

Conclusions. The status of the SLN, defined as the first lymph node to be involved in the metastatic spread, may change the medical or surgical approach, the follow-up and allows a precise staging, the calculation of the survival rates. The procedure should be executed for more cases in order to obtain a faithful result.

Key words: melanoma, SLNB

DEPARTMENT OF INTERNAL MEDICINE RHEUMATOLOGY AND NEPHROLOGY

116. NERVOUS SYSTEM INVOLVEMENT IN PATIENTS WITH RHEUMATOID ARTHRITIS

Author: **Doina Rosca**

Scientific adviser: Liliana Groppa, MD, PhD, Professor, Head of the Department of Internal Medicine, Rheumatology and Nephrology

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

Introduction. Rheumatoid arthritis (RA) is a pathology that leads to functional impairment with functional deficits, affects the patient's normal activity and reduces its productivity. From an economic and social point of view, it has a negative impact on both his family and society, greatly reducing the quality of life of the patient. According to the WHO data, RA prevalence in the general population is 0.6 - 1.3% and annual incidence - 0.02%. RA is an inflammatory, autoimmune disease of unknown etiology, which has a chronic and progressive evolution, affects the joints by symmetrical erosive arthritis and can be associated with extraarticular and systemic manifestations.

Aim of the study. To study the affection of the nervous system in patients with RA, to improve their quality of life. We have proposed to find effective ways to prevent infirmity through RA.

Materials and methods. We studied files of 50 patients who were suffering from RA and analyzed the results. Also, we studied specialized information and international publications with impact on the study. Of the 50 patients, 24 had oversegmental vegetative dysfunction with astenovegetative syndrome, 10 patients had paraesthesias, 4 patients had both. Of the 13 patients who had visceral RA, 10 of them had nerve damage.

Results. have shown that the duration of the RA disease and the nervous disorder are not correlated. Patients with RA history less than 5 years are more likely to develop nerve complications. 10% of the RA patients had illness for less than 5 years, but they had already nerve damage, while 100% of patients without nervous disorder had RA more than 5 years. Autonomic dysfunction in RA patients is associated with disease activity. 77,4% of those with nervous disorder had DAS > 5,1, i.e. high disease activity. RA may induce neuropsychiatric disorders, affecting nervous system functions. Early detection of these disorders can prevent debilitating changes in the nervous system and improve the quality of life in patients with RA.

Conclusions. The duration of the RA disease and the nerve damage are not correlated. Patients with RA history less than 5 years are more likely to develop nerve complications. Autonomic dysfunction in RA patients is associated with disease activity. Early detection of neuropsychiatric disorders allows prevention of debilitating changes in the nervous system.

Key words: rheumatoid arthritis, nervous system, autonomic dysfunction

117. CLINICAL AND TREATMENT SPECIFICITIES IN GOUT

Author: **Irina Gonza**

Scientific adviser: Rotaru Larisa, MD, Associate Professor, Department of Internal Medicine, Rheumatology and Nephrology

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