

## PATHOGENETIC, CLINICAL, DIAGNOSTIC AND THERAPEUTIC ASPECTS OF ICHTHYOSIS

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**Introduction:** Each year, more than 16 000 children affected by a form of ichthyosis are born in the world. Ichthyosis can affect people of any age, gender or racial type. The most commonly encountered forms of this disease are ichthyosis vulgaris the incidence being reported as 1 case per 250 population and the X-linked ichthyosis with a frequency of 1 per 6 000 population.

**Purpose and Objectives :** Evaluation of the pathogenetic, clinical, diagnostic and therapeutic aspects of different types of ichthyosis in order to estimate the epidemiological features and the specific aspects of patients with ichthyosis in Republic of Moldova.

**Methods:** the literature review, the retrospective analysis, the statistical, comparative and graphical methods.

**Results:** The retrospective, monocentric, descriptive study included the analysis of 60 medical records selected for the past 3 years, 17 records for the year 2009, 25 records for 2010 and 18 records for 2011. Thus, from these 60 medical records, including new cases as well as repeated hospitalizations, was obtained a group of 45 patients with different forms of ichthyosis registered in the Public Medical-Sanitary Institution Republican Dermatovenerologic Dispensary (RDVD) of the Republic of Moldova. It was determined that within this group of study there is no sex prevalence, the affected men, women report being established as 24 to 21. This research also highlighted that 29 of 45 people or 64% are suffering from ichthyosis vulgaris, the second most common disease being NBCIE with 18% of affections, or 8 people of 45 from the study. The most frequently detected age period of impairment in this group includes patients from 11 to 20 years in 42% of cases and from 6 to 10 years in 33% of cases. The distribution of the same 45 patients depending of their year of birth revealed that 46.6% of cases are born in 1991-2000 years and 37.7% between 2001-2011 years. Considering climacteric factor as a major trigger of exacerbations in ichthyosis, we investigated the study group encoding on their addressability month of the year or season. The results showed that 35% of patients were sent for treatment in the RDVD in spring, where February and March are considered the top months of exacerbation. Supposing the implication of the territorial factor into pathogenesis of ichthyosis, we have observed the probability of its prevalence in some regions of Moldova where 57.7% cases is encountered in the center of the republic, half of them in the capital Chisinau.

**Conclusion:** The ichthyosis is a rare but a difficult disease. The most common type encountered in Moldova is ichthyosis vulgaris (64%) and the most frequently detected age period of impairment is from 11 to 20 years (42%). An important factor for exacerbations symptoms was revealed as climate factor, the addressability percent increasing in the spring (35%). This pathological condition gives an ugly aspect of the skin, and once damaged facial skin, the psychological consequences are imposing.

**Keywords:** ichthyosis, retrospective study, group, patients, prevalence.

## ALOPECIA IN CHILDREN - CORRECTION AND PROPHYLACTIC

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**Introduction:** At present time there is no standard treatment of children's alopecia and the outcomes are at times disappointing. The existing methods are not always effective.

**Purpose:** to improve the efficiency of alopecia areata treatment caused by dysmicroelementosis in children and juveniles a new method of treatment has been elaborated and approached to prophylaxis.

**Objectives:** The objectives of the present study were to evaluate the elaborated method of alopecia areata correction due to dysmicroelementosis in children and juveniles and to determine the main approaches to dysmicroelementosis prophylaxis with clinical manifestations of alopecia.

**Materials and methods:**

The method is applied as follows: after the patient's assessment by a dermatologist and exclusion of alopecia areata of mycotic etiology, the levels of Pb, Cu and Zn excretion with urine are determined. In the presence of alopecia sites in children which had developed no earlier than 2 months previously and in the increase of urine lead excretion within the limits from 0.1mg/l to 0.2mg/l, and the increase of copper and zinc urine excretion, the patient is administered a certain complex consisting of the following preparations: Kyolic, Spirulina platensis, Sophora japonica The whole complex should be taken with meals for a period of 2 months. 32 children and juveniles aged from 4 to 17 years residing in Belarus and Russia, and having the clinical manifestations of alopecia areata. Control group – 18 children with alopecia areata, treatment with «Medetopect». Statistical method: «Statistica 6.1».

**Results:** Complete hair growth regeneration in foci of alopecia was noted in 29 patients from test group, the overall positive detoxification of the organism was marked as well, microelements urine composition before and after the treatment providing the evidence of this.

The program of primary prophylaxis of the alopecia areata of increased chemical hypersensitivity should be started with the educational work among various groups of population about possible ways of heavy metal salts penetration into the human organism. Secondary prophylaxis necessitates elaborating regimens of prophylactic supervision of children with the syndrome of increased chemical hypersensitivity. Integrated rehabilitation is only possible in coordinated activities of professionals in the field medicine and education.

**Key words:** children, alopecia areata, dysmicroelementosis, method of correction, prophylactic.

## THE ASPECTS OF THE CLINICAL EVOLUTION OF MALNUTRITION IN EARLY CHILDHOOD

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**Introduction:** Hypotrophy – a chronic disorder of nutrition caused by protein and energy starvation. According to the statistics provided by the WHO, the child mortality is mostly determined by acute respiratory diseases, diarrheal diseases and perinatal factors in equal proportions (approximately 19%). Every second child who suffered and died from these diseases was diagnosed with hypotrophy.

**Aim:** The research of the hypotrophy course with varying degrees of manifestation taking into account the duration of the disease and comorbidities.

To identify the most common malnutrition's causes and nutritional errors that caused the hypotrophy.

**Methods and materials:** A retrospective analysis of clinical and paraclinical examination data of 50 children suffering from hypotrophy treated at the Clinical Republican Hospital for Children 'E.Cotsaga'