

## SURGICAL TREATMENT OF PATIENTS WITH PARADUODENAL (GROOVE) PANCREATITIS

**GORBUNOV A**

Odessa National Medical University

**Introduction:** Treatment of patients with chronic pancreatitis (CP) remains the most difficult task of pancreatology. Paraduodenal inflammation gave the possibility to diagnose paraduodenal – “groove” - pancreatitis. The aim of the work – to investigate the features of diagnosis and surgical treatment of patients with complicated form of “groove” pancreatitis.

**Material and methods:** The experience of surgical treatment of 71 patients with CP for the last 7 years has been analyzed. 27 patients with inflammatory and necrotic lesions of the pancreatic periampular part – “groove” pancreatitis were retrospectively selected out of them. 24 out of 27 patients with “groove” pancreatitis were underwent to surgical treatment. Pancreatoduodenal resections were performed in 12 patients. Organo-saving operations were performed in 10 cases.

**Results:** The course of the postoperative period was satisfactory in 17 people out of 24 (70.8%). 7 patients developed postoperative complications. 1 patient died. As a result of 24 operations, the mortality rate was 4.17%.

**Conclusions:** Thus, the chronic lesion of the parenchyma of the pancreas of the inflammatory genesis - “groove” pancreatitis - is one of the rare forms of CP which should be differentiated from cancer of the gland. In fact HP and certain types of inflammatory-necrotic lesions of the duodenum.

The correct surgical tactics in case of patients’ treatment with a rare form of CP complication - “groove” of pancreatitis - allows to eliminate pain syndrome and contribute to their recovery.

**Key words:** groove pancreatitis, chronic pancreatitis, surgical treatment, afteroperational syndrome

## CORPI STRĂINI TRAHEOBRONȘICI LA COPII: PROBLEME ANALGEZICE ÎN EXTRAGEREA LOR

**GUDUMAC EVA<sup>1</sup>, BERNIC JANA<sup>1</sup>, NEAMȚU V<sup>1</sup>**

<sup>1</sup>Catedra de chirurgie, ortopedie și anesteziologie pediatrică, Universitatea de Stat de Medicină și Farmacie „Nicolae Testemițanu”, CNȘP de Chirurgie Pediatrică „Academician Natalia Gheorghiu”

**Introducere:** Manevrelor de extragere a corpurilor străini traheobronșici pe cale respiratorie pot produce efecte secundare. Procedura anestezică are scopul de a diminua efectele secundare la extragerea corpurilor străini.

**Materiale și metode:** Am efectuat o statistică prospectivă pe 32 copii cu tabloul clinic de corpi străini traheoesofagieni îngerați. Cazuistica a cuprins copii între 10 luni – 3ani. După o evaluare de 30 min. – 2 ore a datelor clinico-imagistice și de laborator s-a inițiat procedura de extragere a corpurilor străini din căile respiratorii.

**Rezultate:** Copiii inițial au fost supuși anesteziei generale cu Sevorană și O<sub>2</sub> 100 %. Premedicația intravenoasă a inclus Sol. Atropini și Midazolam. Inducția urmată de laringoscopia directă cu vizualizarea căilor respiratorii superioare. Prin pulverizare Sol. Lidocaini 2 % diluată cu Sol. NaCl 0.9 % 1:1 în doze terapeutice admisibile a laringelui, coardelor vocale, a traheii pe fondalul anesteziei generale a creat o stabilitate cardio-vasculară, respiratorie ca rezultat la abolirea reflexelor laringiene și ale traheii. A urmat intubația traheii cu extragerea corpurilor străini din căile respiratorii. Criteriile de urmărire ale anesteziei au fost: pulsul, tensiunea arterială, starea tegumentelor etc.

**Concluzii:** La copiii de vârstă mică rezervele funcționale sunt reduse și riscul complicațiilor la extragerea corpurilor străini din aparatul respirator este mare. După efectuarea procedurii copilul va fi urmărit în serviciul de terapie intensivă.

**Cuvinte cheie:** corpi străini traheobronșici, anestezie, extragere, copii

## FOREIGN TRACHEOBRONCHIC BODIES IN CHILDREN: ANALGETICAL PROBLEMS IN THEIR EXTRACTION

**Introduction:** The maneuvers of foreign tracheobronchial bodies extraction by the airways can produce side effects. The anesthetic procedure aims to diminish the side effects of foreign bodies extraction.

**Material and methods:** We conducted a prospective statistics on 32 children with clinical picture of tracheoesophageal foreign bodies ingested. The cases included children between 10 months and 3 years. After a 30 min. - 2 hours of clinical-imaging and laboratory data evaluation, the procedures for extraction of foreign bodies from the airways were initiated.

**Results:** Children initially underwent general anesthesia with Sevoran and 100% O<sub>2</sub>. Intravenous premedication included Atropini and Midazolam. Induction with Dithyline followed by direct laryngoscopy with upper airways visualization. Spray Sol. Lidocaine 2% diluted with Sol. NaCl 0.9% 1:1 in admissible therapeutic doses for larynx, vocal cords, trachea on the background of general anesthesia created cardiovascular, respiratory stability as a result of abolishing laryngeal and tracheal reflexes. Tracheal intubation by extraction of foreign bodies from the airways followed. The tracking criteria for anesthesia were: pulse, blood pressure, skin condition, etc.

**Conclusions:** In children of young age, functional reserves are reduced and the risk of complications from the extraction of foreign bodies from the respiratory system is high. After the procedure, the child will be followed up in the intensive care unit.

**Key words:** foreign tracheobronchic bodies, anesthesia, removal, children

## TRICOBEOZARUL – PROBLEMĂ FRECVENTĂ ÎN PATOLOGIA PEDIATRICĂ

**GUDUMAC EVA<sup>1</sup>, LIVȘIȚ IRINA<sup>1</sup>, BERNIC JANA<sup>1</sup>**

<sup>1</sup>Catedra de chirurgie, ortopedie și anesteziologie pediatrică, Universitatea de Stat de Medicină și Farmacie „Nicolae Testemițanu”, CNȘP de Chirurgie Pediatrică „Academician Natalia Gheorghiu”