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Materials and methods: The study was made in the Urology and Nephrology Department of the Republican Clinical Hospital, during January 2015 and November 2015, on a group of 120 (65 male and 55 female, mean age 41,3 years) patients diagnosed with reno-ureteral lithiasis and treated with ESWL. The dimension of the calculi has varied between 0,6 and 15 mm. Were analyzed the complications after ESWL.

Results: Hematoma is the most serious complication of extracorporeal lithotripsy, with a low incidence (0,83%). Acute pyelonephritis (3,33%) occurs either due to a pre-existing urinary infection, or by the release of germs located into the calculi during fragmentation. Flanc pain (98,3%) was the most common symptom was on the side were was made de ESWL. The pain disappear after 2-3 days with non-steroidal anti-inflammatory drugs. „Steinstrasse” (5.83%) was another complication and was resolved by administration of conservative treatment.

Conclusions: ESWL is a safe method to treat stones when proper indications are followed. But when we have the complication after ESWL we must as soon as possible to find this complications and to treat as well.

Keywords: urolithiasis, ESWL, treatment

178. THE TREATMENT OF SUPERFICIAL BLADDER TUMORS WITH BCG

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Introduction: Bladder cancer is the 5th most common type of neoplasm regarding to incidence. Smoking is the primary risk factor in developing bladder cancer. Previous studies have shown that approximately 70% of the bladder tumors are nonmuscle invasive bladder cancer (NMIBC). Mycobacterium bovis bacillus Calmette-Guerin (BCG) is currently the standard conservative treatment of NMIBC.

Material and methods: We performed a retrospective study, conducted during 6 years from 2010 to 2016 at the Urology Clinic of Tg-Mures County Hospital with a total of 78 patients diagnosed with NMIBC. We analyzed the following variables: age, gender, histopathological result, the number of BCG infiltration, in the first six weeks one every week, at three and six months, cystoscopy and the rate of relapse, the main criteria of evaluating the results of the treatment.

Results: In the study that we conducted we had a number of 15 women (19,2%) and 63 men (80,8%). At the end of the first six weeks 89,7% of the patients completed all six infiltrations, 70,5% at 3 months and only 60,3% at 6 months. The results of cystoscopy were normal at 70,5%, 25, 6% did not have a cystoscopy performed. Patients were called for investigations first at three months, six months in the first year after finishing the therapy and then every year. In 63,8% of the patients who had the 6 month therapy, no relapse tumor was found in favor of 14,9% with relapse tumor.

Conclusion: The treatment with BGC infiltration is a conservative treatment with a high success rate.

Keywords: bladder cancer, BCG, NMIBC, therapy

179. THE TREATMENT OF THE DIAPHYSEAL BONES DEFECTS USING THE METHOD OF INDUCED MEMBRANE (PRELIMINARY STUDY)

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Introduction: The management of segmental long-bone defects is a challenge. The literature has described many techniques, but each is fraught with specific difficulties. Masquelet's technique of induced membrane is now a reference surgical procedure for the treatment of complex lesions requiring bone regeneration. The concept of induced membrane was introduced by Alain-Charles Masquelet in 1986. The Masquelet method consists in formation of an induced membrane by a foreign body which has secretory properties, influencing positive on the regeneration and strengthening of the cancellous bone grafts. Aim: to investigate the morphological properties and characteristics of induced membrane which was modeled in an experimental group of rabbits in order to assess and to optimize the effectiveness of the Masquelet method in the clinic.

Materials and methods: Experimental work was done using a group of rabbits (n=10) with the weight $5,5\pm 0,5$ kg and the age 5 months. The investigation had 3 steps. The first step of the study consisted in creating the bone defect, filling it up with an antibiotic-impregnated cement spacer and stabilizing it with a plate. The second step of the study was 21 days later, consisting in incision of the induced membrane, removing the spacer and filling up the space with cancellous bone chips collected from iliac crest. At this stage we sacrificed 5 rabbits in order to perform the histological and morphological examination. At the sixth week we switched to the third step – ablation of metal construction and the radiological control exam. At this stage we sacrificed 5 rabbits to study the morphological aspect of the healed bone.

Results: The histo-morphological examination performed at the 21 days demonstrated the presence of an inflammatory process characterized by neutrophilic, eosinophilic elements and regeneration's elements – fibroblasts. Also, it was determined a pseudo synovial metaplasia and a villous hyperplasia with formation of a synovial epithelium on the internal face of the induced membrane. The histo-morphological exam performed at the 6 weeks has demonstrated the continuation of the neoforming process and of the bone modeling, the regeneration process prevailed over the inflammatory one. The morphological aspect was formed by agglomerations of fibroblasts, myoblasts and collagen and numerous vascular buds, that promote a good neoangiogenesis and osteogenesis of the bone.

Conclusion: The morphological study demonstrated an intense process of cell proliferation and differentiation, which highlights the biological role of induced membrane by foreign body with secretion of the osteoinductive factors, promoting the vascularization and corticalization of the bone. The