

examination was performed in three months following the completion of therapy: DNA of CMV was found in none of the patients of the studied group, IgM antibodies against CMV were not detected, IgG antibodies against CMV were found in 2 patients (6,2%). IgG titre was ranging 0,4 to 0,9 in 30 patients (93,7%).

Hormonal investigation showed normal levels of FSH and LH and E2 in 25 patients, and the E2 to FSH ratio increased to 27-40 (in phase 1 of the cycle). USI showed that the structure of the ovaries was within the age-related normal margins.

Conclusions. The obtained results make it possible to conclude:

- CMV has negative impact on the reproductive system;
- CMV is a factor causing ovarian resistance;

Rusina E.I.

Ott's Research Institute of Obstetrics and Gynecology RAMS, Saint-Petersburg, Russia

Introduction. Pelvic varicose is associated with different gynecologic diseases (myoma, ovarian tumors, endometriosis and others). Also it may be the independent disorder and cause chronic pelvic pain, sterility. The role of connective tissue disorders in varicose progressing is studied actively.

Objective: to evaluate markers of connective tissue displasia in female patients with pelvic varicose.

Materials and methods: The laparoscopy and physical exam were performed in 25 female patients (mean age range 32 ± 5,5 years) with symptoms of chronic pelvic pain. Physical examination was done to asses sixty five markers of connective tissue displasia by author's algorithm.

Results: Unilateral or bilateral varicose parametrial veins were found in all patients during laparoscopy. Nine patients (36%) had thinness or defects of uter-

Tayts A.N.

Saint-Petersburg Pediatric Medical Academy, Department of obstetrics and gynecology, City Centre of Laparoscopic Surgery, Saint Elizabeth Hospital Saint-Petersburg, Russia

Material and methods. To assess the psychological reaction to the stress connected to the laparoscopic intervention Spilberg – Hanyin scale have been used. Comparative analysis was used in two groups of patients with fallopian tube rupture (as a result of tubal gestation). In the 1st group there were 15 patients who had undergone laparoscopic surgery. In the 2nd group there were 15 patients who had undergone laparotomy. In both groups average age of patients was 28 ± 3,1 and 30 ± 2,3 respectively. We estimated correlation be-

- Patients with hypomenstrual syndrome shall be tested for CMV infection by using PCR and enzyme-linked immune assay methods in order to confirm the diagnosis of ovarian resistance;
- For the purposes of making a final diagnosis, laparoscopy and gonadal biopsy and withdrawal of material from the abdomen for PCR (CMV diagnosis) are required;
- Estrogen-gestagen therapy as a certain phase of treatment of patients with developing ovarian resistance if pathogenetically justified; in such cases, administration of transdermal Divigel is preferred;
- We have offered a method of treatment of ovarian resistance in patients with CMV infection showing very high efficacy.

MARKERS OF CONNECTIVE TISSUE DYSPLASIA IN PATIENTS WITH CHRONIC VENOUSE INSUFFICIENCY

ine wide ligaments. Another diseases of reproductive system were not found. Twenty four patients (96%) had any markers of connective tissue displasia, such as migraine (91%), asthenic somatotype (74%), easy haemorrhage formation (65%), vegetative disfunction (63%), constipation (55%), joint hypermobility (49%), thorax and spine deformation (36%), vaginal prolaps I – II (25%). Combination of 6-10 markers were found in 78% cases, 10-15 markers – in 22% cases. Any disembriogenesis stigms such as – the distorted little finger, epicanthus, teeth anomaly, deformation of external ear, sandal shaped foot were found in 85% patients.

Conclusion: Markers of connective tissue system disorder were revealed in the most of patients with pelvic varicose. It is necessary take into account for risk groups formation and choice of treatment methods for patients with this disease.

PSYCHOLOGICAL FEATURES OF PATIENTS REACTION ON THE STRESS CONNECTED WITH LAPAROSCOPIC BY INTERVENTION

tween degree of anxiety and risk appraisal for surgical treatment of patients with ectopic pregnancy in both groups.

Results. Most patients, who displayed high level of anxiety (75%) were found within 2nd group, i.e. there was revealed correlation between level of anxiety and risk appraisal for forthcoming laparotomy ($r > 0,7$). In both groups assessment of patients reaction to specific situation (hospitalization), has displayed that level of anxiety, that was estimated by Spilberg

– Hany test, was mild (31 – 45 point; date of test authors), whereas the same indicator for the patients from IInd group was positively higher ($44,4 \pm 6,5$ и $39,9 \pm 8,0$ correspondingly). The same time, more then 65% of patients have displayed high level of anxiety (>46) and only every tenth of patients have shown low level of anxiety (<30). The biggest increase of the indicators

of anxiety was noticed among patients who was diagnosed of ectopic pregnancy ($47,75 \pm 0,46$).

Conclusions. These parameters were directly connected to the stress caused by hospitalization with urgent surgical diagnosis. We have found that usage of laparoscopic surgery decreases level of anxiety of patients with ectopic pregnancy.

Shaparnyov A.V.¹, Kobiashvili M.G.²

¹ St. George Hospital,

² Center of urgent and radiation medicine MES, St. Petersburg, Russia

CLINICAL SIGNIFICANCE OF ADAPTATIONAL REACTIONS OF FEMALE ORGANISM UNDERGOING LAPAROSCOPIC OPERATIONS ON UTERUS AND ADNEXA

Introduction. Laparoscopic operations on adnexa have become the "golden standard" now and those on uterus start to compete to traditional approach. But adaptational reactions of female organism and their clinical significance are not studied enough.

Material and methods. Clinical and laboratory study of 116 cases of laparoscopic operations on uterus and adnexa was performed. 86 (74%) of them were cases of benign adnexal tumors and 30 (26%) – cases of myomas. 78 (67,2%) cases were operated conservatively and 38 (32,8%) were treated radically. Type of adaptational reaction was evaluated according to L.H. Garkavy's method (1978, 1999) by correlations in WBC, which reflect the force of side influence. Statistic and discriminant analyses were held using p-criteria and Fisher's F-criteria.

Results. The most powerful influence was mentioned in radical operations on uterus, the less – in conservative operations on adnexa. In first postoperative day laparoscopic operation and its after-effects became powerful influence for 96% (25 cases) of patients operated on uterus and for 73% (66 cases) of patients operated on adnexae ($p < 0,05$). The most powerful influence among the operations on adnexae proved

to be operations due to teratomas and endometriomas with their content getting into abdominal cavity after their walls injuries or ruptures. The less powerful influence was fixed in cases of conservative operations for paraovarian cysts, even more then 20 cm in diameter. By the fifth postoperative day performed laparoscopic operation and its effects stayed powerful influence for 35,4% (41) of patients, influence of middle and low power was fixed in 64,6% (75) of patients. Discriminant analyses of significance of factors of influence showed the main role of mode of influence on tissues during the operation, volume of operation and kind of postoperative treatment. Considerable meaning was mentioned for postoperative pain levels, body temperature, intoxication indexes and WBC adaptational changings.

Conclusion. The results of this research served the pathogenetical basement for correction of using of various types of instruments, special operation techniques and adequate postoperative medicamentous treatment. Usage of received results showed the reduce of quota of patients with reactions on powerful influence in 5th postoperative day more then 4 times – to 8,6% (5 of 58 patients) in group of control.

Sheshunov I.V., Subbotin D.N., Rozuvan A.A., Danilov D.V.

Kirovsk State Medical Academy, Medical Centre-52, Federal medicobiological agency, Russia

ESTABLISHMENT OF URGENT GYNECOLOGICAL ENDOVIDEOSURGERY IN CONDITIONS OF SMALL TOWN

Objective: to show the possibilities of structure change, used diagnostic and treatment technologies in gynecological patients of medical units in small town on the example of establishment of endovideosurgical methods and 24-hours ultrasound diagnostics.

Materials and methods: we choose 2 groups of the most frequent diseases required surgery: extrauterine pregnancy and ovarian apoplexy.

Results: in patients with extrauterine pregnancy results of treatment after laparotomy and laparoscopy were compared and showed the decreasing of hospital-

stay, operation time, durations of postoperative pains in group of laparoscopy. In case of ovarian apoplexy 24-hours ultrasound diagnostics allowed to reject surgery.

Conclusion: endovideosurgical methods and 24-hours ultrasound diagnostics allowed to create the criteria of differential diagnosis, to refuse from additional invasive procedures such as cul-de-sac puncton, to reject surgery in case of ovarian apoplexy, to replace laparotomy in urgent adnexial surgery. All these advantages led to decreasing of treatment cost, reduced intraoperative trauma and hospital-stay duration.