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The patient used ozonated water for mouth rinsing for 10 consecutive days and she also used an ozone-based toothpaste for her daily oral hygiene.

The results of the conventional histopathological exam of the harvested tissue fragment showed half-viable and non-viable squamous epithelial inserts and acute inflammatory modifications. After the ozone therapy, we observed the disappearance of the lesion and a reversion to normal of the oral mucosa tissue.

Conclusion: The treatment of the oral mucosa conditions has to be quickly installed after establishing the correct and complete diagnosis. In contrast to the traditional medicine and other methods of treatment, such as using antibiotics and antiseptics, the alternative therapies are less expensive, conservative, easily accepted by patients and they restore the balance of the structures of the oral mucosa, leading to the improvement of the general health of the patient.

Key words: recurrent aphthous stomatitis, ozone therapy.

4. ESOPHAGOGASTRIC ADENOCARCINOMA

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Introduction: The adenocarcinoma of esophagogastric junction includes three anatomical entities which have in common parietal extension and lymphatic dissemination both to the mediastinum and abdomen. Due to the dramatically increasing incidence, Siewert & Stein described and classified the disease as a tumor located 5 cm above and under the anatomical cardia, in order to lead to an optimal surgical treatment.

Clinical case: A 71 years old male presented to C.F. Cluj - Napoca Hospital complaining about progressive dysphagia, loss of appetite, postprandial regurgitation with fetid halitosis. In association, the patient presented fatigability and weight loss (4-5 kg in the last 3 months). The patient history reveals the existence of multiple cardiac pathology, such as atrial fibrillation, atrioventricular block grade III, right bundle branch block, aortic regurgitation grade II and mitral regurgitation grade II.

The results of the paraclinical tests lead us to the following diagnosis: adenocarcinoma of esophagogastric junction type II Siewert- Stein, pT4N1M1. Taking into account the cardiac pathology, the optimal treatment in this case is a gastrectomy.

Conclusion: The particularity of the case consists in choosing the most appropriate surgical therapy considering the advanced stage of the tumor and the Associated comorbidities.

Keywords: esophagogastric adenocarcinoma, gastrectomy, multiple cardiac pathology.