diagnosed heart condition chronologically connected with the gym activities, made us suspect of abuse of anabolic steroids as the cause of hypertrophic cardiomyopathy. A gradual decrease of the septal thickness later may be connected to the abstinence from steroids after the incident, although it also may be attributed to ischemic myocardial necrosis.

Synthetic cannabinoids, usually sold as cheap air fresheners, are known to cause cardiac infarction and arrest. They are difficult to prove by laboratory tests. Sources other than the patient and his parents strongly suggested that the patient took those substances just before the cardiac arrest. We presume that there is a significantly greater risk of a life-threatening arrhythmia and/or cardiac arrest in the case of hypertrophic cardiomyopathy if the patient abuses synthetic cannabinoids.

330 RARE CASE OF EXTENSIVE DEEP VEIN THROMBOSIS AND GIANT THIGH ABSCESS DUE TO STREPTOCOCCUS PYOGENES SEPSIS

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We report a case of extensive deep venous thrombosis (DVT) and giant thigh abscess associated with *Streptococcus pyogenes* sepsis.

A five year old girl was referred to our PICU with an extensive DVT of the right leg confirmed by CT scan and with 48h history of fever. There was no evidence of abscess or other abnormalities. Three days before admission, she fell from her bicycle and broke a tooth. The older brother had streptococcal pharyngitis. Initial laboratory findings showed CRP 360 mg/dL, PCT 78 ng/ml, leucocytosis (20.100/uL), neutrophilia (banded 6% and segmented 84%), normal haematocrit and low platelet count (48/uL). The remaining laboratory values, including electrolytes and coagulation tests were normal. Eventually, *Streptococcus pyogenes* was isolated from blood culture. Subcutaneous enoxaparin was started as well as antibiotic therapy – with vancomycin, clindamycin and meropenem. The observed progression of leg swelling raised the suspicion of a cellulitis or DVT progression with developing compartment syndrome and the patient underwent surgical exploration. Apart from enlarged, reactive lymph nodes, there were no abnormalities found intraoperatively. However, after 5 days of treatment her thigh became painful, red and warm. Control CT scan showed a huge thigh abscess and prompt evacuation of abscess with debridement of necrotic tissue was performed. Eventually we confirmed FV Leiden mutation, as well as low protein C and high homocysteine levels.

Infectious diseases are often accompanied by activation of coagulation.

Cytokines are believed to be important mediators in this process. A critical role for antecedent soft-tissue injury has been well established and microorganisms likely hematogenously translocated from throat to deep soft tissues (in this case by a broken tooth). Vein thrombosis often accompanies or precedes abscess formation. However, massive DVT should always raise suspicion for thrombophilia.

CT and MRI scans should be interpreted with caution because *S. pyogenes* doesn't promote forming of gas in the

tissues or form free abscesses, so radiologist's interpretations are frequently not definitive.

Prompt and aggressive surgical exploration and debridement of suspected deep-seated streptococcal infection are mandatory, as well as anticoagulant therapy. If treated properly, morbidity could be significantly reduced.

331 THE ROLE OF AMBULANCE IN HEALTH SYSTEM

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The aim of our research was to investigate the diseases of 0-18 year old patients admitted to the 'Muratsan' University hospital complex(UHC) Intensive care unit (ICU) and toxicology for the last 7 years, including cases delivered to the hospital by the ambulance service and analysis of their final diagnoses.

A retrospective study was performed using medical charts up to 7 years (2012-2018) from 'Muratsan' University hospital complex(UHC) ICU and toxicology. The overall number of patients was 5152, among them 3074 were male and 2078 were female. In this study we have included the most typical diseases (pathologies) for each particular season. This study included cases delivered to the hospital by the ambulance service and analysis of their final diagnoses.

According to the results of our study, 1695(32,8%) patients were hospitalized with an ambulance: 164(9,7%) of them had Acute respiratory infections(ARI), 780(46%) had Acute Intoxications(AI), which is seasonal and includes mostly carbon monoxide(CO) intoxication, KMnO₄, flavor essence and alcohol poisoning. 375(22,1%) patients had Acute Drug Intoxications(ADI), 81(4,8%) had complaints of allergy. 295(17,4%) of patients had other disorders*. Patients were divided into 4 age groups (0 -1; 1-7; 7-14; 14-18), the first group-189, the second-922, the third-334 and the fourth-250. 669 (39.5%) of cases were moderate, 968 (57.1%)-heavy and 22 (1.3%)-extremely heavy (two of which ended in death), 36 (2.1%) cases have not been reported.

*Diabetes mellitus, epilepsy, cancer, hematological disorders, etc.

We found out that the two most common diagnoses of patients who were admitted to the hospital by ambulance are ADI and AI independent of the season. The prevalence of moderate cases is also high, which may be related to the level of care provided by parents to their children. Low mortality level of extremely heavy patients who were arrived at the hospital by ambulance lets us consider about the quality of ambulance function.

332 WITH OR WITHOUT REFERRAL?

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