A XXXIII-a Reuniune a Chirurgilor din Moldova "Iacomi-Răzeșu"

variante de tratament paliativ a acestor tumori au fost: endoprotezare endoscopică în 18 cazuri, drenare transcutană transhepatică în 10 cazuri și 10 cazuri foraj transtumoral cu aplicarea hepaticostomiei și microjejunostomiei. Rezultate satisfăcătoare în perioada postoperatorie precoce și tardivă, cu o supraviețuire acceptabilă au fost posibile la pacienții tratați radical.

KLATSKIN TUMORS: DIAGNOSTIC APPROACHES AND SURGICAL MANAGEMENT

During the years 2000-2011 there were 56 patients with Klatskin type tumors hospitalized and treated at the Department of Surgery No.2. Klatskin tumors were of type I and II in 6 cases, type III B in 6 patients, IIIA in other 6 patients, 38 cases were represented by type IV Klatskin tumors, which were diagnosed as nonresectable. Diagnostical process included clinical diagnosis of the patient, laboratory tests, ultrasound investigation, ERCPG and MRI in cholangiographic regimen; the latter are diagnostic methods of choice in Klatskin type of tumors.

There were 18 cases treated radically of total amount of 56 patients with Klatskin type tumor: the resection through major biliary duct with the Rouxen-Y bihepaticojejunoastomy was performed in 6 cases, hemihepatectomy on the left was performed in 6 cases, and hemihepatectomy on the right with restoring of the digestive tract continuity by applying of Roux-en-Y biliary anastomosis in other 6 cases. In the latter cases of this group of patients the hemihepatectomy resections type were associated with the resection of the segment I. The portal vein resection was necessary in one case. The following variants of the palliative treatment of these tumors were used: endoscopic endoprothesis in 18 cases, transcutaneous transhepatic drainage in 10 cases, and 10 cases of transtumoral drilling with the application of hepaticostomy and microjejunostomy.

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TRATAMENTUL CHIRURGICAL AL PACIENȚILOR CU MISATENIA GRAVIS

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În ultimele decenii în întreaga lume a avut loc o evoluție tehnică a tacticii chirurgicale în tratamentul miasteniei gravis. În clinica chirurgie Nr.2 USMF "N.Testemițanu" pe parcursul anilor 2008-2011 au fost tratate prin timectomie toracoscopică videoasistată 26 de pacienți cu miastenia gravis sau sindrom miastenic în asociere cu formațiuni timice de volum. În perioada anilor 1996-2007 a fost acumulată experiență în tratamentul acestui grup de pacienți prin metoda de timectomie tradiționala (sternotomică) – 143 de pacienți. Acest fapt ne-a permis să facem primele concluzii comparative bazate pe experiența proprie în pregătirea preoperatorie, alegerea tacticii de tratament și metodei de intervenție chirurgicală, conduita postoperatorie.

SURGERY TREATMENT OF PATIENTS WITH MIASTENIA GRAVIS

In recent decades throughout the world have been certified technical developments and tactics of surgical treatment of myasthenia gravis. In the department of surgery No. 2 Medical University "N. Testemitanu" during 2008-2011 were treated by videoasisted thoracoscopic thymectomy 26 patients with myasthenia gravis or myasthenic syndrome. During the years 1996-2007 in our clinic was accumulated experience in treating these group of patients by traditional method of thymectomy (sternotomy) - 143 patients. What allowed us to do the first comparative conclusions based on our own experience in preoperative preparation, choice of treatment tactics and method of surgery, postoperative behavior.