

Results. After having analyzed the existing medical expertise of vitality service we managed to: develop a new methodology of determining the disability; point out the advantages and disadvantages of the medical expertise of vitality service; set out the bio-psycho-social sample of work incapacity (adults); develop the strategic concept of modernization and efficacy of the medical expertise of vitality service in the Republic of Moldova.

Conclusions. These results will allow us to improve the medical, social and professional rehabilitation services provided to the disabled people for enrolling them in the working field and active social life.

Key words: medical expertise of vitality, disability, work capacity, functional deficiencies, rehabilitation, psychological and pedagogical services

224. OCCUPATIONAL DISEASE RISK FACTORS DETERMINATION IN PRIMARY CARE PHYSICIANS

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Introduction. Millions of people around the world work in unsafe conditions, due to which the number of people affected by the occupational diseases is constantly increasing. Annually about 1,1 million people become victims of the occupational diseases and work accidents, while another 60 million cases are being newly recorded.

Aim of the study. Assessing medical staff from the primary care institutions in the rural areas and developing a set of measures that would ensure a safe working environment for the workforce.

Materials and methods. For setting out the objectives, a comprehensive study was carried out which included: the study of morbidity and the socio-economic and psychological factors of the medical staff. The study group included 387 physicians from the primary health care institutions.

Results. This study helped us reveal what were the main risk factors that the medical workforce was put at, the incidence of each being as follows: tiredness - 36,2%; depression - 32 %; stress - 29,4%; irritability - 15,2%; anxiety - 11,4%. These results helped us establish a new set of measures that would ensure a safer working environment for the staff of the primary care health institutions from Orhei and Hîncești.

Conclusions. This study allowed us to elaborate a new set of measures that will reduce the aforementioned occupational risk factors incidence and will consequently serve as occupational disease prophylaxis in the medical staff from the primary health care institutions.

Key words: health, medical staff, primary care institutions

225. EMIGRATION OF MEDICAL GRADUATES FROM THE REPUBLIC OF MOLDOVA: CAUSES, RISKS AND SOLUTIONS

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Introduction. The shortage of doctors threatens healthcare systems all around the world. The insufficiency of doctors in developed countries like the USA, Canada and the UK and the gradient of working conditions, salary and quality of life between the developing and developed countries represent the driving force for the international migration of medical doctors. This