

examinations and neuroimaging studies have been performed. All patients underwent a neuropsychological assessment. Methods of screening for Parkinson's disease have been performed also. The depression syndrome was estimated by Hamilton Depression Rating Scale (HAM.D.). We observed the insignificant amelioration of motor function only after second or third course of massage-therapy. But decreasing of depression (HAM.D. 38,15 +/- 2,12) had an important alleviation already after one 10-days course of massage (HAM.D. 22,34 +/- 3,62) and in dynamics its improves more significantly (HAM.D. 10,84 +/- 1,37). The clinical data suggest the complexity of depressive symptoms in PD patients which can be successfully managed using massage-therapy. The depression syndrome worsens the general status of the patients and also requires treatment. In this connection the further studying of possibility of appointment to these patients of antidepressant treatment for complex rehabilitation is expedient.

## **Epilepsy Caused by Hippocampal Sclerosis**

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Mesial temporal lobe epilepsy with hippocampal sclerosis (MTLE-HS) is one of the most distinct epileptic diseases/ syndromes with defined underlying hippocampal pathology shown on MRI (Magnetic Resonance Imaging), clinical seizure types and postresection seizure relief. The purpose of this paper is to describe MTLE-HS diagnostic procedures, therapeutic approach and compare the results from the County Hospital in Targu Mures and the medical literature. A total number of 1467 epileptic cases (spanning from 2005 to 2010) were extracted from the archive from which 3 patients (2 females and 1 male) were diagnosed with MTLE-HS. No suggestive pathological history was found for these patients, diagnostic procedures were consistent with those in the medical literature. Seizure types were partial complex seizures and secondarily generalized seizures. The therapeutic approach consisted of antiepileptic drugs, opposed to cases from medical literature, where first line therapy was surgery. Diagnosing MTLE-HS is important, because in more than half of cases this type of epilepsy is refractory to antiepileptic drugs.

## **Evaluation of Efficiency of Thrombolytic Therapy in Patients with the Acute Coronary Syndrome**

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Evaluation of efficiency of thrombolytic therapy in patients with the acute coronary syndrome with ST segment elevation depending on the time of drug injection. Introduction: For patients with the clinical presentation of myocardial infarction with elevation of ST segment reperfusion should be performed. In the absence of contraindications and if primary percutaneous coronary intervention (PCI) cannot be used thrombolytic therapy is the method of choice. Thrombolytic therapy prevents 30 deaths per 1000 patients. The aim of the study was to analyze dynamics of ST segment reduction in patients with acute coronary syndrome with ST segment elevation, depending on the time of injection of: streptokinase, alteplase, tenecteplase. There were processed 174 medical cards of patients with acute coronary syndrome with elevation of ST segment, who underwent thrombolytic therapy with streptokinase, alteplase, tenecteplase, in the coronary care