

THE PLACE OF ENDOSCOPY IN ONCOGYNECOLOGY

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DIAGNOSTICS STAGES IN POSTMENOPAUSAL UTERINE BLEEDING

Background: ultrasound sonography is methodologic base of endometrial pathology screening. The first stage of diagnostics is performed in all postmenopausal women in out-patients departments. If the increasing of M-echo more than 4 mm has been revealed the further examination should be continued. M-echo more than 10 mm requires the using of additional ultrasound methods such as 3D ultrasound and spectral dopplerography. Depend on received data the hysterocsopy with or without biopsy will perform on the second stage of diagnostics. In case of M-echo more than 10 mm and additional ultrasound data supspected possible endometrial cancer the aspirative biopsy of endometrium without hysteroscopy should be made.

Materials and methods. 608 postmenopausal patients with atypical uterine bleeding were observed.

14,1% of them had endometrial atrophy, 18,8% – adenomyosis, 5,6% – uterine fibroid, 4,8% – glandular hyperplasia, 21,2% – polyps, 2,9% – endometrial cancer. Thus the uterine curretage would be useless in 54,1% of cases. Separately the group of patients with endometrial cancer of the Ist and IInd stages was studied.

Results. M-echo in T1a stage was 10,3+5,7 mm, in T1b -18,1+7,8 mm, in T1c -24,1+10,5 mm, in T2 -36,1+13.8 mm. 3D reconstruction revealed no changes in 100% of T1a stage and in 28,6% of T1b stage. Haemodynamic indices showed the tendency of velocities indices increasing and perifericial resistance decreasing.

Conclusion. These data confirmed the necessity of differential approach for diagnostic tactics using new technical achievements and limited using of invasive procedures.

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THE ROLE OF SONOGRAPHY AND HYSTEROSCOPY IN ENDOMETRIAL EVALUATION IN POSTMENOPAUSAL WOMEN USED ANTIESTROGENS

Background: it's known that antiestrogens and tamoxifen in the first instance display some level of estrogen activity. The study of agonistic effect realization has taken attention to the action of this medication in other target organs including endometrium.

Materials and methods. The results of clinical observations of 276 postmenopausal patients with breast cancer used or not used tamoxifen were presented. All patients were undergone ultrasound exam with M-echo measurement that was accompanied by hysteroscopy and endometrial biopsy in case of the M-echo increased more than 5 mm.

Results. Data analysis revealed real increasing of number of patients used tamoxifen with more than 5 mm M-echo. But hysteroscopy showed endometrial changes only at 27,7% of these patients. The rest women has signs of atrophy.

Conclusion. The tamoxifen influence on uterine developes as increased proliferation of stromal component and basal layer hyperplasia. These processes manifest by M-echo increasing, hysteroscopy shows atrophy. The wide using of hysteroscopy with endometrial biopsy allows to provide confirm and early diagnostics of endometrial cancer.

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THE STATUS OF MAMMARY GLANDS IN PATIENTS WITH COMBINED HYPERPLASIAS OF THE ORGANS OF REPRODUCTIVE SYSTEM AFTER OVARIECTOMY

Material and methods. 67 patients with combined hyperplasias of the organs of reproductive system (CHORS), age of 35 to 49 years (mean age 43.4 ± 4.6

years) were examined. The diagnosis of CHORS was established by histological verification of two or more hyperplastic lesions (hysteromyoma, adenomyosis,