with or without interbody cage reconstruction (n = 12), vertebroplasty with acrylic cement (n = 7) in selected cases. Obtaining the results: Neurological improvement ( $\geq 1$  ASIA grade) in 71% of cases. Vertebral stability restored in all cases treated with implants. Minor postoperative complications in 4 patients (9.5%): superficial infection, screw migration without neurological deficit, 6-month survival rate: 76% (with postoperative integrated adjuvant oncological therapies). Surgery for spinal tumors should be individualized, combining decompression and stabilization based on neurological status and lesion location. Transpedicular fixation, often with corpectomy or vertebroplasty, is essential for stability. Treatment requires a multidisciplinary approach.