

50-74.99% and in 30% of patients the AMH level have reduced by more than 75% after the surgery. In 30% of patients the AMH level have increased after the surgery.

The percentage variation of the FSH levels demonstrate the next results. In 3% of patients the FSH level is reduced after the surgery. In 30% of patients the FSH level is increased by 0-24.99% after the surgery, in 33% of patients the FSH level is increased by 25-49.99% after the surgery, in 17% of the patients the FSH level is increased by 50-74.99% after the surgery and in 17% percent of the patients the FSH level is increased by more than 75%.

Conclusion.

1. Laparoscopic cystectomy lead to decreasing of AMh level in 70% of the total 30 patients/

2. Laparoscopic cystectomy lead to decreasing of FSh level in 97%.

ЛИТЕРАТУРА

1. Course of pregnancy and labor outcomes in women with genital endometriosis. Павловская М. А., Гутикова Л. В., Кухарчик Ю. В (2020)

2. Ovarian reserve screening in infertility: practical applications and theoretical directions for research. Eric Scott Sills , Michael M Alper, Anthony P H Walsh (2009)

3. Ovarian reserve in women with endometriosis under total cystectomy compared to partial cystectomy: A randomized clinical trial. Atiye Javaheri Samane Kabirpour Ashkezar Maryam Eftekhar (2021)

MOEBIUS SYNDROME : CASE REPORT ON AN RARE CONGENITAL SYNDROME

**Manthripala S. N., Niwnhalla D. N., Panchalingam P.,
Saravanan S.**

Grodno state medical university

Научный руководитель: PhD in M, Associate Professor Drokina O. N.

Introduction. Moebius syndrome is defined as a congenital neurological disorder characterized by paralysis or weakness of the abducens (6th) nerve and facial (7th) nerve [1, 2]. Understandably, the condition deteriorates the patient's quality of life and treatment measures have also been outlined. It has a similar incidence in both males and females, accounting for about a ratio of 1 in every 250,000 estimated live births [3, 4]. Although 2% of the individuals affected represent a familial etiology, most of the reported cases so far are sporadic. Pathogenesis of the disease still remains unclear but genetics and intrauterine

rhombencephalon vascular disturbances have an attribution for development of the syndrome [5].

Aim of the study. To analyze and investigate more symptoms, clinical features and treatment tactics to facilitate better outcomes in patients with this rare syndrome.

Materials and methods. The patient for this case study was examined in the University Pediatrics Hospital, Pulmonology Department. The data for this rare syndrome was collected by direct observation from a 13-month-old male infant who presented with most of the typical features of this syndrome. Parental consent was obtained to proceed collecting data as the patient was below 18 years. All physical examinations required to progress were done within the hospital setting. None of the patient's confidential details were included, the article is completely written anonymously. Furthermore, guardian consent was obtained to incorporate photographs of some of the chief presenting features in relation to this syndrome.

Results and discussion. This is a rare congenital defect that affects the muscles of the ocular movement and facial expression due to the underdeveloped motor function of the cranial nerves, especially facial and abducens nerve. Generally, the most significant features in a patient presenting with moebius syndrome would be strabismus, limb abnormalities like clubbing of feet, missing fingers and toes, chest wall deformities, difficulties in breathing and swallowing. The patient presenting in this case, displayed features of other concomitant diseases and abnormalities. During the course of the pregnancy the mother was diagnosed with bacterial vaginosis that lead to the child being born with a congenital infection. This is a likely etiological cause of this syndrome. The mother also had many threats of miscarriages and signs of intrauterine hypoxia which was established at 35 weeks and there by leading to an unplanned cesarean section. Intrauterine hypoxia is a potential cause of hypoxic ischemic distress that could have caused the ventriculomegaly. The above-mentioned hypoxia would have caused the pulmonary fibrosis by disturbing the maturation of the lung. Commonly patients with moebius syndrome present with hypoplastic left heart syndrome and pharyngeal palsy, but instead our patient displays features of mild myocardial hypertrophy and recurrent acute pharyngitis, respectively. The most suitable method to confirm this syndrome is via use of MRI to exhibit the probable defects in the nuclei of the abducens and facial nerves. The MRI procedure was interrupted by the movements of the child thereby accounting in a counterproductive MRI. For confirmation of moebius syndrome, the MRI should be repeated with the child under sedation.

Conclusion. According to all the associated symptoms craniofacial abnormalities, feeding difficulties, breathing problems & recurrent respiratory tract infections are more common. Motor functions, temperamental and verbal difficulties are also prominent in this study. Diagnosis and rehabilitation should start simultaneously and the assessments of all functional abilities should be performed with time. The connection between the mother and the child is also a major intervention which is necessary to be done during the rehabilitation procedure. Multidisciplinary approach, involving professionals with different therapies should be involved (for management of specific skills to provide specific training).

ЛИТЕРАТУРА

- 1) Gheorghe, DC, Stanciu, AE, Zamfir-Chiru-Anton, A, Doru, O, Epure, V. Moebius syndrome – Case report. Clin Case Rep. 2022; 10:e06715. doi:10.1002/ccr3.6715
- 2) Zaidi SMH, Syed IN, Tahir U, Noor T, Choudhry MS. Moebius Syndrome: What We Know So Far. Cureus. 2023 Feb 19;15(2):e35187. doi: 10.7759/cureus.35187. PMID: 36960250; PMCID: PMC10030064.
- 3) Dufke A, Riethmüller J, Enders H. Severe congenital myopathy with Möbius, Robin, and Poland sequences: new aspects of the Carey-Fineman-Ziter syndrome. Am J Med Genet. 2004;127A:291–3.
- 4) Briegel W. Neuropsychiatric findings of Möbius sequence – a review. Clin Genet. 2006;70:91–7.
- 5) Carta A, Mora P, Neri A, Favilla S, Sadun AA. Ophthalmologic and Systemic Features in Möbius Syndrome An Italian Case Series. Ophthalmology. 2011;118:1518–23.

AN IN DEPTH ANALYSIS OF THE COARCTATION OF AORTA IN CHILDREN OF GRODNO REGION

Manthripala S. N., Mohamed R. M.

Grodno state medical university

Научный руководитель: Pratasevich T. S.

Introduction. Coarctation of the aorta (CoA) is a relatively common defect that accounts for 5-8% of all congenital heart defects [1,2]. Coarctation of the aorta is a localized narrowing of the aortic lumen that results in upper-extremity hypertension, left ventricular hypertrophy and if severe, malperfusion of the abdominal organs and lower extremities [3,4]. In children COA can be combined with other congenital heart defects such as bicuspid aortic valve, subaortic stenosis, patent ductus arteriosus, ventricular and atrial septal defects [5].

Aim of the study. To investigate and analyse coarctation of aorta cases and parameters that correlate to it in order to increase efficiency of treatment and to prepare for future cases in order to increase the efficiency of treatment and management.

Materials and methods. 23 case histories of children diagnosed with coarctation of the aorta were analyzed over the period years from 2017 to 2022 in Grodno Children's Clinical Hospital. Statistical processing of the data is obtained as a result of the research was carried out using traditional methods of variation statistics using the application package "STATISTICA 10.0)" and "EXCEL". When comparing relative frequencies within one or two groups, a two-tailed Fisher test was used.

Results and discussion. Full term newborns were predominated 16 (69.6%) and premature children were only 7 (30.4%), $h=0.01$. The number of male patients was 14