

#### 4. IMPACT OF CARDIO-VASCULAR COMPLICATIONS ON PREDICTING OF THE THROMBOEMBOLIC EVENTS AND PROGNOSIS OF INFECTIVE ENDOCARDITIS OUTCOME

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**Introduction:** The infective endocarditis (IE) is a serious immune-inflammatory disease characterized by vegetative damage of cordis and causing serious complications. The average annual sick rate is 3-10 cases for 100 000 of population, and mortality is 16-20%.

**Aim:** To study the cardiovascular complications in patients with infective endocarditis and their impact on the evolution and prognosis of the disease.

**Materials and methods:** The study included 132 patients: 128 – hospitalized in the Cardiology Department Nb. 4 of the Cardiological Institute, and 4 patients from the Municipal Hospital "Holy Trinity". The average age of enrolled patients was 39.94±2.1 years. The diagnosis was established according to the DUKE diagnostic criteria for IE.

**Results:** The most common complication in patients with IE is cardiovascular insufficiency (CI), which was reported in 100% of investigated patients. Analyzing the results, we noted that in 48.7% of the patients from the study was developed CI III NYHA functional class (FC), followed by the CI II FC degree in 43% of cases. CI IV and IFC were diagnosed in only 6% and 2.3%, respectively. FC of CI in patients with IE increasing dependence of endocardial involvement in the disease process and valvular damage, detection of the vegetation cusp and chordae rupture, annular abscess at EcoCG. The most frequently involved in the disease process were aortic and mitral valve in 53.5% and 41.5% of cases, respectively. It was proved echocardiographically the endocardium damage in 72.6% of cases: vegetations (64%), the decompensation of prosthetic valve (25%), breakage of cords (18%), myocardium apostasis (3.79%). The positive hemoculture was found in the 41.5% of cases, mostly staphylococcus (44%) and streptococcus (38%). In 20% of cases there were diagnosed embolisms. Due to predicting of thromboembolic complications using special formulas in our patients the result was 7%. The forecast of the outcome was favorable in 74% patients, relatively favorable and unfavorable was observed in 17% and 9%, respectively.

**Conclusions:** The IE course severity is determined by several criteria: "masked" clinical picture, delayed diagnosis, high frequency of complications and the problems of the early detection of them, as well as the complexity of selection of an efficient treatment. High CD FC by NYNA, embolisms and high percentage of negative hemocultures were the predictors of lethal outcome.

**Keywords:** Endocarditis, vegetations, prognosis

#### 5. AORTIC DISSECTION

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**Introduction:** Aortic dissection is a relatively rare pathology, but it is a major surgical medical emergency, having a potential disastrous with a high rate of mortality. Dissection of the aorta represents the separation of the aortic wall at the medium level caused by the force of blood flow that enters through a defect in the intima level with the formation of a false lumen, which can extend over a variable length of the vessel. This leads to malperfusion of the vital organs and in the absence of an adequate treatment to the death.

**Objectives:** Studying the pathophysiology of the development mechanism and evolution of the Aortic dissection process. Highlighting the diagnostic methods with the highest specificity in a short time. Retrospective of clinical assessment of patients with AD from the Republic of Moldova