

MEDICAL ISSUES ASSOCIATED WITH RAPID DECOMPRESSION

Dragoş Popescu M.D., Ph.D., Ilie Capanu M.D., Ileana Lupes M.D., Angelica Raicu, Nurse

Summary

Introduction: the purpose of the article is to study medical issues associated with rapid decompression, as well as measuring the usefulness of the demonstration.

Materials and methods: a lot of 23 supersonic pilots with a mean flight experience of over 500 hours and mean age 33 years was subjected to rapid decompression demonstration from 2500 to 6600 meters. The medical impact, usefulness and proposed modifications were collected and processed.

Results and discussions: medical issues incidence was 8.7%. Usefulness was appreciated by 70% of the pilots. Almost half had requirements for profile change, mainly due to difficult in dealing with pressure change. correlations medical issues-usefulness and usefulness-modifications were significant. We interpret modifications proposals as lack of personal training rather than profile deficiencies, we mark the necessity of equipment upgrade.

Conclusion: Rapid decompression is safe enough and eventual medical issues can be promptly addressed with excellent results. The usefulness of the procedure is important and appreciated.

Key words: rapid decompression, barotrauma, training

THE MANAGEMENT OF MASSETER INTRAMUSCULAR HAEMANGIOMA

**Răzvan Hainăroşie M.D., Mura Hainăroşie M.D., Cătălina Pietroşanu M.D.,
Viorel Zainea M.D., Cristian Dragoş Ştefănescu M.D., Ph.D.**

Summary

Haemangiomas are benign vascular tumors characterized by increased cellular proliferation of blood vessels. They may occur in any vascularized tissue like skin, subcutaneous tissue, muscle or bone. These tumors are frequent in infancy and childhood. The most common involved areas are the subcutaneous and mucosal tissue. This condition may influence a patient's appearance and functionality and may even cause a life-threatening pathology. The treatment of hemangiomas may include surgery, laser therapy, embolization or a combined approach with pharmacologic therapy for the possible complications. For complex cases, the results of a single therapeutic method are poor, therefore, it is the doctor's task to formulate individual treatment options, considering each case's complexity and the surgical technologies available.

The aim of these paper is to describe the clinical aspects of hemangiomas and the treatment guidelines for these vascular tumors in order to standardize the options in day to day clinical practice.

Key words: hemangioma, masseter, infratemporal fossa, surgical management.

SURGERY FOR SLEEP APNEA - THE RELEVANCE OF PHARYNGEAL MORPHOLOGY

Cristian Dragoş Ştefănescu, Viorel Zainea, Răzvan Hainăroşie

Summary

The objective of the study was to analyze the pharyngeal morphology of apnea patients whose sleep-disordered breathing was ameliorated postoperatively. Nasal surgery, the conventional treatment for nasal obstruction, corrects the anatomy inside the nose but does not change the pharyngeal anatomy, as does uvulo-palato-pharyngo-plasty. Patients with apnea and nasal obstruction underwent polysomnography and a morphological examination of the upper airway before and after nasal surgery. The postoperative reduction in the apnea-hypopnea index tended to be lower in some patients. Among sleep apnea patients, nasal surgery can be effective in specific cases.

Key words: sleep surgery, nasal surgery, sleep apnea.

PARTICULARITIES OF TISSUE EXPANSION TECHNIQUE IN ELDERLY PATIENTS WITH ADVANCED SINONASAL MALIGNANCIES

Irina-Gabriela Ioniță M.D., Mura Hainăroșie M.D., Dragoș Cristian Ștefănescu M.D., Ph.D., Viorel Zainea M.D., Răzvan Hainăroșie M.D.

Summary

Advanced sinonasal malignancies beside the ablative step of the surgery require a reconstructive step. When the sinonasal tumor involves the skin of the cheek, the eyelid or the frontal region that skin must be removed the surgical defect has to be reconstructed. Tissue expansion technique is a valuable tool used to gain enough skin in order to achieve the desired reconstruction. In elderly patients the expansion of the skin has some particularities that must be respected in order to avoid possible complications. If the skin has been already irradiated the tissue expansion technique is more difficult to perform. The authors present a step by step guide that will provide a safe tissue expansion technique for geriatric patients with advanced sinonasal malignancies.

Key words: tissue expansion, elderly, sinonasal malignancies

PRIMARY CUTANEOUS ANAPLASTIC LARGE T-CELL LYMPHOMA ASSOCIATED WITH CELIAC DISEASE MISDIAGNOSED AS LUPUS ERYTHEMATOSUS PROFUNDUS

Aurel Doru Chiriță M.D., Irina Mărgăritescu M.D., Ph.D.

Summary

Primary cutaneous anaplastic large T-cell lymphoma is defined as a CD30+ large T cell lymphoma presenting primarily in the skin and characterized by a good prognosis and response to treatment. Association of anaplastic large T-cell lymphoma with celiac disease is exceedingly rare. We present a 37-year old female with a four years history of celiac disease that developed cutaneous lesions initially interpreted as lupus erythematosus profundus. Based on clinical, histological and immunohistochemical findings the lesions were finally diagnosed as primary cutaneous anaplastic large T-cell lymphoma. We underlie the pitfalls encountered when dealing with superficial biopsies of lymphocytic lobular panniculitides.

Keywords: cutaneous T-cell lymphoma, primary cutaneous anaplastic large T-cell lymphoma, lupus erythematosus, panniculitis, celiac disease

LOCAL ANESTHESIA AND POSTOPERATIVE PAIN MANAGEMENT FOR INGUINAL HERNIA REPAIR – ROPIVACAINE VS LIDOCAINE

Stoicescu Horia M.D., Manda Laura M.D., Dumitru Cristian M.D., Vasile Grosu, M.D. Ph.D., Săvulescu Florin M.D., Ph.D.

Summary

Background: inguinal hernia repair became in the last decade the most suitable surgical intervention to be performed in short hospital stay surgery under local anesthesia. The ideal anesthetic to be used for this technique offers rapid onset of action, sensory and motor block, rapid cessation of motor block allowing restoration of mobility, and good tolerability at high doses needed with low systemic toxicity risk. We conducted a study to compare lidocaine, formerly used, to ropivacaine for local anesthesia.

Materials and methods: a prospective analytical study of a 100 cases of uncomplicated inguinal hernia in adults over 18 years of age, operated under local anesthesia, randomly assigned to the lidocaine group (50) and the ropivacaine group (50) and operated according to lichtenstein ii open mesh-technique.

Results: time to onset of sensory blockade was a medium 1.3 minutes (range 0.5-7) for the L group, longer for the R group – 4.3 minutes medium value (range 1-10), the patients in the L group developed moderate motor blockade, as the R group had insignificant motor blockade. Quality of

anesthesia was satisfactory in 86% of cases with lidocaine anesthesia and in 98% cases with ropivacaine anesthesia. The medium time to first analgesia request was 1.7 hours in the L group and 3.2 hours in R group. The need for supplementary analgesia/sedation was significantly higher in the L group, both during surgery and postoperatively. Mobilization of patients was faster in the R group, with a medium of 2.32 hours compared to 3.42 hours. The NRS medium scores for the R group were lower than the L group, both at rest and during mobilization. Discharge of patients took place in the range 24-48 hours, faster with a medium of 7.2 hours in the R group. Return to normal activities needed 4.4 days in the L group and 4 days in the R group.

Conclusions: the results recommend ropivacaine as the local anesthetic of choice in inguinal hernia repair, as it offers a very good quality of anesthesia and has postoperative analgesic effect that reduces the use of analgesics in the immediate postoperative period favoring fast mobilization and discharge.

Key words: inguinal hernia, local anesthesia, ropivacaine, lidocaine.

THE IMPORTANCE OF HUMAN FACTOR IN THE DEVELOPMENT OF ACCIDENTS AND INCIDENTS PREVENTION METHODS

Alma Frăţilă

Summary

The human factor can be defined as one individual physic and mental property, specific for the human influence over technological systems operation and over the balance between him and the environment. Human factor errors represent a top subject in the aeronautical research in the last two decades. Based on the statistics of lately aviation accidents, human factor errors represent the highest percentage. There are several factors that can cause human error, such as neglecting the rules and procedures and, also the technical issues. In conclusion, one of the main objectives of human factor research is to create a process, which can identify human error and its causes, followed by appropriate prevention methods.

Key words: flight events, human factor, error detection, SHELL model, HFACS model, risk management