EFFICIENCY OF GESTAGENIC PREPARATION "PRIMOLUT" IN THE TREATMENT OF PATIENTS WITH ENDOMETRIAL HYPERPLASIA

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Objective: *To study the efficiency of treating dysfunctional uterine bleedings in patients of premenopausal period by Primolut-nor (Germany), each tablet of which contains 5 mg or 10 mg of noretysterone. 74 patients were observed at the age of 40-52 years.*
Methods: *Histological investigation revealed hyperplastic process of various degree (from proliferation to polyposis) in the endometrium of all patients. Duration of treatment and dose was prescribed individually and depended on the extent of hyperplastic process and concomitant extragenital pathology. In polyposis and active forms of glandular hyperplasia the patients were given Primolut-nor in a dose of 10 mg continuously for 3-6 months, and for the following 7-9 months – by a 22-day scheme (from 5th to 26th day of the cycle). Patients with endometrial glandular hyperplasia received the drug by a 22-day scheme: 10 mg for 7-9 months or 5 mg for 12 months. Patients with endometrial proliferation took Primolut-nor in a dose of 5 mg for 6-9 months. There was no increase in arterial pressure and body weight.*
Results: *No dysfunctional bleedings occurred during treatment. Data of histological, cytological and ultrasound investigations, performed after the therapy, showed a regression of hyperplastic process in all patients.*
Conclusion: *The results allow to consider gestagenic preparation Primolut-nor to be effective for the treatment of endometrial hyperplasia in women in the premenopausal period.*

METABOLIC EFFECTS OF ORAL CONTRACEPTIVES IN WOMEN WITH INSULIN DEPENDENT DIABETES MELLITUS

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Objective: *To evaluate the effects of oral contraceptives on carbohydrate and lipid metabolism and hemostasis in women with insulin dependent diabetes mellitus (IDDM).*
Methods: *18 women with were accepted to the study. The mean age of subjects was 29,5±1,8 years. The mean duration of diabetes was 12,5±1,6 years. Only non-smoking women were admitted to the study. The first group (8 women) received a combination of 0,02 mg ethinylestradiol (EE) and 0,15 mg desogestrel (DSG). The second group (10 women) received a combination of 0,03 mg EE and 0,15 mg DSG. The main study procedures including measurement of glycosilated hemoglobin (HbA1c), fasting total cholesterol, triglyceride, high-density lipoprotein cholesterol, prothrombin time, activated partial thromboplastin time, fibrinogen, activity of factors VII and VIII, antithrombin III activity rates were performed before, after 3 and 6 months of hormonal intake. Low-density lipoprotein cholesterol (LDL-C) and very-low-density lipoprotein cholesterol concentrations were calculated with the Friedewald equation.*
Results: *There was no significant change in mean HbA1c values at the beginning and at the end of the study in both groups. At the beginning of the study women with IDDM had the increased levels of total cholesterol, LDL-C and triglyceride. The intake of the combination of EE with DSG increased levels of total cholesterol and LDL-C after 3 months in the both groups. Parameters of lipid metabolism were not statistically different at the beginning of the study and after 6 months of the hormonal intake. The intake of two low-dose EE and DSG regimens was associated with the increase of activity of factors VII, VIII and antithrombin III.*
Conclusions: *The present study demonstrated that use of low-dose contraceptives does not affect lipoprotein metabolism. The use of low-dose EE and DSG is associated with the increased coagulation activity, which seems to be balanced by the increased anticoagulation activity.*