

high blood pressure. Thus, the high blood pressure control is achieved by reaching the target values in the middle-aged patients (130/85) and reducing the pressure to at least 140/90 in the elderly.

Materials and methods. The study was performed on 60 patients, who had a blood pressure level of $\geq 140/90$ when admitted to the hospital. Thirty patients took Lisinopril and other thirty patients took Ramipril. The dynamics of the values was monitored and the blood pressure levels at the time of discharge and hospitalization were compared.

Results. We found that of thirty patients taking Lisinopril, systolic blood pressure decreased by 0-10 units in 7 patients (23%), by 11-20 units in 14 patients (47%), by 21-30 units in 6 patients (20%), by 31-40 units in 2 patients (7%), and by 41-50 units in one case. Among patients taking Ramipril, the pressure decreased by 0-10 units in 2 patients (7%), by 11-20 units in 11 patients (37%), by 21-30 units in 9 patients (30%). It decreased by 31-40 units in 7 patients and by 41-50 units in 1 patient. At discharge, 18 patients taking Ramipril had blood pressure $< 140/90$, compared with those taking Lisinopril – 14.

Conclusions. Converting enzyme inhibitors are an effective therapeutic class in lowering blood pressure. Ramipril has decreased the pressure values by more units compared to Lisinopril.

Key words: converting enzyme inhibitors, high blood pressure.

FUNDAMENTAL SCIENCES SECTION

DEPARTMENT OF HUMAN ANATOMY

248. ANATOMICAL VARIATIONS OF THE ARTERIAL CORONA MORTIS

Author: **Dan Croitoru**

Scientific adviser: Zinovia Zorina, PhD, University Assistant, Department of Human Anatomy *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

Introduction. The arterial anastomoses of the lower limb magisterial arteries are of great clinical significance in collateral circulation. The obturator artery is one of the branches of the anterior trunk of the internal iliac artery that supplies the pelvis and the thigh. The obturator artery gives off a pubic branch which anastomose with the obturator branch of the inferior epigastric artery, thus determining the anastomosis called „corona mortis” (Kirchner), because its injury in herniotomy can cause a fatal bleeding. A detailed comprehension and knowledge of the morphological, topographic and individual peculiarities of the ”corona mortis” will contribute to the avoidance of complications in surgery of the pubic and inguinal regions.

Aim of the study. To mark out the anatomical variations of the ”corona mortis” using modern imagistic methods.

Materials and methods. We have studied the branches of the external iliac artery and the anterior trunk of the internal iliac artery on 197 selective angiographies that were obtained from the database of the Vascular Surgery Department of the Clinical Republican Hospital *Timofei Moşneaga*, Republic of Moldova. The angiographies on the patients in the study poll were made in order to conclude the severity of the peripheral occlusive syndrome. The age range of the patients was 20-80 years; the median age was 65 years. Depending on gender, 161 angiographies were made on male patients and 36 angiographies on female patients. The origin of the internal and external iliac arteries, their paths, branches and branching type, relations towards the neighboring vascular elements, and arterial anastomoses of the pubic region were

examined on angiographic records. The obtained data were stored, analyzed and statistically processed using the Microsoft Excel and SPSS 6.0 software.

Results. Anatomical variants were identified in 39% cases. A classification of the arterial "corona mortis" based on the angiographic picture was done.

Conclusions. 1. The most frequent type of the "corona mortis" was the classical one, of Lambda minor type. 2. The bilateral "corona mortis" was present in almost half of cases (44,15%), the second most frequent type was the left unilateral one (35%). 3. Knowledge regarding uncommon types of "corona mortis", are of clinical significance, due to high risk of lesions in surgery of the pubic and inguinal regions.

Key words: artery, corona mortis, obturator artery, pubic region

249. EPIDEMIOLOGY AND SPECTRUM OF CONGENITAL HEART DEFECTS

Author: **Lidia Grişco**

Scientific adviser: Zinovia Zorina, MD, University Assistant, Department of Human Anatomy *Nicolae Testemitanu* State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

Introduction. Congenital heart defects (CHDs) are common malformations and a major problem faced by physicians in their therapeutic management. The incidence of CHDs according to WHO is 10 per 1000 newborns on average. Around 500 children with CHDs are born annually in the Republic of Moldova. To date, CHDs have the highest incidence, characterized by increased morbidity and mortality, especially during childhood. Late diagnosis of CHDs leads to many irreversible complications, sometimes sudden death, that accounts for 3-5% of newborn deaths in the first week of life, and 33% of deaths in the neonatal period (0-28 days).

Aim of the study. To evaluate the incidence of CHDs in children in the Republic of Moldova, depending on gender and age.

Materials and methods. It is a retrospective, cohort study. The group consisted of 665 children with CHDs (51.1%), selected from the total number of 1300 patients admitted to the Cardiology Department of the MSPI Institute of Mother and Child between January 2019 and December 2019. Patients' observation sheets were examined, a number of relevant parameters being studied, such as patients' age and gender, background, causes of the disease, diagnosis, symptoms, laboratory and paraclinical investigation protocols, treatment.

Results. Out of the studied group, 452 patients (67.96%) were male and 213 (32.03%) female. There were 325 (48.8%) patients aged between 0-3 years, 150 patients (22.5%) between 4-10 years, and between 11-18 years - 190 patients (28.5%). There were 254 children (38.1%) from rural area and 411 children (61.8%) from the urban area. 113 children (17%) were diagnosed with aortic stenosis (AoST), 47 children (7%) with pulmonary artery stenosis (PS) and 27 (4%) with aortic coarctation (AoCo). In 146 children (22%) ventricular septal defect (VSD) was confirmed, atrial septal defect (ASD) - 93 (14%) patients, and 27 children (4%) with atrio-ventricular canal (CAV), 40 children (6%) - tetralogy of *Fallot* (TF), 40 children (6%) were diagnosed with persistence of arterial canal (PAC), 13 children (2%) with a single ventricle and 119 children (18%) with other combined heart defects.

Conclusions. Children with CHDs have a higher incidence compared with children diagnosed with other cardiovascular diseases. About 2/3 of children with CHDs were male, and half of