

EPIDEMIOLOGICAL AND CLINICAL ASPECTS OF MALT LYMPHOMAS

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Background. Marginal zone B-cell lymphoma (MALT) is an indolent lymphoma often found in the stomach (35%), linked to infections (*H. pylori*, *C. jejuni*) or autoimmune diseases. It peaks in the 7th–8th decades of life, with slight female predominance. Rising *H. pylori*-negative cases require new treatments.

Objective(s). Evaluation of etiopathogenic correlations, diagnostic methods, and treatment efficacy for MALT lymphomas, focusing on antibacterial eradication and strategies for refractory cases.

Materials and methods. A retrospective analysis of 62 studies from PubMed/Scopus (2015–2023) was conducted, focusing on gastrointestinal MALT lymphomas with data on etiology, treatment, and response. Correlations between infectious agents and treatment response were analyzed using logistic regression, and geographic differences were assessed by the Student's t-test.

Results. The response rate to *Helicobacter pylori* eradication in gastric MALT lymphoma was 78.2% (n=1120 patients). For *H. pylori*-negative MALT lymphomas, radiotherapy achieved a response rate of 85.3% (n=134 patients). Transformation into diffuse large B-cell lymphoma (DLBCL) occurred in 2.1% of cases. The correlation with *Campylobacter jejuni* in intestinal MALT showed an antibiotic response rate of 89% (n=45). Geographic differences in etiology were significant (p<0.05), indicating variability of infectious factors across regions. These results support the importance of personalized therapy adapted to patient characteristics.

Conclusion(s). Eradication therapy remains the main treatment for *H. pylori*-positive gastric MALT lymphoma. *H. pylori*-negative cases require radiotherapy or rituximab. Geographic links to infectious agents show the need for personalized approaches. The efficacy hypothesis of antibiotic treatments is confirmed.

Keywords: MALT lymphoma, *Helicobacter pylori*, radiotherapy, Rituximab

TREATMENT COMPLIANCE AND POTENTIALLY INAPPROPRIATE DRUG PRESCRIBING - IMPORTANT CONCEPTS IN FAMILY MEDICINE ACTIVITY

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Background. Treatment compliance is a complex phenomenon, influenced by factors related to the patient, the treatment, the patient-doctor relationship, and the socioeconomic factors. Therapeutic compliance is achieved when the patient is motivated, the treatment is simple and the doctor provides clear information.

Objective(s). The purpose of this paper is to identify the factors that enhance patient compliance with treatment, and the causes that lead to the inappropriate prescription of medications in general practice.

Materials and methods. The reviewed articles from PubMed, focused on analyzing the factors that influence patient compliance with treatment, as well as the factors associated with inappropriate medication prescribing in general medical practice. The eligibility criteria included articles published within the last 5 years with information relevant to the aim of the review.

Results. The prevalence of potentially inappropriate medication use is an indicator that