
FACTORS OF EARLY OVARIAN CANCER'S PROGNOSIS

Bakhidze E.V., Maximov S.Ja., Hederim M.N., Chepik O.Ph.
Prof. N.N.Petrov Institute of Oncology, Institute of Medical Micology, St.-Petersburg, Russia

Objective: *Dethe-rate from ovarian cancer is very high taking the first place among other localizations of gynaecological cancer and the fifth place among all possible reasons of womens death in develop countries in spite of devloment of modern diagnostics' methods of early ovarian cancer (sonografy, magnetic resonance, computer tomografy). It is not exclude that histological polimorphizm of ovarian cancer can be one from other showings of pathogenesis factors, determing variety of clinical showings and disease's course and influencing by this on the prognosis. Exploration of factors' influence on early ovarian cancer's prognosis present in this abstract.*

Methods: *It contains datas about 147 women, who were ill with bordeline and malignant tumours of ovary 1 a,b,c st. And treated since 1980 till 1995. The patients are ranged from 16-79 years (mean 46,1 years). All patients were exposed to surgical or combined treatment (operation and adjuvant chemotherapy). Regimen VAK, CMF, PVB, CAP were applied from 1-6 courses depending on histological tumour's structure. Histological tumour's exploration was passed according to international histological classification of surface epitelial tumours of the ovary (modified from Scully, 1979). Staging started with a careful laparotomy by FIGO classification (1987). Postoperation monitoring was passed in time of 3-5 years.*

Results: *The worst five-years results were disclosed with clear cell tumours (66,7%) as compared with serous, mucinous and endometrial tumours (92,9%; 90,0%; 93,3%) and with poorly-differetiated as compared with well-differentiated lesions, too. Methods of treatment did not influence on its results.*

Conclusions: *So there was conclusion about histological structure and differentiation have a deciding mean for prognosis for patients with early ovarian cancer.*

COURSE AND OUTCOME OF PREGNANCY IN PATIENTS WITH INFECTIOUS HYPERSECRETORY DIARRHEA

Balan Bindhu, Beliayeva T.V.
D.O.Ott Institute of Obstetrics and Gynecology RAMS, Saint Petersburg, Russia

Objective: *To characterize the peculiarity of the course of pregnancy and labor in patients with hypersecretory diarrhea of infectious nature.*

Methods: *Clinical, biochemical, statistical.*

Results: *Due to hypersecretory diarrhea a threat of pregnancy termination developed in all women in the 1st trimester; in 36% of pregnant women in the 2nd trimester and in 83% - in the 3rd trimester. Spontaneous abortion was observed in 16%, preterm labor - in 12% of women. The appearance or worsening of the course of gestosis was revealed in 42% of pregnant women, premature placental separation - in 26%. Frequency of fast and precipitate labor made up 18%. I degree dehydration was seen in 56%, II degree in 13% of women. A decrease in plasma Na^{+1} concentration by 10% was noted in of the patients, by 15% and more in 21% of pregnant women. Almost in 1/3 of patients an increase in urea and residual nitrogen was recorded. The frequency of complications depends on the degree of dehydration. In patients with hypersecretory diarrhea the frequency of complications in pregnancy and labor was less by 2-2.5 times.*

Conclusion: *Pregnant women with hypersecretory diarrhea must be classified under the group of very high risk for complicating pregnancy and labor.*