

508.7/left 7804.1 ± 737.4 mm³) compared to healthy subjects(right 8155.9 ± 702.1/left 9168.1 ± 1442.5 mm³) were significantly lower(p = 0.014, p = 0.001, respectively).

Conclusions. Ictal EEG patterns were relevant in all epilepsy patients with myoclonic seizures, while interictal EEG discharges only in 64% of patients. Alterations of CT along with bilateral thalamic volume loss support the hypothesis of involvement of aberrant cortico-thalamic networks in patients with myoclonic seizures.

Key words: myoclonic seizures, electroencephalography, cortical thickness, thalamic volume

67. THE EFFECTS OF MIRROR THERAPY ON PATIENTS WITH NEUROLOGICAL MOTOR DEFICIENCY. A CLINICAL PILOT STUDY

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Introduction. Stroke has a major socio-economic impact on the population. The consequences of the disease are fatal in 20 – 35 % of cases, and in 30 – 60 % patients report permanent functional difficulties of the upper limb. Mirror therapy is a relatively new method proposed in the treatment of post-stroke hemiparesis. It is based on the activity of mirror neurons in the neuroplasticity process. The objective of the study was to evaluate the efficacy of mirror therapy in patients with neurological motor deficiency of the upper limb resulting from an ischemic or hemorrhagic stroke.

Materials and methods. This study was prospective, controlled, and pilot. It included a pretest and a posttest. A total of 20 stroke patients were included: 10 in the experimental group (EG) and 10 in the control group (CG). EG underwent conventional rehabilitation program 2 hours a day for 14 days + mirror therapy 30 min/day, 14 days, and GC – only conventional rehabilitation program 2 hours a day, 14 days. The Functional Independence Measure (FIM), Fugl-Meyer Assessment(FMA) were performed at the beginning and at the end of the study to compare changes in motor recovery and motor function after intervention.

Results. The patients from the experimental group achieved significantly higher scores (p <0.02) for FIM and FMA than those from the control group. EG showed improvements of 2.6% in FIM testing, compared with 1.2% in CG. The same differences were found using other examinations: FMA arm score increase by - 9.7% in EG, GC - by 3%; FMA hand score EG – increase by 11%, CG - by 2.5%; FMA total score EG increase by 11% and CG only by 2.8%.

Conclusions. This pilot study proved the efficacy of mirror therapy on the patients with neurological motor deficiency. This technique is a useful tool in treating the post stroke hemiparesis by easiness of implementation, low cost and acceptability. For maximum effect, sessions of mirror therapy should last 30 minutes/day, 5 days a week, 4 weeks.

Key words: mirror therapy, stroke, motor recovery.

DEPARTMENT OF PEDIATRICS

68. ULTRASOUND FEATURES OF THYROID GLAND IN JUVENILE IDIOPATHIC ARTHRITIS

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