
THE MEANING OF NATURAL OESTROGENS IN THE IVF PROTOCOL

Repina M.A., Kornilov N.V., Krapivina E.G., Shlykova S.A., Kornilova J.A.
Medical Academy of Postgraduate Education, AVA-Peter, St.-Petersburg, Russia

In many respects, the results of the IVF crucially depend on the joint condition of an endometrium and an uterus at the moment of embryo implantation. The influence of the most significant among them, for example, of endogenous oestradiol, may be insufficient. That is what have been confirmed by the results of ultrasound testing. To increase the readiness of endometrium for the embryo implantation and further supplementation of early pregnancy we have used the medicine, analogous of the native oestradiol, EstrofemT (Novo Nordisk, Denmark). We compare the 84 IVF cycles when EstrofemT have been used with another 54 cycles without support by oestrogens. The EstrofemT was nominated starting from the 8-9th day of a menstrual cycle, combining with the protocol of superovulation induction (37 cycles), from the moment of oocyte recovery or embryo transfer (35 cycles) and after the approach of implantation (12 cycles). In those cycles when the EstrofemT was nominated rather early we have seen an essential enlargement of the endometrium thickness at the moment of embryo transfer (11.2 ± 0.3 mm in comparison with 10.4 ± 0.7 mm in the control) and higher pregnancy rate (in 51 cycles from 84 ones, or in $60.7 \pm 0.5\%$ in comparison with 19 of 54 control cycles, or in $35.2 \pm 0.2\%$). The early pregnancy loss has taken place in 11 from 51 pregnancies. 32 patients have progressing pregnancy, mainly of II-III trimesters, 8 women have bore 15 alive children. In the control group, unlike the EstrofemT ones, the total rate of early pregnancy loss and ectopic pregnancy was on the level $31.6 \pm 2.0\%$ (6 of 19 ones), 13 pregnancies are either in progressing state or have been completed by the birth of alive children. Hence our research shows that the results of the IVF program can be significantly improved by including EstrofemT, the medicine of native oestradiol.

NEW APPROACHES TO THE PREVENTION OF VASCULAR DAMAGES AT PERI-POSTMENOPAUSAL WOMEN

Repina M.A.
Medical Academy of Postgraduate Education, St.Petersburg, Russia

As it's known, vascular system damages are stimulated by the loss of ovarians function. In order to estimate the heaviness of microcirculatory infringements we have investigated primary and secondary hemostasis, anticoagulant blood system and lipoproteins spectrum at 112 patients of the age 42-69 years, who received the assistant hormonal treatment by preparations, registered in Russian Federation (FemostonT, ClimenT, Cyclo-ProginovaT, TrisequensT, CliogestT, etc.). These patients also received the system enzyme therapy by WobenzymT and PhlogenzymT. While the assistant hormonal treatment we have estimated the thrombocytogram, platelets function and other parameters and have discovered a positive influence of the above therapy on the condition of primary hemostasis. However, the results depend on conditional «oestrogen» and «progestagen» phases of drugs reception. The positive effect is strengthened by system enzyme therapy, which can be nominated as together with assistant hormonal treatment, and as separate rates also.