as well as lack of progress in labour. Nevertheless, none of these parameters reached a statistical significance. Primiparas both \leq 30 and \geq 30 year-old had a much greater risk of lack of progress in labour (OR = 11.3; p = 0.0015 and OR = 19.5; p = 0.00027) as well as emergency caesarean section (OR = 5.6; p = 0.00056 and OR = 2.5; p = 0.027) and a lower risk of elective C-section (OR = 0.4; p = 0.0027 among women \leq 30 years old) when compared to multiparas. These results met statistical significance criteria.

Conclusion: Advanced maternal age can undoubtedly be associated with several adverse perinatal outcomes. However, the results of the study do not seem to be unequivocal. Further investigation of the influence of maternal age on the course of pregnancy and delivery should be conducted.

http://dx.doi.org/10.1016/j.pbj.2017.07.153

PS118

Varicose veins surgical treatment: Endovenous laser ablation versus open surgery



Tomas Liaudginas*, Vaida Kazlauskaitė

Faculty of Medicine, Vilnius University, Vilnius, Lithuania

E-mail address: tliaudginas@gmail.com (T. Liaudginas).

Aim: Compare long-term outcomes of varicose veins treatment between endovenous laser ablation and open surgery.

Introduction: 25–33% of the Western population adults is suffering from varicose veins and surgical treatment is characterized by high recurrence rate of 60% after 5 years follow-up observation. That leads to look for the most effective treatment option.

Methods: A retrospective study of 182 patients who had varicose veins endovascular or open surgery during 2015-06–2015-12 were made. Patients' demographic and clinical data were registered. Patients were contacted and asked to evaluate surgery outcomes subjectively. Patients were divided in two groups: I – ones who had endovenous laser ablation and II – those who had open surgery.

Results: 136 (74.7%) patients agreed to participate in the study: 26 (19.1%) men and 110 (80.9%) women; average age – 48.36 years (± 1.087) . 65 (47.8%) – group I, (41 (63.1%) were operated because of the symptoms, 24 (36.9%) were operated because of the esthetical reasons), 71 (52.2%) – group II, (58 (81.7%) were operated because of the symptoms, 13 (18.3%) were operated because of the esthetical reasons.) The symptoms renewed: group I – 9 (22%) patients, group II – 25 (43.1%). Esthetical relapse: group I – 3 (12.5%), group II - 5 (38.5%). Patients assessed esthetical view: group I - 48 (73.8%) were completely satisfied with the results, 15 (23.1%) were partly satisfied and 2 (3.1%) were unsatisfied, respectively in group II the results were 44 (62%), 26 (36.6%) and 1 (1.4%) (p = 0.202). Patients also evaluated their symptoms after treatment. Group I: 53 (81.5%) patients were completely satisfied, 9(13.8%) - partly satisfied, 3 (4.6%) – unsatisfied, respectively in group II – 52 (73.2%), 14 (19.7%) and 5 (7%) (p = 0.513). According to the EQ-5D-3L questionnaire patients treated in group I evaluated their health – $80.29 (\pm 13.199)$, II $-74.56 (\pm 16.615)$.

Conclusion: Chronic venous insufficiency symptoms more often renewed to patients who had open surgery. Patients' were more satisfied after endovenous laser ablation. Also, those patients who were treated with endovascular procedure evaluated their health better.

http://dx.doi.org/10.1016/j.pbj.2017.07.154

PS147

Patients' quality of life after surgical treatment of oral cancer



A Petrović

Faculty of Medicine, Novi Sad, Serbia E-mail address: andjus007@gmail.com.

Aim: To evaluate the quality of life of patients after surgical treatment of oral cancer.

Introduction: Oral cancer surgery may have resulted in damage to the act of chewing, swallowing, speech and communication, lead to social incompetence and decline in the quality of life of patients.

Methods: The study included 30 surgically treated patients previously diagnosed with oral cancer at the Department of Maxillofacial Surgery, Clinical Center in Novi Sad. The survey and assessment of Karnofsky index ofpatients was conducted within the regular control visits to a specialist clinic for maxillofacial surgery. The questionnaire is in addition to general information included questions related to the primary tumor localization, harmful habits, stomatognathic system function and psychosocial condition after surgical treatment of oral cancer.

Results: Mean age of patients was 63 years, of which 73.3% were male and 26.7% female. The most common localization of oral cancer was under the mouth of 9 (30%) patients. Alcohol and cigarettes were consumed by 70% of patients. In 50–60% of patients, stomatognathic system function was reduced to varying degrees of severity. Chewing function was statistically significantly worse in patients after marginal resection of the mandible (p < 0.05). Depression was observed in 18.2% of men and 12.5% women, and the problem of appearance in public places had 40% of patients. Karnofsky index of 25 (83.3%) patients was 100% while the remaining was lower as a result of comorbidity.

Conclusion: The quality of life in terms of stomatognathic system function and psychosocial status was reduced to varying degrees of expression in many patients after surgical treatment of oral cancer. Therefore, the detection of diseases in an early stage is crucial to the survival and quality of life for patient.

http://dx.doi.org/10.1016/j.pbj.2017.07.155

PS221

Long-term outcomes in simultaneous pancreas-kidney transplant recipients: Retrospective single centre study



Gniewkiewicz Michał ^{1,2}, Czerwińska Magdalena ^{1,2,*}

¹ Student Scientific Group of Transpantation Medicine and Neprology, Poland

² Department of Transplantation Medicine, Nephrology and Internal Medicine, Medical University of Warsaw, Poland

E-mail address: mczerwinskam@gmail.com (C. Magdalena).

Aim: The aim of this study is to present long-term outcomes of SPKT.

Introduction: Simultaneous pancreas-kidney transplantation (SPKT) is the treatment of choice for patients with end-stage renal failure due to type 1 diabetes mellitus (DM1).

Since the 1980s, pancreas transplant has become the most effective strategy to restore normoglycemia in patients with DM1.