
DETERMINATION OF ECOLOGICAL SITUATION IN A REGION BY INDICES OF THE FEMALE REPRODUCTIVE FUNCTION IN THE PREMENOPAUSAL PERIOD

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Objective: To evaluate clinical, echographic and hormonal features of premenopausal period in connection with ecological peculiarities of a region.

Method: 43 women who live in ecologically favorable suburban region of St.-Petersburg and 33 residents of ecologically unfavorable industrial region with remaining menstrual cycle (at the age of 45-55) were examined. Besides ordinary clinical survey, ultrasound investigation of small pelvis and mammary glands was made; FSH, LH, progesterone and E2 levels were analyzed by an immunofluorimetric method.

Results: In women of ecologically unfavorable regions and in residents of ecologically favorable regions the following was found: number of cycles with insufficient luteal phase (with progesterone level not exceeding 20 nmol/l) was 15 (45.4%) and 13(30.2%), respectively; a decrease of the follicles number in 29(48.3%) and 24(33.3%); dysfunctional uterine bleedings in 12(36.6%) and 10(33.3%); mean basal FSH levels 15.4(3.8 IU/l and 10.8(3.4 IU/l; LH – 17.7(9.1 IU/l and 7.2(1.1 IU/l; E2 – 172.7(17.9 IU/l and 295.9(44.4 IU/l; fibroadenomatous changes of mammary glands in 48(80%) and 27(37.5%) women, respectively. All differences, besides ones of the uterine bleedings are statistically significant ($p < 0,01$).

Conclusion: The peculiarities of premenopausal period may be used for the determination of ecological situation in a region.

EXTENDED AND COMBINED SURGERY FOR GYNECOLOGICAL CANCER

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Objective: The amount of patients in St.-Petersburg, Russia primarily diagnosed for local and advanced gynecological cancer is annually increasing. 5-year survival rate in stage IV changes in depend on sites of lesion from 10 to 15 % and in stage III does not exceed 20% The aim of the study to analyze the results of the treatment of those patients.

Methods: We analyzed the data from 146 patients underwent combined surgery, that was 3,1% from all women who received surgical treatment in the department of gynecological oncology since 1987 till 1997 for cervical, endometrial and ovarian cancer .

Results: The mostly often revealed sites of extension of the disease were rectum (22,8%), small intestine (22,8%), sigmoid intestine (21,8%), cecum (12,3%), urea excretory system (8,8%). 12,3% of patients had several sites of lesions . In 60,2% cases the bowel obstruction was developed. Including of extended and combined surgery in to the clinical practice for local and advanced women's genital malignancies allowed to increase resectability for last decade 8,5 fold. Postoperative mortality rare was 10,9%. The use of this treatment modalities showed 66,% rate of cumulative 3-year survival and 55,3% 5 year survival.

Conclusion: Thus introduction of active surgery tactics in combination with radiation and adjuvant chemotherapy shows the significant improvement in treatment outcome.