

Conclusions. Acquired experience indicates that initiation of intensive treatment at the initial stage (appropriate thermal shock therapy, septic complications prevention, early surgical restoration of damaged skin) allows achieving positive results in aforementioned surgical pathology.

Key words: burns, tissue damage, surgical treatment

ETHICS AND DEONTOLOGY

385. BIOETHIC APPROACH TO DECISIONAL MANAGEMENT IN PATIENT CARE

Author: **Carolina Frumusache**

Scientific adviser: Ion Banari, PhD, University assistant, Department of philosophy and bioethics
Nicolae Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova

Introduction. The ethical framework of decision-making in palliative care is determined by the applicability of the following bioethical principles: autonomy, benevolence, nonmaleficency and justice. These values need to be mastered to highlight all features of the person involved in decision making: cognitive, affective, social, and spiritual.

Aim of the study. To emphasize the bioethical elements that contribute to the formation of a moral image that involves taking a medical decision regarding pain management.

Materials and methods. Theoretical and bioethical studies have been used, respectively hermeneutics as a main method.

Results. The process of death, suffering and pain become notions directly tangential to the cultural aspects and customs established in a society. As a result the needs for unanimity of medical-biological, ethical, religious and philosophical approaches are particularly clear. The notion of pain in palliative care is not limited only to its somatic component, but extends to a concept of total suffering that includes moral and spiritual one. In this context, a fundamental role is played by the interdisciplinary dialogue of specialists to alleviate the pain in suffering patients.

Conclusions. Involvement of hermeneutics in the palliative act configures the objective of interpreting the patient's condition, in particular to determine how pain relief can be achieved. The reduction of physical pain in terminal patients is possible, in the vast majority of situations, by the use of analgesics, by proper care (care of their mouth, skin, etc.). Physical sufferings before death are not always effectively eliminated by the application of the listed methods. For this they should be accompanied by moral-spiritual counseling. Supporting spiritual counseling for patients in the terminal phase consists of active listening and verbal supportive interventions and clarification of existential themes that arise in the patient. The ethical element that guides the relief of physical suffering is the professional attitude of the team involved in the palliative act in accordance with the conditions for achieving human dignity.

Key words. bioethics, theoretical medicine, palliative act, pain, suffering, quality of life

386. BIOETHIC LANDMARKS IN THE APPROACH OF ENDOCRINE DISORDERS

Author: **Victoria Grecu**

Scientific adviser: Vitalie Ojovanu, PhD, Associate professor, Department of philosophy and bioethics

Nicolae Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova