

Key words: cranial nerves, lymphoma, non-Hodgkin

58. CONVERSION DISORDERS AT PATIENTS WITH MULTIPLE SCLEROSIS

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Introduction. Conversion disorder is a neurological syndrome involving multiple somatic symptoms occurring without an organic cause. Multiple sclerosis is a chronic, demyelinating central nervous system disease characterized by a high degree of disability.

Aim of the study. To determine whether patients with multiple sclerosis exhibit or have a predisposition to conversion disorders.

Materials and methods. We evaluated successively 32 patients with Multiple Sclerosis for 6 months. They completed the following questionnaires: Screening Scale, Nijmegen Vegetative Profile, BECK Depression Questionnaire, Dissociated Disorders DES, Anxiety Spielberger, Somatoform Reactions, and Family Status.

Results. The studied group of the patients is non-homogeneous in terms of gender: 22 females (68.75%), 10 males (31.25%), 23-52 years old, with an average of 38.4 years, primary progressive 53.13%, recurrent remissive 43.75%, secondary progressive 3.2%. Vegetative disorders manifest 70% men and 63.63% women, anxiety 70% men and 77.27% women, depression 50% men and 45.45% women, dissociation disorders 50% men and 54.54% women, conversion disorders 40 % men and 45% women, sensory motor disorders, 40% men and 50% women.

Conclusions. Patients with multiple sclerosis develop multiple conversion disorders, especially sensory motor, with a non-significant prevalence of female sex, with primary progressive disease evolution.

Key words: neurology, conversion disorder, multiple sclerosis

59. INCIDENCE OF RISK FACTORS IN PARKINSON'S DISEASE IN THE IALOVENI DISTRICT OF THE REPUBLIC OF MOLDOVA

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Introduction. Parkinson's disease (PD) is one of the major progressive neurological disorders for which preventative or long-term treatment strategies are not available. Despite intense research over the last decade, PD etiology is still not completely understood. PD appears to stem from the result of complex gene interactions with environmental factors. The most common risk factors for the development of PD are the use of pesticides, traumatic brain injury, the rural environment, and the use of coffee and smoking are considered as protective factors.

Aim of the study. Exploring the incidence of risk factors and protective factors in Parkinson's disease for the sick population in the Ialoveni district of the Republic of Moldova.

Materials and methods. We conducted a prospective transverse study that included 20 patients diagnosed with PD in the Ialoveni district. By phone call, the patients responded to a questionnaire that included 10 questions about the causative and protective factors of the disease.

Results. The group of 20 patients, with mean age - 69 years (54-86 years), included 7 women (35.0%) and 13 men (65.0%). Eight out of 20 patients were exposed to the action of chemicals used in agriculture. Family history named 3 people with relatives suffering from the same

disease; 2 being of I degree and one of II degree. 6 out of 20 patients had head trauma without loss of consciousness. The protective factors were: daily coffee intake (3-4 cups) found in one person, and tobacco use in the past, found in another 4 patients.

Conclusions. We observed a domination of causal factors in relation to protective factors.

Key words: Parkinson's disease, risk factors, protective factors

60. KINESIO TAPING AND MASSAGE THERAPY AS A METHOD OF REHABILITATION OF CHILDREN WITH CEREBRAL PALSY (CP) OUTSIDE OF THE HOSPITAL

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Introduction. Among the causes of disability in children central nervous system pathology ranks first. The lesion of this system often leads to child CP. According to statistical data, 13238 children are suffering from CP in the Republic of Kazakhstan (as of January 1, 2015).

Aim of the study. Exploring modern methods of rehabilitation for children with CP.

Materials and methods. This research was designed as a randomized, controlled research. 30 children with unilateral spastic CP were included, and were equally divided between the Kinesio Taping (KT) group and the control group that received usual care. KT is an additional study to increase proprioceptive feedback and improve fitness, gross motor function, and activities of daily life in children with CP. The next study included 31 cerebral palsied children scored as of level III, IV or V according to gross motor functional classification system. Children were randomly separated into two study groups (KT and physiotherapy) and a control group (only physiotherapy) for 12 weeks.

Results. A total of 60 children with CP were randomly assigned to the treatment group and the control group equally. All were treated with rehabilitation training, but massage with SMKT was carried out additionally for those in the treatment group, five times every week and 3 months as a therapeutic course. All children showed significant improvement in GMFM-66 after treatment. Massage with SMKT manipulation shows a better effect compared to rehabilitation training therapy alone in treating spastic CP. We can use kinesio taping and massage therapy as a method of rehabilitation for children with CP out of the hospital, which is more convenient and cost effective for parents (guardians). Time of children with CP is limited in a hospital or rehabilitation center, and rehabilitation of children with this pathology requires a long time. It should be noted that the massage therapist's services are not always possible for parents because of the financial situation in different families. We have worked and analyzed studies of foreign scientists on the topic of children CP.

Conclusions. The result suggested that in clinical settings KT may be a beneficial treatment approach when combined with physiotherapy. We also came to the conclusion that the complex of KT and massage therapy is effective in the treatment of children suffering from CP. In addition, the use of these methods can prevent the harmful possible outcomes of CP.

Key words: rehabilitation, massage, kinesio taping

61. CURRENT ACHIEVEMENTS IN REPORTING BRAIN IMAGING IN ISCHEMIC STROKE: ZONES AND SCORE ASPECTS

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