



OP session NS1

Extracorporeal circulation

Florentina Rizea, Marinela Bosincianu, Elena Iftode, Gabriela Batan, Andreea Teodorescu

A procedure in which blood is taken from a patient's circulation to have a process applied to it before it is returned to the circulation. All of the apparatus carrying the blood outside the body is termed the extracorporeal circuit.

The basic role of CPB is to maintain the systemic circulation at physiological parameters during the cardiac arrest and in the hipocontractility period (reperfusion).

The adequate organ perfusion it's realized by maintaining the cardiac output and the perfusion pressure.

The blood flow through the arterial line, and therefore in the systemic vascular bed, is generated mechanically by a pump and it is not pulsatile. There are also technical devices that allow pulsatile flow generation. During CPB the organs vulnerable to hypoperfusion and hypotension should be especially protected (brain, kidneys).

CPB components: venous drainage; arterial cannula; venous reservoir; the actual pump; the oxygenator; heat exchanger; accessories; priming.

The perfusionist is the person in charge for the CPB functioning and who is endorsed on the type of the surgical intervention and patient's medical data. He is the one who calculates according to the patient's body surface, the priming necessary, the cardiac output (in order to avoid hemodilution) and selects the cannulae to be used.

The CPB starting is made on the surgeon's demand, who is maintaining a clear and bilateral communication with the perfusionist. The perfusionist repeats and confirms the surgeon's orders, informing him permanently on its activities.

The CPB exit (CPB-OFF)

It is initiated after the cardiac electric activity restore, after a reperfusion period, adequate to the surgical intervention's length. The perfusionist is gradually clamping the venous line and reduces the pump output, allowing to introduce the

venous blood in the patient's circulation.

The blood pressure (BP) and heart filling (central venous pressure) are carefully monitored. If the Bp and heart filling are optimal, the CPB can be stopped.

The role of the professional nurse in the intraoperative care of the patient undergoing open heart surgery is beneficial for obtaining a positive outcome for the patient.

D vitamin or hormone

Florentina Dumitru, Mihaela Andreev

Through the ages, medical knowledge have evolved with the science and technology progress. A number of substances considered in a certain way then and there, turned out to fit into other classes of drugs nowadays.

Vitamins have diverse biochemical functions. Some, such as vitamin D, have hormone-like functions as regulators of mineral metabolism. Vitamin D promotes calcium absorption and maintains adequate serum calcium and phosphate concentrations to enable normal mineralization of bone and to prevent hypocalcemic tetany.

Many scientific evidence confirm that "D-vitamins" act as a hormone in the body: modulation of cell growth, neuromuscular and immune function, and reduction of inflammation. Many genes encoding proteins that regulate cell proliferation, differentiation, and apoptosis are modulated in part by vitamin D.

These facts corroborate by the discovery of receptors of active form of vitamin D (1.25-dihydroxy-cholecalciferol) across cells in several types of tissues and organs, justify the new classification.

From the pharmaceutical point of view there are many different types of formulation and concentrations, each of them with its specificity and indications.

The new approach should be: What is more useful for us? A classification or the understanding and application of new

medical knowledge in daily pursuits for everyone?

Cancer patients' rights

Elena Coman, L. Onel, Mădălina Ciobănescu

1. Right to early detection, diagnosis and treatment: All cancer patients, irrespective of age, sex, or various social conditions have rights to early disease detection, best methods of diagnosis and treatment available.
2. Quality of care: Quality of care should be the result of a comprehensive approach that responds to the particular needs of patients and their families, to promote improved quality of life and lead to more efficient use of resources.
3. Patient-health professional relationship: This relationship should develop in terms of mutual respect and trust and rely on well-defined rights and responsibilities.
4. Patient information: Access to information for patients and their families must be promoted to a better understanding of the disease and treatments, in order to decrease anxiety and to browse in a less stressful this stage of life.
5. Psychological support for patients and their caregivers: Psychological support is essential for the emotional needs of patients and their families at all stages of the disease, during and after treatment.
6. Socially and financially support
7. Rehabilitation and reintegration into society: Restoring physical and mental health and quality of life requires a complex, multidisciplinary approach (physical, social, occupational, psychological and spiritual).
8. Palliation: Patients' rights to medical care, which aim to improve the quality of life in advanced stages of malignant disease.
9. Social consultancy of patients: Concept established colloquially as "advocacy", which means all actions taken individually or through organizations, which aim primarily ever more active involvement of patients in medical decisions, but also in promoting health programs and policies.

Ebola

M. Leatham, K. Higgins

Following the United Nations declaration that the Ebola virus outbreak was a public health emergency in March 2014 the

United Kingdom made commitment to provide support including providing care for the people in Sierra Leone. An international response involving WHO, US and British governments, the UK Department of Defense designed and oversight of the building of several Ebola Treatment Centers and Training Academy and provided logistic and planning support. In addition, approximately 800 Defense personnel were deployed to Sierra Leone including nurses, doctors and laboratory staff.

Based upon their current experience, skills and knowledge, two personnel from the British Army reservists were selected and deployed from 207 Manchester Field Hospital. Following further specialist training to ensure they could work in austere conditions treating people with this hemorrhagic viral disease that that claimed up to 11,325 lives of many civilians Lieutenant Colonel Marian Leatham and Major Kath Higgins work and lead a teams of nurses, combat medical technicians and healthcare workers to provide care and treatment for patients with confirmed or suspected Ebola.

This presentation gives an account of their experiences and the importance of team work and leadership from two different roles, one as a team leader the other as the Senior Nursing officer for the hospital in dealing with previously untested challenges in infection control and patient and personal safety during their time in Kerrytown Ebola Treatment Centre in Sierra Leone.

The nurse-patient relation

Florica Cristea

To practice medicine correctly, means to respond promptly, honestly, and with empathy, to the certain needs required by the medical act, always accompanied by a great sense of ethics.

The disease implies firstly a disturbance in the patient's inner equilibrium, which translates in physical or a mental disorder, a maladjustment to a new definitive or temporary situation. A person "enters in the disease" with a certain psychic, temperament, character and intelligence, with preconception and cultural horizon and that is why the patients assumes a certain attitudes towards the disease but also towards the medical team: trust, esteem, sympathy, but also possibly doubt, fear, hate and contempt.

The nurse has to treat all patients unconditionally. Also, the nurse-patient relation does not have to be with only about treatment but also connecting and understanding the patient in these difficult moments. Communication with the

patient has to be in consonance with his sate, his has to be in consonance with his sate, his understanding and has to be associated with aiding elements of his ailment. The care of medical ethics consists of a member of more and professional traits regarding the nurse: honesty, altruism, a giving sense, respect, solicitude, comprehension.

This is way the medical profession has to be exercised with patience, generosity, passion, honesty, the central focus of all, being the patient who has to be understood and accepted as he is.

Laboratory investigations of autoimmune hemolytic anemia

Eva Dincă, Verginica Săvoiu, D. Săvoiu

Autoimmune hemolytic anemia is a condition in which effectors of the immune system erroneously attack own red blood cells, thus leading to lysis thereof.

Blood samples were collected from three patients suffering from immune hemolytic anemia. Vacutainers required for blood collection and Coombs kits, as well as microscope slides, thoroughly cleaned, degreased and dried have been used.

A complete blood count was performed, along with the leukocytic formula and a direct Coombs test.

Compared to normal values, all patients presented low values of the plasma concentration of HGb, Hct and of the erythrocytes count.

Elevated bilirubin, GOT, D-dimers and fibrinogen values were recorded.

A positive result of the Coombs Test confirms the autoimmune hemolytic anemia diagnosis.

Effect of Algisyl ventriculoplasty on functional status of patients with advanced heart failure

Daniela Nae, Magdalena Petrea, Iulia Dragomir, Iuliana Gheorghediac, Ileana Hăntuție, S.I. Dumitrescu

Study objective: Evaluation of functional status in the first six months after implantation of a new device, in first 10 patients of our center, randomized to the surgical arm of AUGMENT-HF clinical trial.

Methods: AUGMENT-HF clinical trial is a randomized, controlled study to evaluate the safety and cardiovascular effects of Algisyl-LVR™ as a method of LV augmentation in patients with chronic heart failure due to ischemic or non-ischemic dilated cardiomyopathy. Algisyl-LVR™ is a biopolymer classified as medical device by regulatory authorities that is implanted in free wall of the left ventricle aiming to alleviate LV dysfunction through a left thoracotomy followed by 10 - 19 biopolymer implants. Subsequently to device implantation the patients were evaluated by complex monitoring of clinical, laboratory and laboratory parameters comparing the surgical arm with the standard treatment arm.

Results: Assessment of clinical status at randomization and follow-up visits was done by NYHA class evaluation, 5-minute walk test and Kansas City cardiomyopathy Questionnaire.

	NYHA II/III/IV	6MWT	KCCQ
Randomization	0/7/3	271 ± 83	46 ± 21
3 months	2/6/2	302 ± 89	52 ± 24
6 months	3/5/1	311 ± 82	62 ± 27

Conclusions: The surgical procedure to implant the biopolymer alginate resulted in improved functional status in patients with advanced heart failure.

OP session NS2

Essential arterial hypertension

Elisabetha M. Ionescu, Petruța Zărnescu, Laurenția Leonte, V. Ilieșe

Introduction: The Task Force for the management of arterial hypertension of the European Society of Hypertension (ESH) and of the European Society of Cardiology (ESC).

Hypertension is defined as systolic BP ≥ 140 mmHg and/or diastolic BP ≥ 90 mmHg. The diagnosis of hypertension should be based on at least two BP measurements in the sitting position per visit on at least two visits.

Risk factors: Include age, male sex, smoking, dyslipidemia, glucose intolerance, obesity and family history of premature CVD. Asymptomatic organ damage mainly involves left ventricular hypertrophy, evidence of vascular damage and

microalbuminuria.

Cardiovascular risk factors: Total, LDL and HDL cholesterol, and fasting triglycerides and glucose are considered routine tests in all hypertensive patients.

Treatment approach: Lifestyle changes. Appropriate lifestyle changes are the cornerstone for the prevention of hypertension and are also important for its treatment. The following lifestyle measures are recommended:

- Salt restriction to 5-6 g/day.
- Moderation of alcohol consumption (<20-30 g of ethanol per day in men and <10-20 g in women).
- Increased consumption of vegetables, fruits and low-fat dairy products.
- Reduction of weight to BMI of 25 kg/m
- Regular exercise (≥30 min of moderate dynamic exercise on 5-7 days per week)
- Smoking cessation
- Prompt initiation of antihypertensive drugs is recommended in patients at high or very high CV risk in elderly patients drug treatment is recommended when systolic BP is 160 mmHg, or ≥140 mmHg if younger than 80 years and treatment is well tolerated.

Conclusions: Diuretics, beta-blockers, calcium antagonists, ACE-inhibitors and angiotensin receptor blockers are all suitable for the initiation and maintenance of antihypertensive treatment, either as monotherapy or in combination therapy. Lifestyle changes. Appropriate lifestyle changes are the cornerstone for the prevention of hypertension and are also important for its treatment.

Blood investigations in Hodgkin Lymphoma

Cătălina Mihăilescu, Matilda Marinache, Constantin Coman

Introduction: Lymphoma is a cancer that starts in lymphocytes of the immune system and appears as a solid tumor of lymphoid cells. These cells developed abnormal come from lymph nodes and spread outside the lymph system.

Thomas Hodgkin lymphoma published the first description in 1832, as called after him, Hodgkin lymphoma.

Material: Dynamics were followed in 2 patients diagnosed with Hodgkin lymphoma after about 10 years. Patients came for full blood regularly.

Explorations Blood: complete blood count with differential white blood count, erythrocyte sedimentation rate determination, and puncture and bone marrow biopsy performed iliac crest, ESR.

Biochemical explorations: liver function tests, electrophoresis, serum lactate dehydrogenase, serum calcium, urinary calcium, cupremia.

Biological sampling was done following bioethics standards, rules and norms aseptic SSM.

Method: Immunological abnormalities may occur. Such known cell-mediated immunity deficiency characterized by negative tuberculin skin test.

Results and discussions: Hemoglobin concentrations were slightly lower for patients investigated.

Leukocyte number was slightly increased.

The percentage of eosinophils was close to the maximum limit.

This Hodgkin's disease is suspected lymphadenopathy occurs when accompanied by fever, night sweats and weight loss.

To confirm the diagnosis of disease, it is necessary to carry out investigations where there Blood hemoglobin decreased, elevated ESR and fibrinogen for Epstein-Barr virus may increase the risk of lymphoma.

Diagnosis of the disease can be achieved after puncture ganglion; smear analysis reveals the presence of Reed-Sternberg cells, but for a diagnosis of certainty node biopsy is needed.

Advanced Parkinson's treatments and therapies

Olguța Preda-Cârșote, Violeta Gâlcă, Mioara Girea

Parkinson's disease is a chronic and progressive movement disorder, meaning that symptoms continue and worsen over time. The cause is unknown, and although there is presently no cure, there are treatments options such as medication and surgery to manage its symptoms. As Parkinson disease progresses, the amount of dopamine produced in the brain decreases, leaving a person unable to control movement normally. Medication is the main treatment used for the movement symptoms of Parkinson's The term 'advanced Parkinson's' usually refers to a time when symptoms are more complex and have more often an effect on patients' day-to-day life. In the later stages of Parkinson's, when non-motor symptoms begin to dominate quality of life, it may be appropriate for some drugs to be withdrawn.

There are few advanced therapies for patients with Parkinson disease when symptoms don't respond well to oral medication.

1) Apomorphine – an injection or infusion of dopamine agonist under the skin levodopa/carbidopa gel inserted into

your stomach by a tube. The dopamine agonist apomorphine provides relief from off periods when administered as a subcutaneous injection. When applied continuously via a portable pump, oral medication can often be reduced considerably and dyskinesia improve in many patients. Continuous duodenal levodopa infusion it is used in treatment of advanced levodopa-responsive Parkinson's disease with severe motor fluctuations and hyper-/dyskinesia when available combinations of Parkinson medicinal products have not given satisfactory results. Duodopa is a gel for continuous intestinal administration.

2) Deep brain stimulation (DBS) is a surgical procedure used to treat a variety disabling neurological symptoms of Parkinson disease such as tremor, rigidity, stiffness, slowed movement and walking problems. At present, the procedure is used only for patients whose symptoms cannot be adequately controlled with medications. The majority of patients with Parkinson disease develop motor fluctuation and dyskinesia as their condition progress.

There are a number of therapies that can help people with Parkinson's and offer advice on ways to help manage symptoms. Therapists and nurses are trained to provide advice and recommend exercises and treatments to keep them active and healthy. They are part of a team that can help patients manage their condition. The main therapies includes: occupational therapy, speech and language therapy, physiotherapy, seeing a dietitian and complementary therapies.

As a conclusion, Parkinson's disease does not just affect the person living with it – it affects the entire family and an extended community of friends and loved ones.

Epilepsy (seizures disorders)

Cristina Lixandra, Oana Rada

Epilepsy is a syndrome of various etiologies caused by excessive neuronal discharges having a paroxysmal, transient, intermittent and interactive mechanism, characterized by sudden seizures of intermittent disorder of brain function often involved with loss of consciousness.

Antenatal causes: exogenous factors that deal with the mother during the pregnancy; abdominal trauma; maternal infections; toxic causes such as alcohol, professional noxae and so on.

Natal causes: difficult deliveries; fetal injuries during delivery or Rh incompatibility.

Postpartum causes: brain injuries; allergic factors; calcium and glucose metabolism disorders.

People with seizure would be classified according to the type of crisis, underlying cause, epileptic syndrome and episodes occurred during and around the crisis. Seizure types are classified depending on location or source of epileptic seizure (local seizures) or its distribution (grand mal seizures) in the brain. There are a number of factors contributing to the installation of the status epilepticus such as antiepileptic drug withdrawal; metabolism disorders; stroke or cerebral infarction; CNS infections, trauma or tumors.

Psychosocial effects of epilepsy include depression, anxiety disorders, migraines and attention deficit hyperactivity disorder. The symptoms vary according to the scale of seizure (partial seizures – affecting only one brain area or grand mal seizures – affecting large areas of the brain, located in both cerebral hemispheres).

They appear like small contraction localized in a small body segment or a series of abnormal perception of the environment, either visually or auditory perception. Clinical manifestations are very different because of the epileptogenic focus – “that small area of the brain where the seizures come from”.

Medication include anticonvulsant drug therapy and it is designed to reduce the frequency of epileptic seizures but it may also lead to their disappearance. The therapy for epileptic seizures is a specific one. Each patient, in terms of right chosen treatment and depending on the particular disease, about a third of them as an average, may not do the seizure or do them rarely.

So, they have the opportunity to conduct a normal life with a balanced diet and right behavior.

Penile tumor. Nursing for patients with penile tumor

A. Bozieru, Agnes Ciucă, D. Spînu, D. Mischianu, F. Rusu

Introduction: Penile tumors are a rare pathology that unfortunately remain untreated or treated late. A misunderstood sense of shame is often the biggest culprit for the late presentation to a doctor.

Material and method: We present the therapeutic approach adopted in the case of a patient with penile tumor, evolving for about ten years, hospitalized in the department of urology „Carol Davila” Hospital. The patient, male aged 78 years old, presented in our service complaining about diffuse left inguinal pain. Local exam confirmed the presence of a left groin palpable lymphadenopathy and a tumor involving the Glans with a minimal extension to the penian shaft. Biopsy confirmed low grade squamous cell carcinoma. Partial amputation of the penis and bilateral inguinal

limfodissection was performed. Pathology result confirmed negative penian resection limits, but with left inguinal lymph nodes invaded (3/6).

Results: Postoperative evolution was favorable. Three months after surgery, a dilatation of the urinary meatus was necessary. He is now under oncological treatment.

Conclusions: The delay of the diagnosis due to a false sense of shame represents one of the largest mistakes. In the case of this patient, the neoplasia type has allowed and allows palliative treatment efficiency, unfortunately most often we come to cases of aggressive neoplasia that once metastatic dramatically reduces the life expectancy.

The role of nurses caring for patients in renal colic section of urology

Iulia Ene, Liliana Dogaru, Gabriela Pînzariu

Definition: Renal colic is a painful paroxysm with anteroinferior location for lumbar and iliac fossa irradiation, testis and scrotum in men and vulva in women, presenting an undulating, with maximum painful lull. It is a medical emergency and urological. Maximum intensity is usually located in costovertebral angle and lower right rib area XII, can have headquarters variable depending on the location of the obstacle.

The main cause of renal colic is represented by the sudden onset of a barrier to evacuate urine – kidney cavity, ureter, uretero-bladder junction which sharply increases the pressure in the pielo-uretero-caliceal system and renal receptors produce excitation preso-pain. Sudden obstacle that blocks urine is most often a stone, but may be just as likely, a clot (reno-ureteric bleeding) home suppuration material failure (renal TB). Other reasons: neighborhood processes (inflammation, tumors) extrinsic compression, causes iatrogenic following therapy (surgery, lithotripsy, radiotherapy) renal infarction.

Clinic: the patient shows paroxysmal pain, sudden onset, sometimes apparently in full health. The patient seeking a position analgesic that cannot find; useful element in the differential diagnosis with other abdominal pain syndromes that often immobilizes the patient.

Renal colic is accompanied by:

- Digestive symptomatology: nausea, vomiting, ileus, pseudoclozive syndrome - retro-peritoneal irritation signs;
- Neuropsychiatric -signal: agitation, extreme anxiety;
- Cardiovascular symptomatology: usually shows no changes

in BP and pulse.

- Fever association can quicken the pulse and BP lowering in this case suggests a UTI;

- Signal urination: Colic can be followed by hematuria which can be caused by a migrated stone, then became obstructive. Urine may be clear or cloudy excluding kidney affected by opposite kidney pain with hematuria and renal colic. The association with hematuria and histuria at the diabetic patient or consumer of analgesics can suggest papilar necrosis. The symptoms depends on the location of the obstacle: high obstacle will produce maximum pain, iliac fossa irradiation and genitals;

The role of nurses caring for patients in renal colic section of Urology:

Monitoring: assessment of vital signs (blood pressure, pulse, respiration, urine output, temperature) and physician reports the changes; assessment of pain characteristics and macroscopic appearance of urine; administration of treatment; follows the investigation indicated by the doctor; explain to the patient how to collect urine and urinate through cheesecloth (we could recover calculation for chemical analysis); obtaining blood and urine samples, prepare the patient for uiv ; treating the patient who shed; give moral support to the patient and family.

Transurethral bladder tumor resection

Adriana Ursu, Claudia Dumitru, Mihaela Marin, Angelica Mălăescu, Gina Popescu

Bladder cancer is a very common malignant affection which has a high rate of recurrence.

79% - 85% of the patients with bladder cancer are in an evolutionary stage of non-invasive bladder tumors, while the proportion for the recurrence is very significant.

On a global scale, the mortality caused by this disease is 2-10 men and 0.5-4 women out of 100.000 citizens per year. Bladder cancer is 3 to 4 times more frequent in men rather than in women.

In order to determine the right diagnosis, a transurethral tumoral resection has to be performed under spinal anesthetic agent.

Due to the risk of recurrence and progression, the patients with non-invasive bladder tumors have to be carefully monitored and the frequency and duration of the cystoscopy exams need to reflect the risks for every patient.

OP session NS3

The implementation of the protocol concerning the communication of bad news in the nurse's practice

B. Silveșan, Lucia E. Istrate

Bad news may be defined as "any information which adversely and seriously affects an individual's view of his or her future"

It is difficult and uncomfortable to deliver bad news in all medical areas especially in oncology even though we are referring to diagnosis, reoccurrences, disease progression or transition to palliations treatment. In any situation, this is a difficult and stressful task.

Studies showed that a significant part of the medical team experiment a strong emotion after communicating bad news, and the effect of stress lasts for hours and even days.

To realize an efficient communication there have been adopted a series of international protocols that can be used. One of them, named

S-P-I-K-E-S protocol, a recent but largely used strategy, that approaches the establishment of an appropriate context, checking the patient's perception; determines the amount of information known, desired and that will be transferred; the knowledge of medical realities before discussion; exploring the emotions that might appear during the interview and the establishment of a support strategy.

The role of palliative care for patients with severe chronic diseases

Ani Ivan, B. Silveșan

Palliative care is the active and total care of patients whose disease is not responsive to curative treatment. The control of pain and of other symptoms, the psychological, social and spiritual assistance are of major importance.

It is a benefit not just to those suffering from: cancer; HIV; progressive neurological disease; renal, cardiac, hepatic insufficiency or other diseases that cannot be cured, but also for their families considering that palliative care is very complex, it is a holistic care, is not only a medical work.

The goal of palliative care is to ensure the best possible quality of life for patients and their families.

Bone densitometry (DEXA, DXA)

Nicoleta Tudora, Cristina Popa, Carmen Hărdău

Bone Densitometry (DEXA = Dual-energy X-ray absorptiometry) is a paraclinic procedure which measure bone' density and osteoporosis detection, this phenomena appear especially in menopause women. Osteoporosis treatment prevents the risk factors, which improve the bones resistance.

DXA is recommended in 65 old women menopausal and with previous pathological fractures. Also in women with multiple risk factors (like familial vertebral fractures history) and in long periods of treatment with corticosteroids.

These examination is recommended for lumbar spine: 4 lumbar vertebrae L1 to L4, to coxofemoral joint (hips and pelvis) and forearm. For a complete test is necessary to exam 3 regions, but for a correct diagnostic 2 regions are enough.

DEXA is a simple, fast and noninvasive procedure. During the examination time, a very small dose of radiation is used. We mentioned that are no previous preparations for the patients and we can perform at any time of day. The patient can remain clothed during the examination, except them which contain metals things.

The patient should be lying on the table, between X ray and detector. The detector in moving in the part interested, without pain, bites or discomfort. Entire examination is finished in 5- 10 minute.

DEXA provides us 2 important results: T score and Z score. T score: provides the result of a comparison between the patient bone density and a maximum bone density (in a 30 years old man, young and healthy). A T score less than -1 or more is NORMAL. The values between -1 and -2.5 suggest the osteopenia and less than - 2.5 means OSTEOPOROSIS.

Z score: compare the patient bone density with a bone density in a person with the same age, this appreciate the damaged/lost grade of bone tissue. A negative Z score means that the patient is having fragile bones, and a positive score means that the patient is in normal limits.

Is snoring dangerous?

Ileana M. Mateș

Snoring is a sleep disorder which often precludes overnight rest, but it is especially important as a symptom of more

serious respiratory disorders, such as the Syndrome of Sleep Apnea (SSA), the Obstructive Sleep Apnea (OSA) or the Syndrome of the Upper Airway Resistance (SUAR).

Snoring occurs when there is an obstruction to the flow of air into the area behind the nose and mouth, where the upper part of the pharynx and base of the tongue meet the soft palate and the uvula.

Severe snoring is often the symptom of serious health problems, with grave long-term effects, such as the obstructive sleep apnea (SAS).

In the sleep medicine a scale is commonly used to assess the degree of daytime sleepiness, called the Epworth Sleepiness Scale.

Hypertension and heart diseases are more common with people who snore, both men and women; moderate snoring involves a partial airway obstruction, and so an insufficient oxygenation during sleep – a fact which has serious consequences on the cardiovascular system.

In Western countries there is a wide range of products against snoring.

There are devices which prevent sleeping on the back or devices which change the position of the mandible.

If the snoring is very strong, an ENT doctor/otorhinolaryngologist will examine the nose, mouth, soft palate and throat and will indicate if it is necessary to correct a nasal obstruction (deviated septum or polyps). An examination in the sleep lab may be necessary in order to determine how serious the snoring is and if it is coupled with sleep apnea thus affecting the patient health.

Meniere's disease

Mihaela Arghir

Meniere's disease is a disorder of the inner ear, whose causes are not fully known. It is characterized by the build-up of fluid in the inner ear, caused by either anxiety, high blood pressure or excessive salt consumption.

An acute episode of Meniere's is characterized by the following symptoms: dizziness, nausea, vomiting, hearing loss, ringing in the ears, low tolerance for loud noises, headaches and a sensation of "full ears", sometimes before the episode begins.

Diagnosing Meniere's disease is managed by an otorhinolaryngologist, using techniques such as: tonal audiogram, electrocochleography, CT scans.

The treatment for Meniere's usually starts by using drugs which lower the fluid quantity in the inner ear, and thus the

pressure build up (diuretics).

The nurse – patient relationship

Georgeta Porojan, Alina Ispas

All medical care takes place in the framework of the nurse-patient relationship.

Communicating with the patient can bring together two people from different backgrounds, with different personalities, and different ways of seeing things. Therefore, the nurse-patient relationship is characterized through individuality and specificity.

The multiple times I've been the patient myself have given me the opportunity to better understand the point of view through which we, as medical professionals, are perceived. These experiences have also allowed me to ask myself about the ways we can better respond to the expectations a patient may have from the people who are in charge of their health care. This includes both the relationship between a single medical professional and a patient, and one between a team of health care professionals and a single patient. In spite of any differences, there's always a basic way to communicate with the patient, which answers most of their expectations: empathy.

I have had experiences in which I first focused on the "disease" before the patient. In order to avoid this situation, I considered six steps that I must always follow in order to see the patient as more than just a medical condition. These steps are: awareness, acceptance, responsibility, trust, purpose and integrity. Used in integrative psychotherapy, these six steps can provide an excellent framework for communication between medical professionals and patients.

Management of AAA – endovascular repair

Marinela Bosincianu, Elena Iftode, Mihaela Apostol, Roxana Constantin

Introduction: Abdominal aortic aneurysm is a multifactor disease that usually occurs in cardiovascular high risk patients and leads to death by rupture if not fixed on time. They are hemodynamic unstable, they need inotropic support and diagnostic is based on ultrasonography and computed tomography.

Objectives: Managing AAA needs pertinent screening and patient evaluation, in order to offer the best treatment,

providing a safe and cost effective operation, with the best long term quality of life.

Method: Between 2015 and 2016 were selected a total of 6 patients with AAA who presented a high risk to the classic operation and the surgical treatment options for AAA was EVAR.

EVAR is performed by an interventional radiologist and a vascular surgeon, using x-rays to guide medical instruments inside the arteries. The benefits of EVAR over traditional surgery are: no large abdominal surgical incision, no sutures (stitches), or sutures only at the groin area, faster recovery and shorter time in the hospital, no general anesthesia (in most cases), less pain, reduced complications.

Results: Was analyzed the postoperative evolution, showing the special role of nurses in intensive care.

Conclusions: The results show that in the modern era of AAA treatment, EVAR is a safe and effective in patients with high-risk short and medium term.

Healthcare of patients with TAVI

Marinela Bosincianu, Elena Iftode, Roxana Tudor, Elena Anghel

Introduction: Aortic stenosis is a narrowing of the valve orifice that is responsible for forming a barrier against

ventricular ejection during systole. Transcatheter aortic valve implantation (TAVI) involves inserting a new artificial heart valve inside the old tight valve using a balloon catheter.

The valve is made up of a metal frame (stent) and the outer lining (pericardium) of a cow's heart.

Objectives: TAVI is a new technique with the potential for transforming the treatment of patients with aortic stenosis, who are at high risk for conventional open heart surgery or considered inoperable.

Working method: Case of Study-in period 2015-2016 in our clinic have conducted a number of 8 (3 transapical si 5 transfemoral)

Results: Stenotic aortic valve disease distribution by age and gender, low rate of hospitalization days.

Conclusion: Cardiovascular surgery is performed by more modern methods that greatly reduce trauma, postoperative pain and risk of infection.

During the interventions of cardiovascular surgery plays an important role. The intervening period is shorter, the patient's chances of recovery are higher. In this type of implant, shorter hospital stay and faster recovery.

The role of nurses in health postoperative cares of patients, supervision and monitoring with TAVI, and to educate patients and learn, to lead a healthy life it is very important.

OP session NS4

Transverse myelitis

Daniela I. Bradea, Mihaela Ivănică, Ioana Catalina, Oana Iliășii

Transverse myelitis is a neurological condition in which the spinal cord is inflamed. The inflammation damages nerve fibers, and causes them to lose their myelin coating leading to decreased electrical conductivity in the central nervous system. Transverse implies that the inflammation extends across the entire width of the spinal cord.

Although it is a very rare affliction, with an incidence rate of 1.34 in a million (according to Association for Transverse Myelitis), this syndrome can strike at any age in both women and men, but it's mostly encountered between 10-19 years and after 40.

The patients who suffer from transverse myelitis recover differently depending on cause and severity of the illness. Almost 1/3 of these patients are completely recovered, for other 1/3 the results are average and for the last 1/3 the results are very low. The recovery is most efficient in the first 3-6 months after a transverse myelitis crisis and some of the patients need a few years for a total or partial recovery.

Benefits of the exploratory laparoscopy in acute surgical abdomen therapy

Claudia Buzatu, Daniela Mihai, Anca Pologea

With progress in methods of investigation and diagnosis, most of cases which goes to the hospital in emergency,

receiving preoperative indication of their disease. There are some cases in which preoperative was set just it's an acute surgical abdomen and that have operated. Here is where exploratory laparoscopy finds utility.

Also the exploratory laparoscopy contributes to complete partially elucidate preoperative diagnoses but with clear surgical indication.

In our general surgery department are operated in emergency between 250-300 patients with acute surgical abdomen. 15-20% of them receive benefits of exploratory laparoscopy.

This paper is a retrospective study of 684 patients operated in our service, in emergency conditions, in the last three years. 147 of them occurred through laparoscopic approach and laparoscopy was completed in 86 cases.

The paper is an according debate between pre and postoperative diagnosis, distribution by type of pathology and diseases in which laparoscopy had higher success rate.

Discussions aimed at length the advantages of exploratory laparoscopy in emergency conditions and diagnostic doubt.

The end of paper presents the conclusions that bring to the fore: shortening surgery; shortened hospitalization; rapid reintegration into family and society.

Gastroesophageal reflux disease

Alina Dinu, Anișoara Graure, Cristina Ioncescu

GERD has long been recognized as a significant public health concern in USA generating along the time, many discussion between gastroenterologists and surgeons. Once antireflux barrier was identified, and mechanism of reflux established, GERD can be defined as the failure of the antireflux barrier (represented especially by the lower esophageal sphincter, by gastric empty of gastric contents into the esophagus), allowing abnormal reflux of gastric contents into the esophagus. Positive diagnosis is setting by the presence of documented esophageal mucosal injury (esophagitis) or excessive reflux during 24 hours intra-endophageal pH monitoring. Medical treatment is efficient in acid suppression, but does not address the mechanical etiology, is too expansive and affect the quality of life of patients. Miniinvasive surgery was a boom in management of GERD, offering great satisfaction to patients, low costs and rapid social integration.

We present the role of surgery in GERD, therapy GERD which occur 85-93% control of reflux symptomatology, providing data from the literature on the techniques used, their

advantages and limitations.

Ovarian cancer

Luciana Cristache, Costinela Lazăr, Ștefania Aldea, Claudia Rădulescu

Ovarian cancer represents one of the most common malignancies that affect women. It has a high death rate because the symptoms are nonspecific and is diagnosed in very advanced stages when the tumor has already evolved and metastasized.

The surgical treatment for ovarian neoplasm includes surgical intervention in early stages, laparoscopic exploration in order to staging and harvesting tissue for biopsy and procedures for tumoral mass reduction.

Surgery for breast cancer

Florina Aslan, Luminița Ștefan-Dragomir, Viorica Gogor

Through this study I want to make a presentation about the surgery and its indications for breast cancer.

Most women with breast cancer have some type of surgery as part of their treatment. Depending on the situation, surgery may be done for different reasons. For example, surgery may be done to: remove as much of the cancer as possible (breast-conserving surgery or mastectomy); find out whether the cancer has spread to the lymph nodes under the arm (sentinel lymph node biopsy or axillary lymph node dissection); restore the breast's shape after the cancer is removed (breast reconstruction); relieve symptoms of advanced cancer.

There are two main types of surgery to remove breast cancer: breast-conserving surgery, mastectomy.

The study includes a short review about the breast cancer, describing the surgical procedure, its indications, surgical technique, incidents, complications, results, conclusions.

Bariatric surgery in the management of the cardiometabolic risk of extremely obese patients – case report

Tatiana Onofrei, Florentina Rogojină, Constanța Bandulea

Obesity has serious consequences on health and mortality. The general goals of every weight-loss program is to reduce

and maintain a lower body weight, or prevent further weight gain in individuals who cannot lose weight. The treatment options are lifestyle modification (diet, exercise, and behavioral modification), pharmacotherapy and bariatric surgery. The three most commonly performed bariatric procedures are laparoscopic adjustable gastric banding, laparoscopic sleeve gastrectomy and the Roux-en-Y gastric bypass.

Objective: we present the case of a woman with extreme obesity, poor controlled diabetes mellitus – treated with insulin, dyslipidemia and coronary artery disease. She was submitted to bariatric surgery – laparoscopic sleeve gastrectomy. After surgery she lost more than 30 kilograms, with a good glycemic control on metformin only. Hypertension, dyslipidemia and her heart condition improved.

Conclusions: surgery is the most effective means of inducing significant weight loss in individuals with extreme obesity who are at greater cardiometabolic risk.

Longer the waist line, shorter the lifeline – obesity associated comorbidities

Nicoleta Mavriș, Aglaia Nedelcu, Florentina Rogojină

Overweight and obesity are associated with the development of a number of comorbidities and increased mortality. Hypertension, dyslipidemia, coronary artery disease, congestive heart failure, stroke, diabetes mellitus, non-alcoholic fatty liver, sleep apnea, gallstones, polycystic ovarian syndrome, osteoarthritis and cancers are more frequent in obese patients.

Objective: to evaluate the prevalence of comorbidities in obese patients admitted in our department during the last 5 years.

Results: diabetes mellitus, cardiovascular and cerebrovascular diseases are the most frequent obesity associated comorbidities. These diseases have a major impact on mortality.

Menopause – between physiology and pathology

Andreea Serafim, Ancuța Istrate, Carmen Miron

Menopause and menopausal transition are physiologic, but symptoms are frequent and often require medical attention. Approximately 60% to 80% of menopausal women experience hot flashes at some point during menopausal

transition. They are more likely to develop anxiety symptoms at perimenopause and postmenopause and depressive symptoms or clinical depressive disorders in late perimenopause. Sleep disturbances are frequent.

Vaginal dryness and genital atrophy can cause sexual dysfunction. Lately, postmenopausal osteoporosis leads to increased morbidity and mortality as well as an important reduction of the quality of life as a consequence of fractures.

We present our experience with menopausal patients seeking medical attention in our department.

Macroprolactinoma in a diabetic patient with morbid obesity

Daniela Buzatu, Nicoleta Mavriș, Nicoleta Vale

Prolactinomas are prolactin secreting pituitary tumors that can occur between both sexes „the men’s unlike women’s macroprolactinomas predominates”. Clinical manifestations are given of prolactin hypersecretion „galactorrhea and gonadal dysfunctional”, related to tumor mass effect compression (neurologic and visual disturbances) and impairment of the other pituitary function.

We present a case of a 36 years old patient with macroprolactinoma and with 2 diabetes and morbid obesity, who has been presented for metabolic imbalance and visual disorder. The clinical exam was galactorrhea; disturbances of ocular motility and ptosis right eye, reduced visual acuity left eye; obesity (BMI = 42 kg/m²), erysipelas right leg. Endocrine profile: prolactin, FSH, LH, TSH, serum cortisol, ACTH, testosterone, showed: hyperprolactinemia (5960.62pg/ml) and hypogonadotropic hypogonadism. CT and MRI brain showed a voluminous sellar mass by 42.5/39/32 mm, with invasion of right cavernous sinus; optic chiasma and right orbital apex compression. The patient started treatment with: dopamine agonist drug – cabergolin in high dose and testosterone, treatment hypogonadotropic hypogonadism, treatment for diabetes mellitus for erysipelas.

After 1 month has a good evolution with remission the visual acuity (left eye), MRI – showed a reduction of 1 cm pituitary tumor size, and prolactin decreased to 2950 pg/ml.

Nurse involvement in breast cancer prevention

Margareta Popa

In the last 20 years, breast cancer failed to be an incurable disease, being considered lately as a chronic disease, a

curable disease and more important a disease which can be prevented.

Unlike other types of cancer, where a healthy style of life can prevent 70-80% of diseases, breast cancer has been always an exception.

There are many factors of risk coming into being breast cancer, factors we cannot control by our decisions: age over 50, blood relatives suffering from this disease, other breast previous diseases, excessive irradiation of mammary gland, precocious puberty (the first period before the age of 12), the late menopause (after 55), age of 30 for the first pregnancy, no birth, no nursing, contraceptive pills usage in the last 10 years, therapy for estrogen substitution, made more than 5 years in the last 10 years.

Nurse can have an important role in this, explaining all the risks the patients are exposed by ignoring the physician's

advice regarding breast cancer prophylaxis.

Ignorance, fear of diagnosis, lack of sanitary education, lack of determined programs for prevention and screening, in our country, lead to discover the diagnosis in an advanced stage of the disease, when the treatment is useless. In this case the patient sufferance is enormous.

Breast cancer is a disease which can be activated no matter when, to whom and no matter social status or how rich you are. We cannot blame God, the people around us, or us for this disease. In our era, in 21st century, breast cancer is a curable disease, especially if it is traced in an early stage.

Physicians as well as nurses are involved in the fight against breast cancer, and our task, the nurse's task is to penetrate the science, as close as she can, to the patient heart and conscience, offering them the strength for fighting against the disease and beating death.

OP session NS5

Infections with human papilloma virus (HPV)

Cristina Râșnoveanu

Human papilloma virus (HPV) is a very common virus that is spread through sexual contact.

The majority of sexually active people (about 75%) will have a HPV infection sometime during their life.

Most HPV infections go away by themselves. However, some „high risk” types of HPV might cause changes in cervical cells that might lead to cervical cancer.

With proper screening and early detection, cervical cancer has a high rate of cure. In order to diagnose early stages of cervical abnormalities we perform cervical smear (Pap-Test), HPV genotyping, colposcopy and guided biopsy.

Prevention and treatment of cervical cancer

Daniela Cuculea

Cervical cancer is a disease than can affect women of any age.

Cervical cancer is the second leading cause of cancer after breast cancer at women under age 45 years worldwide. Cervical cancer occurs more often at women who have started their sexual life earlier, living in an environment with

poor intimate hygiene and those who have multiple sex partners.

Cervical cancer can be prevented by regular testing (PAP smear test) and by anti-HPV vaccination. Cervical cancer should be diagnosed intraepithelial carcinoma phase, thus reducing the prevalence of invasive cancer and mortality.

It easier to detect cervical cancer than to treat.

Decentralizing public health service

Gabriela Amoșei

Once the society started to develop it has emerged the notion of public service.

The notion of public service is legal conceptualized by Article 4, paragraph c, of Law no. 178/2010, according to the public service is " all actions and activities which ensure the needs of general public interest or local collectivities."

The public service is organized and operates according to principles, namely: the principle of continuity; the principle of equality; the principle of adaptability.

Under these principles enters public health service, because this is vital for the community and must be provided continuously and permanently to every individual person regardless of nationality, age, gender, religious beliefs.

For a proper functioning of public services it has developed principles decentralization. Decentralization has occurred due to the fact that no matter how strong is the government, would not have a clear picture of all the problems facing the local community in each hand. Local communities, enjoying autonomy manage to identify best which are the needs of society and allocate the necessary resource where needed.

The legal provisions for decentralization of public service are found in the Article 195/2006, timber whom "Decentralization is the transfer of financial and administrative powers to the provision of public services from the central public authorities at the local government or the private sector."

In 10th of May 2009, the Government adopted the Strategy on decentralization in the health system. Decentralization in health care law provides for the establishment of The Regional Institutes of Emergency under the Ministry of Health, which provides that certain emergency hospitals will go into the structure of these institutes. In exchange, the hospitals and the public health departments, converted in Directions of Nursing, will be transferred to the administration of the local authorities.

After decentralization, the county hospitals will pass administered by county councils, the municipal administration ones into the municipal councils, and town and village hospitals in the local council administration. Subordinated to Ministry of Health will remain national research institutes, clinical institutes, regional hospitals and some hospitals declared of national interest, where advanced medical acts performed.

Two of the principles underlying the strategy to achieve the objectives of health refers to placing the patient, and citizens in general, in the center of the health system, along with the responsibility for the decision makers before it. This implies a major change in the decision-making mechanisms and accountability, so that the decision can be taken as close to where they are provided and used health services. In this way ensures a better fit for the health needs of the population along with direct accountability to those who take decisions in the community.

Simultaneously central structures, particularly the Ministry of Health which is retreating from local management, can focus on strategic functions, i.e. development of sectoral policies, supervision and guidance of the entire system, including outside activities that impact on health and developing cross-sectoral cooperation mechanisms and structures. This requires increasing the institutional capacity of the Ministry of Health, to meet these new roles and develop new structures at central and local level, along with the modification status of health units.

In this context it provides a strategy of decentralization of healthcare that responds to the goals of the Government Program and conducive to achieve effective right to healthcare provided by the Constitution. In analyzing the decentralization of the health units, there is a greater interference of politics in the act reorganization, so we can appreciate the decentralization of hospital administration as a win for Romania.

In conclusion, decentralization is a major challenge for healthcare delivery in general. The active involvement of managers in developing reforms based on decentralization, standardization of financial allocations, international norms and standards and impact monitoring is essential to ensure equity and quality medical services and to improve efficiency.

Liver's tumors

Imola Grigore, Liliana Badea, Mihaela Moscaliuc, Carmen Florea

Definition : It's the most frequently form of primary hepatic tumors (80-90%); for children is on second place after hepatoblastoma; it's more frequently met on men than women; it can be developed either on a normal liver or a cirrhotic liver (B or C virus)

The liver's anatomy: the largest gland in human body; it is formed by two lobes (left and right) and about eight segments
Favorable factors: consumption of anabolic steroids, cirrhosis, B or C hepatitis, low immunity, obesity, smoking (especially to people who is infected to B or C hepatic virus), poisoning with arsenic.

Signs and symptoms: loss of weight, loss of appetite, strong pains in the upper abdomen, nausea and vomiting, weakness and general fatigue, grown liver, swollen abdomen, whitish feces

Etiology: most frequently met: chronic liver disease and cirrhosis (about 60-90%), chronic hepatitis with B virus, chronic hepatitis with C virus, chronic hepatitis with both viruses, chronic hepatitis with alcohol intake etiology, negative viral markers; most rarely met: hereditary hemochromatosis, porphyria, autoimmune hepatitis, primary biliary cirrhosis, Wilson disease, steroid oral contraception.

Diagnostic: blood analyses, imagistic tests (CT, MRI), and liver's biopsy.

Treatment: surgical (partial hepatectomy), liver transplant, cryoablation and thermotherapy, chemoembolisation,

radiotherapy, pharmaceutical treatment (with Soranfenibul).

Nurse's role: takes biological samples, prepares the patients for radiology test, abdominal puncture, laparoscopy liver's biopsy and paracentesis, has to recognize and to watch for evolution and/or complication (hepatic coma or bleeding coma), and has to announce the doctor for any change or suspicions

Prevention: moderate alcohol consumption, to maintain the weight, vaccination against B/C viruses, personal hygiene measures.

Never use already used needles.

Communication in medical facilities

Nicoleta Voinea, Cristina Soare, Lucica Poenaru

Communication in medical facilities is a key component of public health and of the health care system. It comprises: patient-centered communication, communication between members of the same team, bedside manners (the ability of communicating with the patient), communication in emergency situation, communication in conflict situations.

We may consider that the three pillars of effective communication are: clear communication of the message, the patient's perfect understanding of what he is told and the patient's feeling that he is respected by the doctor.

Team communication is also very important, because members of a team working in a proper work environment can easily achieve their goals and have good results.

The best communication skills are: attention and sensitivity, empathy, respect, support and promoting partnership.

Emergency situation communication is critical and complex due to the dynamic and high level of stress atmosphere.

Conflict-situations communication is often difficult due to cultural differences and different perception of others and of the environment.

Communication in medical facilities is essential and leads to improvement of the population's health state.

Osteoporosis

Elena I. Vasilăţeanu, Daniela Cernat, Florentina Socol

Osteoporosis is a progressive bone disease that is characterized by a decrease in bone mass and density which can lead to an increased risk of fracture. It is a major health

problem and it affects especially older people.

Fractures are the most dangerous aspect of osteoporosis. The most common osteoporotic fractures are those of the wrist, spine, shoulder and hip.

The disease may be classified as primary type 1, primary type 2, or secondary. The form of osteoporosis most common in women after menopause is primary type 1 which is the osteoporosis of the spongy bone or post menopause osteoporosis. Primary type 2 osteoporosis or senile osteoporosis occurs when the patient is older than 75 years and is seen in both female and males are ratio of 2:1. Secondary osteoporosis may arise at any age and affects man and women equally. This form results from chronic predisposing medical problems or diseases or prolonged use of medication such as glucocorticoids.

There are many illnesses which can lead to osteoporosis:

- Endocrine disorders – hypothyroidism, type 1 diabetes;
- Hematologic disorders – multiple myeloma, leukemia;
- Gastrointestinal disorders – malabsorption, primary biliary cirrhosis;
- Medication – L thyroxin, Heparin, Methotrexate;
- Rheumatologic disorder – rheumatoid arthritis, ankylosing spondylitis;
- Smoking, excessive alcohol consumption.

The diagnosis of osteoporosis has few clinical signs but can be diagnosed using: Conventional radiography, measuring bone mineral density. Dual-energy X-rays absorption – the gold standard for the diagnosis of osteoporosis.

Medication: drug for osteoporosis are useful in decreasing the risk of future fractures by increasing bone synthesis and decreasing reabsorption:

Fosamax – once a day at the beginning, and then once a week, and then once a month;

Bonviva – once a day;

Fosavance – contains fosamax and alfa D3;

Prolia – can be helpful for preventing osteoporotic fragility fracture and decreasing the risk of vertebral and non-vertebral fractures.

Nurse perception of bispectral index monitoring during general anesthesia

Mariana Ilie

Introduction: Bispectral index monitoring system (BIS) is a technology used to monitor depth of anesthesia.

Material: BIS monitoring is used to measure the effects of anesthetic and sedative drugs on the brain and to track changes in the patient's level of sedation and hypnosis. BIS

monitoring provides information clinically relevant to the adjustment of dosages of sedating medication.

Method: The BIS monitor provides a number, which ranges from 0 (equivalent to EEG silence) to 100. A BIS value between 40 and 60 indicates an appropriate level for general anesthesia.

The essence of BIS monitoring is to take a complex signal (the EEG), analyze it, and process the result into a single number. When a patient is awake, the cerebral cortex is very active,

and the EEG (electroencephalography) reflects vigorous activity. When asleep or under general anesthesia, the pattern of activity changes.

Results: The advantages of using BIS monitoring are numerous, including a decrease in time to extubation, use of hypnotic anesthetic drugs, incidence of nausea and vomiting, and occurrence of intraoperative awareness.

It can help the nursing personnel in preventing under- and over sedation during general anesthesia.

OP session NS6

Spinal injury nursing assistance

V. Rădăuceanu, Stela Platon

Spinal injury is a spinal cord or trauma accompanied by total or partial compromise of the affected spinal segment function. Such deficiencies are installed and vegetative, motor and sensory reflexes.

Medullary tissue destruction is caused by trauma or disease of spinal cord injury spinal (accidents, falls, blows to the spine) acting in tissue degenerative medullary (transverse myelitis, multiple sclerosis etc) compression by tumors, vascular disorders, thromboembolism.

Platelet rich plasma PRP

Maria Sandu

PRP is the acronym for Platelet Rich Plasma. It is a concentrated source of autologous platelets containing several different growth factors that can stimulate healing of bone and soft tissue.

PRP is made from patients own whole blood. The whole blood contains plasma, red blood cells, white blood cells and platelets. Platelets are small discoid cells that contain clotting and growth factors. Blood typically contains 6% platelets whereas PRP has a significantly increased platelet concentration. Although this level can vary depending on the method of extraction and equipment, studies have shown that clinical benefit can be obtained if the PRP used has an increased platelet concentration of 4 times greater than normal blood.

The product is obtained by collecting a small amount of

whole blood from the patient which is afterwards centrifuged several times (depending on the method). The finite product (platelets enriched plasma) is then injected in the chosen area.

PRP is, in fact, an old therapy used in orthopedics, dentistry or sports medicine.

But only in the recent years has become well-known for the large public especially for its use in aesthetic medicine and surgery (the famous “vampire therapy”).

Inhaled medication

Adriana Chiru, Marinela Matei

The efficiency of a medication depends in equal measure, the preparation bioavailability and patient adherence to prescribed rules for its management.

If the oral preparations (solutions, tablets, etc.) the administration is relatively simple and well known, there are cases in which the patient must receive prior notice and sometimes even a practical demonstration to learn the correct administration of the product prescribed.

Inhaled pharmaceutical preparations, widely used for the treatment of acute or chronic respiratory diseases are a good example in this respect. Using the airway allows the administration of active substances with sympathomimetic bronchodilators such action mainly local or anticholinergic inflammatory or fixed combinations of those mentioned.

Inhaled medication has two major advantages: act very fast, very shortly after the drug reaches the bronchi; required much lower doses with fewer side effects, the same medication administered in tablets or injections.

There are several types of devices for administering drugs by inhalation such as sprays, dry powder inhalers, nebulizers.

Whatever type of device indicated for administration of inhaled medication, the patient must know exactly how to use it. Considering that the same active substance may be conditioned for various types of devices (e.g. Salbutamol - pressurized inhaler salbutamol – for nebulizer solution) to release the prescription the patient must receive all information regarding the administration technique. Careful reading of the instructions, followed by sequencing simulation management practice leads to learning the correct use of these devices and thus ensuring therapeutic efficiency act.

Nursing interventions in obstructive sleep apnea

Cristina Radu, Gabriela Drilea, Mariana Lazurcă

Sleep apnea is a breathing disorder and it occurs during sleeping. The condition is characterized by stoppage of breathing for ten seconds or longer and at least five times per hour. Sleep apnea is becoming a major health problem all over the world. Officially, about 800.000 adults in Romania have sleep apnea and in the same time many people may have the illness but they don't know it.

The nurses have an increased responsibility in the identification the symptoms, education and management of patients who are suffering from sleep apnea.

CPAP (Continuous Positive Airway Pressure) is the most effective form of treatment for sleep apnea but intolerance and incomplete compliance has made it difficult for efficacy. The most common interventions are related to CPAP equipment and physical, psychological and social-economic side-effects. Some important aspects of nursing interventions are referred to change the patient's lifestyle because many of them are obese, smokers.

Nurses' awareness and good knowledge help to increase the compliance to the treatment and minimize the side effects because can be a real risk that a patient with a negative experience may not persevere with the treatment plan for long-term period.

Sputum prelevation in tuberculosis diagnosis

Simona Bran, Mădălina Preda, Mihaela Mirea

Sputum represents all that is expelled secretions in the airway by coughing. Sputum represents the best product for

finding Koch's bacillus in the diagnosis of pulmonary tuberculosis.

Harvesting sputum in the morning, before eating or drug administration gives the highest rate of positivity in the diagnosis of pulmonary tuberculosis, even in patients who don't cough and cough up a little. Getting positive diagnosis in Tuberculosis increases if 2-3 sputum samples, collected within 24-48 hours, are examined.

In people who do not cough, or swallow the sputum, special techniques are applied to produce and collect sputum: aerosol, larynx - tracheal lavage with sterile saline, gastric tubing using probes Nelaton or Einhorn, bronchial aspirate or broncho-alveolar lavage by fibrobronchoscopy.

A properly pathological material consists of a recently removed from the bronchial tree, with minimal amounts of oral or nasal secretions, and of satisfactory quality on the presence of a mucoid or mucopurulent material in an amount of at least 1.3 ml.

Transport to the laboratory must be immediately after harvest or maximum 24h after.

What are the potential complications of bronchoscopy?

Tatiana Lazăr, Mirela Barbu, Luminița Atudori

Bronchoscopy is a procedure during in which an examiner uses a viewing tube to evaluate a patient's lung and airways including the larynx, trachea, and many branches of bronchus.

Bronchoscopy is usually performed by a pulmonologist or a thoracic surgeon. Although a bronchoscope does not allow for direct viewing and inspection of the lung tissue itself, samples of the lung tissue can be biopsied through the bronchoscope for examination in the laboratory.

Bronchoscopy can be used for diagnosis or treatment.

Complications of bronchoscopy are relatively rare and most often minor. It is important to realize that all procedures may involve risk or complications from both known and unforeseen causes, because individual patients vary in their anatomy and response to medications.

Therefore, there is no guarantee that a procedure can be free of complications. The following is a list of potential complications: vocal cord injury, irregular heartbeats, lack of oxygen to the body's tissues, heart injury due to medications or lack of oxygen, bleeding from the site of biopsy, punctured lung (pneumothorax), and complications from pre-medications or general anesthesia.

Exacerbation of chronic obstructive bronchopneumopathy

Vasilica Ionescu, Mariana Tănăsescu, Doina Andrei

Obstructive chronic bronchopneumopathy is an illness characterized by the limitation of the airways' airflow, incompletely reversible, limitation which is usually progressive and is accompanied by a systemic and pulmonary abnormal inflammatory answer regarding harmful particles or gases, especially the cigarette smoke.

COPD exacerbation is defined as an acute event in the natural evolution of the illness characterized by the modification of the dyspnea degree, of the cough and/or of the patients' expectorations, besides the daily variations which lead to the modification of the medication.

Exacerbations are important events during the evolution of the illness because it affects patients' life quality in a negative way, it requires weeks of recovery, accelerates the declining rate of the pulmonary functions, and are associated with a high rate of mortality, especially for those who need hospitalization which consequently implies high economic and social costs.

The treatment of exacerbation consists in oxygen therapy, inhalator bronchodilators administration with the help of a spacer or nebulization, oral corticosteroids or i.v. and antibiotics when there are signs of bacterial infection.

Patients' education represents an important method to improve their capacity of understanding this illness, to successfully make them give up smoking, to make them understand the aspects of their changing health in order to easily deal with exacerbations.

Minimally invasive repair for pectus excavatum

Emilia G. Raicu

Pectus excavatum is an abnormal development of the rib cage in which the breastbone (sternum) grows inward, which causes a sunken chest wall. Sometimes called "funnel chest," pectus excavatum is often present at birth (congenital) and can be mild or severe. If left untreated, pectus excavatum can sometimes cause compression (pressure) of the heart and lungs.

Pectus excavatum occurs in approximately 1 out of 400 children and is three to five times more common in males than females and it is diagnosed at birth or in the first year of life.

Genetic predisposition and stuffy sternum is sometimes

associated with scoliosis, Marfan syndrome, Poland Syndrome, Noonan Syndrome, Turner Syndrome, Marfan syndrome.

The actual process of correction is minimally-invasive procedure, invented in 1987 by Dr. Donald Nuss for treating pectus excavatum.

After the Nuss procedure, children will return to school after two – three weeks and once fully recovered can return to daily activities.

Nuss procedure is an effective method with good aesthetic and functional results.

Preparing for digestive endoscopy

Aurica Avram, Mariana Moldoveanu, Monica Nicolescu, Daniela Tanasov

Preparing for digestive endoscopy includes general measures, necessary for all the endoscopic procedures and specific measures, related to the examined segment and the endoscopic procedures provided.

The first step in preparation is to establish the indication for the investigation.

Depending on the indication, the nurse is preparing the endoscopic accessories needed- biopsy forceps, polypectomy loops, variceal banding devices, etc. The discussion with the patient needs to address investigation purpose, description and estimated duration, the risks and benefits. An informed consent needs to be signed.

Before and during endoscopic procedures, medication may be used to diminish gastrointestinal motility, decrease the patient's anxiety or discomfort, and provide amnesia of the stressful intervention.

Before starting endoscopy, the medical personnel needs to be prepared to monitor vital signs (heart rate, oxygen saturation, blood pressure), especially in patients with cardiorespiratory pathology.

As a specific measure for the upper gastrointestinal endoscopy, patients shouldn't ingest any solids for at least 6 hours before the procedure. For the colonoscopy, the colon needs to be cleansed of fecal material before the examination.

An oral purge with 2 to 4 liters of electrolyte lavage solution, after a short period of dietary restriction, and in some cases followed by enemas, results in adequately prepared colons.

Issues in caring for patients with gastrostomy

Iuliana Ghinea, Corina Marcovici, Petrica Gheorghe

Endoscopic gastrostomy is an intervention consisting in the creation of a direct link between the gastric cavity and the external environment through a catheter insertion.

Gastrostomy is a technique of nutrition “in- extremis”, which in limited situation such tumors of the head and neck, radiation therapy of the head and neck region, head and neck trauma, nutritional difficulties after stroke, demyelination disease, dementia, allows life to continue, and leads to a relative normality feeding patient with fragmented, soluble food. The feeding tube can be temporary or permanent, depending on the reason of the intervention.

Innovation and continuity – attributes of gastrostomy – two words that apparently can’t be places in the same sentence

– are working together this time. The innovation in medicine through this technique supports life patient to continue his living and give back the person to society. The individual may conduct his existence in the familial environment and not laying on a hospital bed connected to infusion and nasogastric feeding tube, waiting for a lifesaving surgery or the end.

The endoscopic gastrostomy was first performed in 1980 by Gauderer and Ponski, and has the following advantages versus the surgical gastrostomy: short mounting time, elimination of general anesthesia, it lowers the risk of complication and has a good rapport cost/efficiency. It has a success rate of 95% of the cases.

The medicine comes again with solutions to the need of feeding and hydration the patient and the role of medical team is to ease the patient’s situation with such problems for short or long term.

OP session NS7

Erysipelas – dermatologic emergency

Liliana Lăța, Dana Papa

Definition: Erysipelas is a localized skin infection caused by bacteria (β hemolytic group A Streptococcus, Staphylococci).

Pathogenesis: Skin infection can occur due to: a breach in the skin barrier (wounds, fungal infections, burns, venous leg ulcers); an infected nearby mucosa (pharyngitis, rhinopharyngitis, and suppurative otitis media); lymphatic dissemination (streptococcal lymphangitis); hematogenous dissemination – exceptionally (septicemia).

Symptoms: sudden onset with fever (39-40 degrees Celsius) and chills; erythematous plaque of erysipelas appears 6 to 12 hours from onset.

How should the nurse manage the case: immediately after recognizing the signs of the infection, let the doctor know in order to plan the therapeutic management; meanwhile, the nurse applies a protective wet dressing with antiseptics locally (Rivanol, 2% boric acid solution); the nurse should administer antipyretic medication and closely monitor the patient’s temperature, pulse, blood pressure and the overall health state; explain to the patient what is going on, that the temperature and chills are part of the disease’s clinical manifestations and what the possible future reactions are; educate the patient regarding the body’s hygiene.

Sepsis – nurse’s role in managing septic patient

Liliana Mocanu, M. Stanciu, E. Fărcășanu, C.B. Teușdea, S. Dogaru

Sepsis is a main presentation reason for reporting to the emergency department and hospital admission, being one of the major causes for death in non-cardiac intensive care units. Costs are increasing and reported incidence is higher than ever due to longer life span. Sepsis survivors have often long-term physical, psychological and cognitive comorbidities.

Time is essential in this equation and fast response to organ dysfunction is a key component for sepsis management. Septic patient is always an unpredictable one and nurse’s role is essential in diagnosis and treatment optimization.

What you need to be an emergency nurse within the Emergency Department

Liliana Mocanu, M. Stanciu, M. Fleican, E. Fărcășanu, M. Toma, C.B. Teușdea

A question is always is rise: the real emergency nursing seems with a television program? Anyone can do this job?

My answer is NO. The emergency nursing is unpredictable, dramatic, challenging, and requires a team effort. As will present the emergency nursing is for some of us, and clearly not for everyone.

What you need to be an emergency nurse within the Emergency Department? Consider the following factors: 1. know yourself, 2. must have good assessment skills, 3. strong knowledge base in every area of nursing, 4. Critical thinking and sharp decision making, 5. Good communication skills.

As the health care system and technology advance, there will always be a need for emergency care and emergency nurses.

Current standards for non-invasive assessment of liver fibrosis

Magdalena Chiriac, Veronica Niculiță, Liliana Bulat

Chronic liver diseases of various etiology (viral, alcoholic, and metabolic) constitute a significant proportion of pathology seen in a gastroenterology department. By complications that arise in their evolution, chronic liver diseases are an important cause of morbidity and mortality and carry a significant burden for health systems. According to the latest epidemiological data, in Romania there is a high prevalence of hepatitis B and C infections, 4.2% and 5.6% respectively, but much of the chronic liver diseases are caused by chronic alcohol intake and recently there has been an increase in the frequency of fatty liver disease (encompassing steatohepatitis, steatofibrosis and ultimately cirrhosis).

For staging of the disease, assessment of fibrosis severity and guiding treatment decisions, the gold standard until a few decades ago was represented by liver biopsy. The maneuver is invasive, carries risk of complications (bleeding, infection, damage to nearby organs), has come contraindications (coagulopathy, severe thrombocytopenia, ascites) and evaluates fibrosis in only one point in the liver parenchyma; however, considering the heterogeneous distribution of fibrosis in the liver, biopsy may underestimate the overall hepatic fibrosis.

In this setting a particular interest emerged to develop non-invasive methods for the quantification of liver fibrosis and there are now several diagnostic tools available: algorithms based on serum markers (Fibromax), transient elastography (Fibroscan, Echosens, Paris) ARFI elastography (Acoustic Radiation Force Impulse imaging), shear-wave elastography and not least magnetic resonance elastography.

Fibromax is a combination of 5 noninvasive tests (Fibrotest, ActiTest, SteatoTest, NashTest, AshTest) to assess fibrosis, steatosis and necro-inflammatory activity of the liver. The

method involves the collection of blood and dosing of some surrogate markers of fibrosis, which are introduced into an algorithm with high diagnostic accuracy for fibrosis.

Fibroscan is a method of elastography which involves the transmission of pulses by means of a transducer to the hepatic parenchyma, and assesses fibrosis based on the reflection speed of these waves transmitted to the liver. The method is simple, quick, non-invasive, repeatable and painless. In addition, the add-on module CAP (Controlled Attenuation Parameter) can also give an estimation about the degree of hepatic steatosis.

These tests are available in our clinic and there is a rich experience with their use in patients with chronic viral hepatitis (B, C), as well as in those with alcoholic liver disease. As the literature has shown a good concordance of these non-invasive tests with liver biopsy, they can be used with confidence for fibrosis evaluation and monitoring of patients with chronic liver diseases.

Hemoptysis

Marcela Brighiu, Camelia Militaru

Introduction: Hemoptysis is the expectoration of varying amounts of blood from the airways. Hemoptysis is manifested by eliminating blood through the mouth (mixed with air, so "frothy with mucus") from the airways.

Material and method: This paper presents the classification, etiology, symptomatology, differential diagnosis, treatment indications and the treatment for hemoptysis.

Discussion: It is desirable for the treatment of hemoptysis to be applied at the place where hemoptysis occurred, avoiding the transportation (jerks, agitation), whatever the means of transport at hand. Best for the patient is to sit quietly and not to move, unless he receives emergency healthcare or is transported to a medical facility. Transportation will nevertheless be required if the doctor considers that a medical intervention cannot be performed without an emergency and surgery service, equipped with the appropriate equipment.

Conclusion: Hemoptysis is a medical emergency, even in small quantity. Its evolution may be serious or even critical.

Clostridium Difficile infection – a nurse`s point of view

Mariana Bogriceanu, Elena Zanfir, Stela Belea

Introduction: Our objective is to review current guidelines in managing Clostridium difficile colitis and our department`s experience in this field.

Materials and methods: Clostridium difficile is a Gram-positive spore-forming anaerobe that was identified, beginning with 1978 as the causative pathogen in the majority of antibiotic-associated diarrhea and colitis cases. It is believed that a small percent of healthy individuals have this bacterium in their colon, but it is more often found in the ground, water, animal or human feces, C. difficile being a growing cause for nosocomial disease.

The most common risk factor for C. difficile infection is the use of antibiotics, as they can disrupt the normal microbial balance in the colon.

This bacterium is dangerous because it can secrete two toxins (A and B) that cause inflammation of the colonic mucosae, which can lead to moderate diarrhea, pseudomembranous colitis (most frequent form) or fulminant colitis. If the physician suspects a C. difficile infection, it is the nurse`s task to explain to the patient how to collect a stool sample and take it as fast as possible to the laboratory.

After infection is confirmed, it is up to the nurse to assure contact precautions: isolate the patient with single use gowns and gloves being available at room entrance; environmental disinfection; explaining the importance of hand hygiene and of course making sure that the patient takes his medication correctly, according to the physician`s recommendations.

Results and conclusion: C. difficile colitis has become the most frequent infectious cause of healthcare-associated diarrhea, causing high morbidity and mortality, mainly because of the use of broad-spectrum antibiotics.

The team working in the recovery of hemiplegic patients after stroke

Ecaterina Dane, Natașa Corpodeanu, Laura Iosif

Stroke is a brain infarction in ischemia or hemorrhage leading to discontinuation function.

Stroke is installed suddenly and is characterized by a neurological deficit, hemiparesis or hemiplegia known as half a body, depending on severity. 80% of strokes occur in the carotid arterial distribution and consist of muscle

weakness of a body part (face, arm or leg, in any combination).

The incidence of stroke has declined in recent years, despite the aging of the population due to changing lifestyle, use of antiplatelet and proper treatment of heart disease. Yet the incidence of stroke increases with age. Risk factors for the disease include age, high blood pressure (hypertension), heart deficiency, history of stroke, transient ischemic attacks, diabetes.

Post-stroke recovery involves using compensatory techniques for mobility, the use of daily activities or ADL (activities of daily living) and promoting communication. AVC limited prognosis for recovery is given by the following elements: severe memory problems, the inability to understand commands, medical or surgical instability, previous stroke, sphincter incontinence, visual spatial deficits.

Routine diagnostic evaluation include: CT scan (computerized axial tomography) of the cephalic extremity, electroencephalogram (EEG), MRI, carotid Doppler studies, assessment of heart (echocardiogram, EKG), blood tests routinely. Patients post-stroke recovery starting in the acute phase and the recovery post-stroke uncomplicated, stable medically is done using passive and the active mobilization helped (assisted daily), tilting the bed and identifying communication deficits. Subsequently, the patient is sent to physiotherapy or occupational therapy wheelchair. Inpatient practicing transfer activities (in bed in a wheelchair and back), the preparatory activities for walking, daily activity or practicing self-care ADL and coating, communications training, following a therapy that addresses swallowing.

The effect of application interference current in scapulohumeral periarthritis

Georgeta Matei, Margareta Bărgăoanu, Laura Iosif

Periarthritis scapular humeral is a clinical syndrome characterized by pain in the shoulder and by stiffness caused by degenerative lesions and inflammation of the tendons and exchanges of the second joint of the shoulder, accompanied by limited arm movement, no signs of damage to the joint scapular humeral. After rheumatologist French Seze describing these clinical forms: simple shoulder pain, acute painful shoulder, shoulder blocked, pseudoparalytic shoulder joint and shoulder. Treatment aims to relieve the pain, combat inflammation and fibrosis trend, to improve joint mobility. It includes: segmental rest, anti-inflammatory and analgesic drugs, hydrotherapy, electrotherapy

analgesic, massage, physical therapy.

Electrotherapy physiotherapy is part of the physical agent that uses artificial electric current applied to the body, either directly or indirectly.

Medium frequency currents are AC (sinusoidal) whose frequency is the thousands of hertz (1000-50000) and tens of thousands of Hz.

Interferential current effects: excitomotor – on striated muscle; muscle relaxant – obtained by average frequency (12-35 Hz) especially variable frequency between 0 - 100 Hz; analgesic effect; action on smooth muscles excitomotorie;

Contraindications: The application of medium frequency currents in the chest region; Neoplastic processes (electrotherapy represents an excitation, so worse malignant process); in acute inflammatory processes in first states, where the decompensated heart disease and hypertension age; in scapulohumeral rheumatoid disease, the patient is applied on the painful shoulder type plate electrodes that are introduced in size synthetic coating texture previously dampened appropriate, may also apply vacuum or suction cup electrodes.

After treatment with interferential current combined with a program of analytical kinesiology, joint pain and inflammation disappears in all cases.

Nursing essentials for patients with lung cancer

Niculina Predescu

Treating patients with lung cancer can give a nurse one of the biggest professional satisfactions, in spite of the disastrous evolution of this disease.

Novel surgical techniques made possible an increase of these

patients' survival rate.

This paper describes the most important aspects in the nursery of these patients: anatomy and physiology of the respiratory system; diagnosis of lung cancer; treatment and surgical techniques; nursing of patients with lung cancer

Despite a sustained work for over 25 years, lung cancer still represents a terrible killer. This is the reason why the nurses are actively involved in the nursing team, their actions being mandatory in order to have a long lasting recovery for these patients.

The nurse's role in cardiac rhythm disorders management in the ED

Tatiana Pană, Beatrice Ibănescu, Steluța Petrescu, Geanina Durlea

The nurse's role in early detection of cardiac rhythm disorders is extremely important considering the fact that in most cases the nurse is the first person who comes into contact with the patient and also the one who manages monitoring.

It is crucial for nurses to be educated and able to assess the gravity of the situation, especially in the ER department where time is of the essence. Education of course starts in nursing school but must be continued throughout the whole career.

The purpose of the present paper is to make a review of the most important cardiac rhythm disorders, the most common that present in the ED and the symptoms that are usually associated with them as well as taking a look at the types of patients that require cardiac monitoring and the methods that we use to ensure their proper care.

OP session NS8

Romanian medical team experience in field operations

Vasilica Mihis, Liliana Mocanu, M. Stanciu, M. Fleican, E. Fărcășanu, C.B. Teușdea

Since 1991 the Romanian army participated in missions under UN auspices to create a new architecture for peace, cooperation and stability in the world. That's why a

Romanian field military hospital participated in mission in Iraq during the first Gulf War in 1991, but only for a month.

The first test took place after two years, when the field Romanian military hospital participated in the mission in Somalia (UNOSOM II) which was intended to treat military personnel involved in the peace mission, but treated and civilians (approx. 80 % of patients) victims of civil war.

Medical teams have performed medical triage, primary

survey, resuscitation, secondary survey, surgical interventions and intensive treated patients who had or were brought to the ED of the field Romanian military hospital.

Kaposi sarcoma patients nursing – a challenge for quality care

Ioana Moisei, Andreea Mihai, Irina Vaciu

Definitions: Kaposi sarcoma is an endothelial cells neoplasia presenting with multiple vascular nodules, affecting both skin and other organs.

Clinical aspects: Kaposi sarcoma may be classified in four types: epidemic (HIV infection associated), immune-compromised, classical (sporadic) and endemic.

Kaposi sarcoma appears as red-purpuric macules or papules/nodules at any level of skin or mucous membranes. Initially, the lesions are small, painless, but may evolve with ulceration and became painful. Usually first lesions appear at legs, most of the times associating edema.

Treatment: nursing interventions are based mostly on: pain monitoring (pain killer drugs administration and comfortable body positions) and skin integrity monitoring. Digestive and respiratory functions also must be monitored. The nurse also monitors chemotherapy and radiotherapy side effects (nausea, anorexia, diarrhea and dizziness).

Kaposi sarcoma may have a favorable evolution. Yet, internal lesions can promote bleeding, sometimes massive, obstructions or organ perforations, amputations.

Kaposi sarcoma is an incurable disease but that may be controlled.

Actinic keratosis – real danger of today?

Irina Vaciu, Lucața Teșă, F. Pieptea

Definition: Actinic keratosis (AK), also known as solar keratosis, is a precancerous lesion of the skin, usually appearing on long time sun exposed skin, mostly involving upper and lower limbs, face, nose and ears.

Clinical aspects: actinic lesions appear as keratotic plaques, yellowish-dark, 0.5 to 1.5 cm in diameter, either plane or slightly elevated.

Pathologic examination may show any of the following aspects: hypertrophy, akantolysis, atrophy, Bowenoid aspect or pigmentations. It may also define malignant

transformation in spinocellular carcinoma.

Nursing roles are: prophylaxis, education, diagnostic (signs of infection, irritation), topical treatment correct application.

Complications may be present: bleeding secondary to electrocoagulation treatment, hard to cooperate with patients (self-medication such propolis, plants, tinctures etc, that may complicate post-operative plagues), extended and hard to reach areas.

A history of anesthetic practice

Tudora Băraru

The presentation have assayed to review briefly the history of anesthesia specialty and to define the scope of anesthesiology, which even seems secure, but not yet mature and fully differentiated. Anesthesia is considered an American invention, although anyone who examines history will understand that innovation of such significance can hardly have arisen spontaneously.

In addition to the concept of standard of care, another kind of standards has grown in evidentiary importance. Organizations such as European Society of Anesthesia and the Romanian Society of Anesthesia as well as hospitals and departments, promulgate standards and procedural manuals or directive.

Operations had been performed over the centuries but always for simple affections such as fractures, amputation, cataract extraction, trephination of the skull, or removal of bladder calculus. After 1960, in our country, valuable anesthetic practice developed and even improved due to the technological progress of medical and monitoring equipment along with medical substances.

Cardiovascular diseases

M. Lefter, V. Scarlat, N. Vasile

The term "cardiovascular disease" (CVD) is attributed to a multiple diseases affecting the heart and blood vessels, and among them an ischemic cardiomyopathy (IC), cerebrovascular disorder, (high blood pressure) or peripheral arterial disease (PAD).

Other cardiovascular disease are myocarditis (heart condition causes rheumatic fever) and congenital heart disease (heart malformations present at birth).

CVD is associated with heart attacks (myocardial infarction), angina and stroke.

Obstructive sleep apnea

M. Lefter, Mirela Barbu, M. Ene

Obstructive sleep apnea, is also known as apnea-hypopnea syndrome and obstructive sleep (SAS) – is a sleep disorder that involves substantial diminution or cessation of airflow inspired.

This is the most common type of sleep disorder and is characterized by recurrent episodes of airway blockage during sleep for 10 seconds more, leading to significant reductions in blood oxygen levels.

As a result, shallow sleep or waking phase comes total increases muscle tone in the throat and larynx to restore patency.

Status is followed by a series of deep breaths, usually with loud snoring. SAS patients have increased risk of developing heart diseases, hypertension, diabetes, disorders of potency.

Daytime sleepiness, memory and attention disorders can cause a car or work accident.

Tongue cancer

Nicoleta Ghica, Dorina Dumitru, Valentina Budai

Among all etiological factors potentially existent in the western world, tobacco and tobacco derivate use is primarily associated with the tongue cancer.

Tongue cancer represents the most frequent malignant oral form, having a more prognosis, especially in cases which are not discovered in earlier stages.

Tongue cancer requires specific client investigations.

Inner portion mandible abscess

Camelia Preda, Andreea Badea, Nicoleta Călin

Submaxillary area is situated in the inner horizontal arm of the mandible, having the mylohioidian, hypoglossal muscles and the mouth floor mucosa as the upper and medial limits.

Below and downwards is limited by the superficial cervical fascia.

Inner portion mandible abscedates as a result of septic

processes developed in the inferior molars.

Clinical manifestations induced by teeth recesses are extremely varied and the treatment may be either very simple, either very difficult sometimes, requiring large surgical procedures, interdisciplinary assessment, specific medical treatment and a close patient care.

Biological treatments in R.A. (Abatacept)

Liliana I. Predescu, Aura Mandachi, Gina Pană

Rheumatoid arthritis is an autoimmune disease of the connective tissue of unknown etiology with a sampler of about 1% in the general population. Featuring through a symmetrical synovitis erosive, deforming and destructive arthropathy by systemic and extra-articular manifestations (rheumatoid nodules). The evolution of chronic, fluctuating disease, untreated can lead to progressive joint destruction, deformity accompanied by permanent joint with a motor deficits and reduction of life expectancy.

The advent of biological therapy within rheumatological was the beginning of a new era because the treatment had on hand until then it was limited.

Abatacept in combination with methotrexate is indicated for the treatment of active moderate/severe R.A. on adult patients who have insufficient response or intolerance to other disease-modifying anti-rheumatic drugs.

Abatacept (SC): each pre-filled syringe contains 125 mg of abatacept in 1 ml solution for injection. The content must be clear, colorless to pale yellow and is administered once a week.

Keep in the original packaging, protected from light, refrigerated (2-8° C), do not freeze. The liquid level must be above the line of control.

Preparing injection site: 30-60 minutes prior to administration remove the pre-filled syringe from refrigerator and leave at room temperature. Do not use heat sources to accelerate the heating of! Avoid region diameter of 5 cm around the navel. Do not inject into areas where the skin hypersensitivity, damage or crusting, swelling, tissue endured.

Choose a different place for the next administration injections (at least 3 cm from the previous).

Wipe in a circular motion the place chosen for injection with a pad soaked in rubbing alcohol and allow to dry.

Undesirable effects: headache, nausea and upper respiratory tract infections, fatigue, asthenia, erythema, pruritus, dyspnea.

OP session NS9

Schizophrenia

Lidia Dobrinescu, Cecilia Bizon

Schizophrenia involves a range of signs and symptoms including disturbances in sense of self and interpersonal communication. Deficits in functioning are observed in daily living family life, social interactions and employment.

Schizophrenia is an endogenous psychosis that most commonly occurs in late adolescence and early adulthood (15-40 years) affecting the self-identity, social interactions and interpersonal relationships.

People diagnosed with schizophrenia usually experience a combination of positive symptoms (hallucinations, delusions, transparency-influence syndrome), negative symptoms (low energy, lack of emotions, poor or nonexistent social functioning) and cognitive symptoms (disorganized thoughts, speech and behaviors).

Continuous signs of the disturbance persist for at least 6 months. The course of schizophrenia is typically marked by alternating periods of remission and relapse. Episodes of relapse have significant implications both in terms of cost of health care as the personal implications of loss of functioning for the individual.

Schizophrenia is often described in terms of positive, negative and cognitive symptoms.

Positive symptoms include: transparency-influence syndrome, hallucinations, and delusions.

Negative symptoms include: apathy, depersonalization, ambivalence, social withdrawal, disorganized thinking and behaviors, deficits in attention, working memory, deficits in processing speed, verbal fluency, disorganized thinking: derailment or loose associations, abnormal social behavior; suicide attempt, homicide pyromania; theft.

The panic attack and panic disorder

Nicoleta Ene, Valentina Dinoiu, D. Vasilache

The panic attack is a sudden burst of fear or anxiety (an affective state which is characterized by psychomotor restlessness and unknown fear, without object) which causes patients alarming symptoms, but is not life threatening: accelerated heart rate, difficulty to breathe, a feeling of losing control or imminent death. Usually, it lasts from 5 to 20 minutes, and can be caused by stressful

situation or it can appear unexpectedly.

Panic disorder are diagnosed when a person has repeated panic attacks, is concerned about having a new one, and so avoids places that could trigger one. There is a possibility that a person could have panic attacks without it becoming a panic disorder, these attacks appear with anxiety disorder.

Causes: the exact cause of panic disorders is unknown. It is believed that is because of a chemical imbalance in the brain (neurotransmitters).

Risk factors: a history of panic disorders in the family, alcohol consumption, mitral valve prolapsed, previous sudden panic attacks.

Symptoms: the most important symptom of all is feeling of overwhelming fear and anxiety, along with other physical symptoms.

Pathophysiological mechanism: panic disorder can be diagnosed after some sudden panic attacks and continuous fear.

Treatment: initial treatment, maintenance treatment, ambulatory treatment.

Prophylaxis: panic disorders cannot be prevented. The bare avoidance of situation and places cannot guarantee that a panic attack will not happen under new circumstances.

The benefits of breast feeding

Ionela Brăiloiu

For most of us, breast feeding is one of the earliest events that helped determine our health for the rest of our lives. And while this is in the past for us and cannot be changed, it is yet to be determined for today's and tomorrow's babies. In this presentation, we look at the importance of breast feeding, the proper ways to breast feed including the correct positions for the mother and the baby and dietary tips for the mother.

We also discuss the medical and social benefits of breast feeding for the mother and for the baby, as well as pointing out problems that may arise during breast feeding, together with methods of avoiding or diminishing their impact. The first months of a baby's life is one of the most important periods for him or her, and also for the new mother – let's do it the right way.

Zika virus

Roxana Vasilescu

Zika virus is a mosquito-borne illness that is spread by the two *Aedes* species of mosquito – *Aedes albopictus*, known as the Asian Tiger mosquito, and the *Aedes aegypti* species. This species is mostly active during the day. These mosquitoes can survive in both indoor and outdoor environments.

Zika virus cases typically occur in tropical climates such as Brazil, Colombia, Paraguay, Suriname, Venezuela and French Guiana. The World Health Organization (WHO) declared that the Zika virus outbreak constituted a Public Health Emergency of International Concern on 1 February 2016.

Signs and symptoms of Zika virus are vague and can last for up to a week. Diagnosis of the virus is typically confirmed with a blood test.

Zika infection can spread from a mother to a fetus during pregnancy. What is also of great concern is that the virus can be transmitted by sexual intercourse.

A growing concern that is currently under investigation is a possible link between maternal Zika virus infection and infant microcephaly. Brazil in particular has seen a surge in infants born with microcephaly.

At present, there is no special treatment for the virus and avoiding mosquito bites is a key aspect of prevention. There is currently no vaccine to protect against the disease.

Romania's Health Ministry has received a confirmation of a three cases of Zika virus infection of a Romanian citizens outside the country: a young women coming from Martinica, a 10 year-old boy who lives with his family in French Guyana and a men return from Dominic Republic – people traveling to areas with Zika.

Global alert about Zika virus requires special measures in Romania. Institute of Public Health has asked all municipalities to take a combination of methods to prevent and control mosquitoes that spread viruses.

Doppler ultrasound in thyroid pathology

Daniela Zavragiu, Paula Sima, Cătălina Bejan Borangic

Ultrasonography or Ultrasound is a method of imaging examination that uses ultrasounds reflected by the human body as a vector of medical information.

The Doppler Effect is a physical effect described by Christian Andreas Doppler (1803-1853) in 1842.

This effect defines the wavelength behavior of the incoming

wave when the wave source and the receiver wave are moving in relation to each other.

The Doppler effect is used both in radioastronomy to study celestial bodies moving with the aid of electromagnetic waves, and in industry and medicine where applications relate primarily to sound waves. In the human body the target being studied using the Doppler Effect is the blood flow.

The Doppler method in thyroid pathology allows for the assessment of the hypervascularity of the thyroid parenchyma, the absence or presence of arterial vascular signal at nodular level. The type of vascularization can also be used to guide treatment. Ultrasonography (ultrasound) opens new perspectives in evaluating the Doppler imaging of the thyroid.

Thyroid scintigraphy

Mariana Ciușescu, Eugenia Rusu, Veronica Nicolau

Thyroid scintigraphy, nuclear medicine technique, is one of the oldest methods of imaging diagnosis, being in clinical practice from early 60's. This technique is based on the thyroid property to extract from the circulatory system the administrated radiopharmaceutical and up taking it by an active transport mechanism, without involving it in the iodine intrathyroid cycle or up taking and processing it by the thyroid follicles.

By detecting at the surface the radiation emitted by the radiotracer can be assessed both the morphology (dimensions, localization, shape) and the thyroid gland function (overall and potential nodular structures). Thereby, the assessment of the morpho-functional variants of normal thyroid include: position (retrosternal, laterocervical or sublingual), the number of thyroid lobes (accessory lobe, lobe agenesis), the gland's shape (oval, U-shaped or V-shaped) and possible radiopharmaceutical uptake asymmetry (preferential uptake in only one lobe).

Thyroid scintigraphy is usually performed with Tc99m-petechetate, it implies the intravenous administration of a minimal quantity of radiotracer (with a minimum of radiation and after about 20 minutes from the administration, the acquisition of an thyroid gland image is performed (which takes about 5 minutes).

The thyroid scintigraphy's indications are multiple:

The assessment of thyroid tissue function:

- a) Diffuse or nodular goiter;
- b) Function assessment of an singular nodule (cold, hot,

fiery);

c) Indication of possible function autonomy of a fiery nodule;

d) The detection of ectopic thyroid tissue (lingual, substernal);

e) The assessment of the remaining thyroid tissue after a subtotal thyroidectomy, radioiodine treatment or cervical lodge irradiation.

Challenges in accurate positioning for head and neck cancer patients in 3D-conformal radiotherapy

A. Toma, N. Bocăniă

Objectives: Radiotherapy is part of the multimodal treatment of head and neck cancer. Accurate positioning of the patient during CT simulation and treatment is essential, since a lot of critical organs surround the tumor target volumes. We try to identify the most frequent challenges in

positioning our head and neck cancer patients during radiotherapy, as the setup can result in underdose the tumor or overdose the critical organs.

Methods: We start 3D-conformal radiotherapy in Radiotherapy Department, Carol Davila Central University Emergency Military Hospital in 2014. We use a Siemens CT Simulator for treatment planning and Unique Varian linear accelerator for treatment, and for positioning Aquaplast RT mask (Q-Fix, USA) custom-made by simulation. We analyze 12 patients with various head and neck cancers, treated in our department in 2015-2016 and in which cases we found image-guided setup errors during radiotherapy and need a second CT simulation.

Conclusions: The most frequent causes of inaccurate positioning during radiotherapy for head and neck cancers are: neck edema, tumor growth or important tumor regression, evolution of cervical adenopathy, patient cachexia.

OP session NS10

Pharmacotherapy in major depressive disorder

A. Meliaca, Stelica Fărcășanu Zoica

Depression is a major psychiatric disorder marked by sadness, loneliness, despair, low self esteem and self-reproach. Associated features psychomotor agitation or retardation, low social interactions and symptoms like insomnia, anorexia and pain.

Types of depression: depression with noradrenaline deficit; depression with serotonin deficit: anxious type, hostile type; depression with dopamine deficit; depression with GABA deficit and mixed depression: depression with serotonin/noradrenalin deficit, depression with serotonin and/or noradrenalin deficit associated with dopaminergic hyperactivity.

Severity scale: mild depression episode, moderate depression, severe depression without psychotic features, severe depression with psychotic features.

Minimal natural length for a depression episode is 3 to 9 months. The course is quite variable: isolated depressive episode; from one to three depressive episodes in the course of life; multiple episodes.

Initiating treatment with antidepressants drugs associates

specific risks for each antidepressant class, requiring a thorough selection based on medical criteria and potential risks evaluation. Throughout the treatment the patient will be strictly monitored to prevent the risk of serotonergic syndrome cardiovascular changes (hypo and hypertension, QTc prolongation, dyscrasic blood changes and hepatic enzymes changes).

Recent studies signal the presence of metabolic syndrome in patients with depression undergoing antidepressant treatment. Taking this information to consideration, we recommend as precaution to enforce a monitoring algorithm similar to the one used for the antipsychotic treatment.

Psychiatric nursing strategies for alcohol consumption

Alina Popa, Elena Țolea, C. Gâlcă

It is very possible to have a drinking problem that is not defined or described as "Alcoholic".

Although most people do not become addicted to alcohol on their first drink, a small proportion do. Many people who have experienced a strong liking of alcohol from their very

first exposure then gone on to become addicted to it. At present it cannot be predicted who these people will be, so any exposure to alcohol has the risk of producing addiction in some users.

Many people use alcohol to cope with stress but do not realize that it exacerbates the problems in their lives. People drink to socialize, celebrate, and relax. There is drink of joy, sadness, out of habit, drink without reason, simply drink.

Alcohol enters the bloodstream from the first sip. Alcohol's immediate effects can appear within about 10 minutes. As you drink, you increase your blood alcohol concentration (BAC) level, which is the amount of alcohol present in your bloodstream.

Alcohol often has a strong effect on people – and throughout history we've struggled to understand and manage alcohol's power.

Alcoholism is a disease not a vice, it is a progressive disease, incurable, marked by the obsession to drink despite physical harm produced.

There are techniques and therapies available to help lessen the dependence on alcohol and rediscover balance in life.

Incompatibilities between drugs which are administered intravenous in the Intensive Care Unit

Mirela Bidilică, Gabriela Amoșei, N. Tănase, L. Ene

In ICU there are many drugs which, by their mixing in the same infusate solution, may determine incompatibility reactions, by chemical or physical mechanism. The incompatibility may appear as precipitation, chemical reactions, antagonism, and decomposition of biological molecules or the appearance of gaseous compounds.

Even though it is recommended the visual analysis of the admixture/carrier solution before its use in order to determine the precipitation, the color modification or the appearance of turbidity, not every incompatibility can be visually observed.

We will present the main mechanisms of intravenous drugs incompatibilities, their causes and consequences (sometimes severe) involving the patient and also some preventive strategies.

In order to reduce the risk associated with the intravenous drugs which are used in the ICU we have implemented in our unit the using of a two dimensional chart which contains recommendations for dissolving and compatibilities between every drug commonly used in our department.

Nursing files

Gabriela Dediu

Considering that the healthcare system is undergoing a continuous transformation process, the quality of healthcare is often used a reference point for the evaluation of the medical act. Furthermore, it provides an accurate reflection of the quality of the patient care processes, while also bearing into consideration the latest technological and therapeutic developments.

The nurse's duties are to enact the doctor's recommendations, working towards improving the patient's health, while respecting safety regulations that have been certified, approved, understood and consented to, so that the quality of the medical act is ensured.

Evaluating the quality of the healthcare act implies assessing multiple aspects, such as: the efficaciousness, efficiency and the continuous nature of the healthcare procedures; patient safety; the competences of the medical team; patient satisfaction, as well as the satisfaction of the medical personnel.

In conclusion, it can be argued that the purpose of the standards guiding the activity of the medical personnel is to establish a set of criteria and optimal working conditions necessary for achieving the required quality in the healthcare system, while at the same time respecting the patient's life, dignity and individuality. These standards are fully documented in the nursing dossier.

The intraoperative nursing for surgical procedures longer than 3 h

Mariana Stoian, Voichița Militaru, Mihaela Mușat, Teodora Vasile, Adriana Oprea, Cornelia Nițu, B. Iordache, I. Cristea

The surgical procedures lasting longer than 3 h are highly difficult, regardless they are open-surgery or minimally-invasive (laparoscopic). They require special high-skilled nursing measures. We organized these special measures in an internal protocol adapted to the type of surgery.

The protocol involves measures dedicated to the patient:

- Invasive and non-invasive monitoring.
- Electrolytic acid base, hematologic equilibrations.
- Preventing and treating hypothermia.
- Preventing thrombo-embolic complications.
- Preventing prolonged immobilisations

Measure for the preparation of the operating room:

- Aseptic and anti-septic measures
- The preparation of the medical devices, medications in sufficient quantities
- The registration of the medical activities according to internal protocols.

Our experience comprises approximately 1000 longer than 3 hours procedures, due to the surgical complexity and the application of the internal protocol contributed to surgical success, led to the important reduction of the post-operating, complications and in reducing the operative time.