in control group and group using Mesogel. The anti-adhesive properties of the gel were studied on days 3, 7 and 14, by evaluating the adhesive process in the abdominal cavity using the method of the semantic differential. The results obtained were processed statistically.

Results and Discussion. It is definitely revealed that Mesogel did not enter into chemical interaction with blood and bile. Preparation shortened the time of bleeding stop relative to the control at 109.19±34 seconds (by 37%; p≤0.05); reduced blood loss by 67±14 mg (by 15%, p≤0.05). In the chronic experiment the preservation of the anti-adhesive activity of the gel was confirmed: the absence of adhesive process on days 3, 7 and 14, the presence of only single viscero-parietal planar adhesions on day 14 in 12% of cases.

Conclusions. In vitro studies have shown that when Mesogel is in contact with blood and bile, there is no chemical interaction and a change in its physical structure. In vivo studies have shown that Mesogel reliably has hemostatic and anti-adhesive activity. Mesogel can be used in the clinic for operations on the liver, as a combined action preparation.

A MORPHOMETRIC STUDY OF INFRAORBITAL FORAMEN IN ADULT HUMAN SKULLS

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Key words: *infraorbital foramen, infraorbital margin, size, distance, measurements*

Aim. The aim of this study was to determine the location of the infraorbital foramen (IOF) in relation to infraorbital margin (IOM), anterior nasal spine (ANS) and Nasion (Na), Supraorbital foramen (SOF) and maxillary teeth in adult skulls (of south eastren Indian population).

Material and Methods. Fourteen skulls (28 sides of skull) have been analyzed. In order to analyse the size and the relative position of the IOF with the above parameters, we have used a digital caliper for measurements with a precision of 0.01 mm.

Results and Discussion. The IOF was oval in shape (85.7%) on right side and (71.4%) on left side while none of them were found either in semilunar or triangular shape in contrast to previous reports. In most of the cases IOF was found to situate lateral to the plane of SOF. The vertical and transverse diameter of the IOF on both sides was found to be almost equal. The mean distance and standard deviation (mean±SD) between right IOF and ANS, IOM and Na were 33.6±2.22 mm, 5.49±1.10 mm and 41.4±3.27 mm respectively, while the mean±SD between left IOF and ANS, IOM and Na were 33.1±2.30, 5.85±1.06 and 40.3±3.09 mm respectively.

Conclusions. The results obtained from descriptive analysis are relevant for blocking the infraorbital nerve while performing surgeries in midface region, particularly in patients with edema of the infraorbital region in situation where precise location of the IOF is difficult.

VARIABILITY OF THE PARAMETERS OF THE LATTICED BONE OF ADULTS

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Key words: *cribriform plate, ethmoid labyrinth*

Aim. Determine the variability of the parameters of the structural formations of the ethmoid bone (EB).

Material and Methods. On the 49 skulls of adults, the length and width of the cribriform plate (CP) were craniometrically studied. At 58 KT-grams, the length and width of the ethmoid labyrinth (EL) are determined.

Results and Discussion. The length of the CP is 21.5±0.2 mm (Min—Max=14.7–26.0 mm, σ=2.7 mm, CV=12.6%), the width of the CP varies in the range of Min—Max=4.6–20.1 mm and on the average is: at the level of the anterior third of 7.2±0.1 mm (σ=2.2 mm, CV=27.6%), the middle third — 11.1±0.2 mm (σ=1.8 mm, CV=18.5%), the posterior third — 12.9±0.2 mm (σ=2.8 mm, CV=21.1%). The length and latitudinal parameters of EL do not have statistically significant bilateral differences (p>0.05). The average length of the EL is 36.0±0.3 mm (Min—Max=27.3–45.3 mm, σ=3.9 mm, CV=12.4%). The width of the EL of the anterior third is 8.2±0.2 mm (Min—Max=4.8–17.3 mm, σ=2.5 mm, CV=29.3%), posterior third — 10.0±0.2 mm (Min—Max=3.9–19.4 mm, σ=4.7 mm, CV=32.0%).

Conclusions. The prevalence of latitudinal parameters of the EB in the posterior third was established in comparison with the anterior third (EP at 79%, EL at 22%). The long-latitudinal parameters of the latticed bone have an average and strong degree of variability.