

and the scoliotometry - measurement of angle of trunk rotation (ATR). Seven degrees of ATR was chosen as cut-off point for referral to radiography.

Results: During school spinal screening we detected 773 children with spine deformities, the majority was determined for the first time. Functional spine deformities were found in 641 pupils presenting as round back (15,9%), flat back (18,3%), lordotic (4,8%), kypholordotic (11,9%) and asymmetric (49,1%) posture. Scoliosis gr.I-II was detected in 132 pupils who presented positive on both standing, forward bending test and scoliotometry > 7°. There were 82 (62,1%) girls and 50 (37,9%) boys. Definitive diagnosis was confirmed on standing spondilography. The individual treatment program was created for everyone.

Conclusions: The proposed complex examination scheme including orthopedic clinical and instrumental examination, provides to determine the risk factors of development of spinal deformity, monitoring ensures the accuracy of diagnosis, prediction of the disease and helps to improve clinical and functional outcomes of rehabilitation.

Keywords: spine deformities, scoliosis, school spinal screening, complex examination, rehabilitation

PLATELET-RICH PLASMA IN TREATMENT OF DEGENERATIVE AND TRAUMATIC LESIONS



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Objectives: Platelet-rich plasma (PRP) is defined as a portion of the plasma fraction of autologous blood having a platelet concentration above baseline PRP also has been referred to as platelet-enriched plasma, platelet-rich concentrate, autologous platelet gel, and platelet releasate. PRP serves as a growth factor agonist and has both mitogenic and chemotactic properties. It contains a high level of platelets and a full complement of clotting and growth factors. Analyze of methods use PRP-therapy in different osteo-articular diseases and arthroscopical surgery, benefits comparative with surgery without PRP-therapy, benefits PRP-therapy in postsurgical rehabilitation.

Methods: The study includes analysis of cases of non-surgical and arthroscopic treatment of patients with traumatic injuries and degenerative medial femoral condyle chondropathy associated with grade 2-3 treatment that followed in 2013-2015. Clinical evaluation was performed by visual- verbal scale (VAS) in all patients, analysis of five significant factors for patients: pain, mobility, functional disability, return to work loaves disease, satisfaction followed effective treatment. Cartography was the best MRI investigation, which has proven effective for stimulating regenerative chondral

Results: the result was significantly better in patients with chondropathy that followed PRP therapy, clinical improvement is much taller than improving ascertained by MRI. The greatest differences in satisfaction or certificate received treatment and return to usual activities. For patients with synovitis brief duration of postsurgical patients that followed PRP postsurgery therapy was 3 times smaller

Conclusions:

1. The use of PRP therapy in patients with medial femoral condyle chondropathy gr.2-3 in postsurgical rehabilitation 2 times shortened recovery period.
2. The number of people who returned to work or professional sports was 35% higher in the group that followed PRP therapy
3. High efficiency PRP therapy allows to recommend the conduct regular medical rehabilitation in this patient group

Keywords: chondropathy; PRP therapy; knee arthroscopy;

THE CERVICAL PAIN SYNDROME IN CHILDREN AND TEENAGERS



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Purpose: to find the diagnostic methods for determining the etiology of the cervical pain syndrome; to elaborate the optimal treatment strategy.

Materials and methods. The clinical experience is based on the results of examination and treatment of 587 children 3-17 years old over the 15-year period. The acute pain was noticed at 138(23.5%) patients and the chronic one – at the 449(76.5%).

Results: All the cases of the acute pain syndrome were caused by the acute subluxation in the atlanto-axial joint. In 111(80.4%) cases it appeared after a trauma and in 27(9.6%) – after inflammatory processes in the nasopharynx. The C1-C2 subluxation was also determined at 393(87.5%) children with the chronic pain syndrome. The pain at these patients was always accomplished with the symptoms of vertebro-basilar insufficiency and different neurological signs. At the another.

At 112(81.0%) the acute pain syndrome was cured by the head-halter traction. At 26(19.0%) the one-time reposition of the C1-C2 sUBLUXATION was performed under the general anesthesia. In the cases of the chronic pain syndrome the optimal methodology turned to be the isometric relaxation with the following one-time reposition of the C1-C2 sUBLUXATION and the elimination of the intervertebral functional blocking.

Conclusions: 1.The acute cervical pain syndrome was caused by the acute sUBLUXATION in the atlanto-axial joint. For its treatment the head-halter traction is indicated. If it is impossible, the one-time reposition under the general anesthesia with the following immobilization by the neck collar should be used; 2.The chronic cervical pain syndrome was caused by many different factors. In these cases the treatment should include the procedures of manual medicine which need to be determined in each particular case.

Keywords: the cervical pain syndrome, children, treatment.

ACTIVITY OF THE HUMAN TISSUE BANK FOR ORTHOPEDIC SERVICE IN MOLDOVA



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Background The transplantation activities started in the Republic of Moldova with skeletal tissues in 1960. The first valve transplant was performed in 2002 and 30 other valve transplants have been done throughout the following 5 years. On March 2008, was passed the Law no. 42-XVI on the transplant of organs, tissues and cells, modified by Law no.103 of the June 2014.

Results The evaluation, by the Council of Europe's experts, of the system of human organs, tissues and cells transplant in the Republic of Moldova confirmed the complicated situation in the field of transplant and encouraged the mobilisation of the domestic forces, aiming at the implementation of priority strategies and activities related to human organs, tissues and cells procurement and transplant.

The first Multi-tissue bank has been authorized in 2013 by the Ministry of Health. It has authorization for procurement, processing, preservation and delivering allogeneic and autologous skin, bones, nerves, cartilage, meniscus, fascia, vessels, amniotic membrane, autologous adipose tissue and autologous bone marrow.

Procurements of tissues in 2014 was performed from 29 deceased donors and 10 living donors were procured 184 tissues (46 cornea), processed – 544, transplanted – 372 (46 cornea) to 218 patients.

Conclusions One of the aims pursued by the Republic of Moldova is to establish an efficient, functional transplant system that will cover the country's needs in tissues for the patient's treatment.

The evaluation of the transplant system in the Republic of Moldova has pointed out the key-issues that are at the basis of developing the national transplant programme and building a well-organised infrastructure.

Keywords: bone grafts, tendons, tissue bank.

THERAPY FOR COMPLEX REGIONAL PAIN SYNDROME



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Other names: causalgia, algodystrophy, postraumatic dystrophy, Sudeck's atrophy, shoulder-hand syndrome, Reflex sympathetic dystrophy (RSD).

RSD/CRPS is a multi-system syndrome with diverse symptoms characterized by constant pain. It affects the central nervous system, immune, autonomic and vascular system . Usually CRPS affects one or more extremities but it can affect any part of the body. CRPS symptoms vary in severity and duration.

Anyone can get CRPS. It can strike at any age and affects both men and women. The average age of affected individuals is about age 38-40. Children do not get it before age 5, but it is not uncommon in teenagers. CRPS is rare in the elderly. Precipitating factors include injury and surgery. However, there is no relationship to the severity of trauma while in some cases there is no precipitating trauma at all (9%).

The diagnosis of CRPS cannot be made on imaging or laboratory tests. The condition is diagnosed on the basis of clinical criteria "BUDAPESTA" - 2/4 presence of symptoms: sensory, vasomotor, sudomotor/oedema, motor/trophic.

In 2011-2016, the IMS Private SRL MEDICORT addressed 19 patients with CRPS diagnosis: 4 - men, 15 - women. Two women had the severe form of CRPS. There is no simple cure for CRPS. Treatment often involves a number of approaches and aims to restore movement and function of the affected limb. Options may include: