It's not unknown how many evil consequences for those giving birth in the absence of
scientists and skillful attendants occur every day, and it often happens that these poor
women in labor are in their torment, and even sinless babies, for the same grandmothers
called art, are not only for life with injury to one or the other remain, but life itself is
prematurely deprived ...

P.Z. Kondoidi, 1754

Contemporary concepts concerning etiology, pathogenesis and therapy
principles of neuroendocrinal disturbances are reflected in this lecture.

The results of Chlamydia trachomatis detection in different urogenital samples
(vagina, cervix, urethra, urine) are presented in this report. The study was carried
out for the period of 1999 to 2000. A total of 397 women and 253 men were
examined. Cervical, urethral and vaginal swabs from women, and urethral, first
voided urine (FVU) specimens from men were tested.

For diagnosis of Chlamydia, trachomatis the following methods were used:
polymerase chain reaction (PCR), direct immunofluorescence test (DIF) and
cell culture (CC). In male samples, more often chlamydiae were detected in the
urethra (11.6%), more rarely – in the FVU (6%). When female samples were
tested, more often C.trachomatis was found in the vagina (18.4%), and less often
– in the cervix (14.4) and the urethra (8.8%).

The sensitivity and specificity of the methods used to test urogenital samples
were determined. The PCR sensitivity and specificity was shown to be 75 and
100% for C.trachomatis detection in the cervix, 75 and 97.5% - in the female
urethra, and 63 and 99% - in the vagina, respectively. The PCR sensitivity and
specificity was found to be 78 and 100% in the male urethral specimens and 100
and 99.6% in the FVU, respectively.

The sensitivity of cell culture method used for chlamydiae detection in cervical,
female and male urethral samples was low – 33.9, 47.4 and 50% respectively. The
CC specificity was 100%.

The technique of pooling endocervical samples for PCR detection of
C.trachomatis was developed and compared with individual testing. The
efficiency of pooling strategy was evaluated for its accuracy and cost saving
ability. Population prevalence based on pooled data was estimated. 1,500
endocervical samples were tested individually and pooled by 5 (300 pools) and
10 (150 pools) specimens. The sensitivity and specificity of PCR was not affected
by pooling either by 5 or by 10 samples. The estimated prevalence was 6.1%
(95% CI: 4.5-7.7) and 6.0% (95% CI: 4.3-7.7) for pooling by 5 and 10,
respectively. The prevalence of 6.6% determined by individual testing (99 of
1,500) was within 95% CI of the estimated prevalence for pooling by 5 and 10.
The used pooling strategy has resulted in 53.3 and 44.0% cost savings, when
endocervical samples were pooled by 5 and 10, respectively. Thus, pooling
endocervical samples for detection of C.trachomatis is an accurate and cost saving
approach for realization of large-scale studies.

This article is dedicated to the review of contemporary methods of womb
adenomyosis.

Authors have performed the analysis of literature data about diagnostic
informationness of various histological verification disease methods and have
determined main tendencies of these methods improvement, have discussed
perspectives.

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