

## OBSERVATIONAL STUDY IN OBESE POST-CHOLECYSTECTOMY PATIENTS

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**Background.** Cholecystectomy has been recognized as the most common surgical procedure for gallbladder disease, with an incidence of around 1 million cases worldwide. In 40% of cases, persistent or new digestive symptoms have been reported following surgical removal of the gallbladder including dyspepsia or bloating.

**Objective(s).** The aim was to analyze the frequency and severity of post cholecystectomy syndrome in obese patients and to highlight clinical features and the need for a personalized therapeutic approach.

**Materials and methods.** A retrospective observational study was conducted between 2022–2024, on 40 patients who underwent previously for cholecystectomy. Of these, 20 had a body mass index (BMI)  $\geq 30$ , and other 20 were healthy. Digestive symptoms were assessed using a standardized questionnaire, lab tests, abdominal ultrasound, and detailed nutritional evaluation.

**Results.** Post cholecystectomy syndrome was diagnosed in 55% of obese patients, compared to 30% in those with normal BMI. In 25% of cases, biliary complications such as sphincter of Oddi dysfunction and retained stones were identified. A significant correlation was observed between high-calorie diets, saturated fat intake, and symptom persistence. Dietary modifications and pharmacological treatment led to symptom relief in 85% of cases, though obese patients required longer recovery and stricter nutritional management. These patients also reported a greater impact on daily activities and quality of life, associated with depression and anxiety.

**Conclusion(s).** Obesity was associated with a higher frequency and more severe course of post cholecystectomy syndrome. Identifying nutritional risk factors and tailoring therapy plans were essential for improving symptoms. Early dietary intervention may enhance long-term outcomes and prevent complications.

**Keywords:** postcholecystectomy syndrome, cholecystectomy, obesity, diet

## CORN-INDUCED ANAPHYLAXIS MEDIATED BY LIPID TRANSFER PROTEINS (LTP)

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**Background.** IgE-mediated food allergies are increasing globally. Lipid transfer proteins (LTP), being thermally and digestively stable, frequently cause severe allergic reactions. Corn, with low allergenic potential, has been recognized as a source of LTP (Zea m14) involved in severe systemic reactions.

**Objective(s).** Presentation of a clinical case of severe corn-induced anaphylaxis mediated by LTP, highlighting the importance of correct diagnosis and appropriate management of this rare type of allergy.

**Materials and methods.** 47-year-old patient, admitted to the General Therapy and Allergology Department of Timofei Moșneaga Republican Clinical Hospital. Evaluation included a detailed allergological history. IgE-mediated food allergy diagnosis was supported by multiplex ALEX serology. Anaphylaxis was diagnosed according to EAACI/WAO criteria.