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CURRENT APPROACH AND FACTORS LEADING TO ENDOMETRIAL HYPERPLASIA IN PREMENOPAUSE

Todjieva Nigina Iskandarovna
Department of Obstetrics and Gynecology, Medical Faculty
Samarkand State Medical University

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Abstract:

Endometrial hyperplastic processes (EH) is an extremely important, complex and versatile problem of practical gynecology. The tendency of GPE to a long, recurrent course, the absence of specific, pathognomonic symptoms, the complexity of differential diagnosis and the choice of treatment methods. In addition, this pathology is a proliferative process and, if left untreated for a long period of time, can be a background for the development of endometrial cancer. A steady increase in the incidence of cervical cancer, which ranks fourth among malignant tumors seen in women (after breast, lung, and colon cancer) and takes first place among tumors of the female genitalia, has been noted over the past 20 years.

Keywords: Premenopause, endometrial hyperplasia, hormonal therapy.

INTRODUCTION. Endometrial hyperplasia is an extremely important, complex and multifaceted problem of practical gynecology. This is because this pathology is considered to be a proliferative process and it can be a background for the development of endometrial cancer if left untreated for a long time [1, 5]. The incidence of GEE in the gynaecological pathology is 15-40%[4]. Endometrial hyperplastic processes in the perimenopause are the most common cause of uterine bleeding, leading to curettage of the uterine cavity walls [3]. Studies show that among perimenopausal patients with abnormal uterine bleeding, GEE is detected in 54% to 62% of women (2, 6).

OBJECTIVE: to determine the risk factors for the development of endometrial hyperplastic processes in premenopause

MATERIAL AND METHODS OF THE STUDY. A comprehensive clinical and laboratory examination and treatment were performed in 50 patients with endometrial hyperplastic processes in the premenopausal period. The study selection criterion was a histologically verified diagnosis of endometrial hyperplasia without atypia. Patients with atypical hyperplasia, uterine corpus cancer, cervical malignancy, uterine myoma with submucosal nodes or several nodes with centripetal growth and myomatous nodes that enlarge the uterus beyond 10 weeks of pregnancy, severe somatic pathology were excluded from the study. The control group comprised 50 premenopausal women. The mean age of the patients in the study group was 45.5 ± 1.99 years, and 46.8 ± 1.75 years in the control group, which indicates that the women in the study groups were comparable by age. The analysis of the heredity of cardiovascular diseases revealed that 4 (13.3%) patients in the main group had a family history of hypertension and ischemic heart disease, which was not significantly different from that of the control group - 5 (16.6%). The relatives of the main group had oncological diseases in 11 (36.7%) patients, while the control group had 7 (23.3%). Uterine myoma and endometrial hyperplastic processes were recorded in 12 (40%) cases among the benign gynecological diseases in the relatives of the main group patients, while in the control group the figure was 4 (13.3%).

On studying the medical history of the patients of the examined groups, allergic reactions to various allergens (mostly drug allergies) were revealed in 4 (13.3%) patients in the main group and in 3 (10%) cases in the control group. Acute respiratory viral infections, infectious and inflammatory diseases in childhood and adolescence were suffered by most of the observed patients with endometrial hyperplastic processes.

In the study of extragenital pathology, a high percentage of chronic gastrointestinal diseases in various combinations was found in 18 (60%) female patients of the main group and in 10 (30%) female patients of the control group. History of hepatitis A was noted in 3 (10%) and 4 (13,3%) subjects of both groups respectively.

Chronic cystitis, pyelonephritis and urolithiasis were revealed in the structure of urinary tract diseases in women of the examined groups - 16.6% and 13.3% in the main and control groups respectively.

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Cardiovascular diseases, predominantly hypertension and vegetative vascular dystonia, occurred in a substantial proportion of the patients with endometrial hyperplasia in the main group - 15 (50%) women, which was not significantly higher than in the control group - 12 (40%).

varicose veins of the lower limbs were detected in 7 (23.3%) cases in the study group and in 7 (23.3%) patients in the control group. There was a history of thrombotic complications in 1 (3%) patient in the main group whereas the control group patients had no history of thrombotic complications.

The endocrine diseases were revealed in 5 (16.6%) women of the study group in the hypothyroidism, nodular goiter and diffuse toxic goiter. Four (13.3%) of the control group patients had nodular goiter.

A history of anemia was noted in 26 (86.6%) patients in the main group, and only in 12 (40%) patients without endometrial pathology.

In 9 (30%) patients with a history of endometrial hyperplastic processes, surgical interventions for extragenital pathology were performed: appendectomy in 5 (16.6%), cholecystectomy in 4 (13.3%), tonsillectomy and thyroid resection in 2 (6.6%), respectively. The rate of surgical interventions in the control group was 20%: 2 patients had cholecystectomy and 4 patients had appendectomy.

RESULTS OF THE STUDY. The analysis of the heredity of cardiovascular diseases revealed that 4 (13.3%) patients in the main group had a family history of hypertension and ischemic heart disease, which was not significantly different from that of the control group - 5 (16.6%). The relatives of the main group had oncological diseases in 11 (36.7%) patients, while the control group had 7 (23.3%). Uterine myoma and endometrial hyperplastic processes were recorded in 12 (40%) cases among the benign gynecological diseases in the relatives of the main group patients, while in the control group the figure was 4 (13.3%).

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CONCLUSIONS: The analysis of somatic, gynecological morbidity, reproductive function of the examined women with endometrial hyperplastic processes showed that, in general, patients with endometrial hyperplastic processes are characterized by: hereditary burdening for hyperplastic and malignant diseases of the reproductive system; increased level of somatic pathology with prevalence of cardiovascular and gastrointestinal diseases; high infection index; specific features of reproduction formation.

LIST OF REFERENCES

1. Gallos I.D., Ofinran O., Shehmar M., Coomarasamy A., Gupta J.K. Current management of endometrial hyperplasia – a

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survey of United Kindom consultant gynaecologists. Eur.J. Obstet.Gynecol. 2011;158(2);305-307
2. Azimov M. I., Shomurodov K.E. A technique for Cleft Palate Repair. Journal of research in health science. Vol. 1, No. 2, 2018, pp. 56-59.
3. Khamdamov B.Z. Indicators of immunocitocine status in purulent-necrotic lesions of the lover extremities in patients with diabetes mellitus.//American Journal of Medicine and Medical Sciences, 2020 10(7) 473-478 DOI: 10.5923/j.ajmm.2020.- 1007.08 10.
4. M. I. Kamalova, N.K.Khaidarov, Sh.E.Islamov,Pathomorphological Features of hemorrhagic brain strokes, Journal of Biomedicine and Practice 2020, Special issue, pp. 101-105
5. Kamalova Malika Ilkhomovna, Islamov Shavkat Eriyigitovich, Khaidarov Nodir Kadyrovich. Morphological Features Of Microvascular Tissue Of The Brain At Hemorrhagic Stroke. The American Journal of Medical Sciences and Pharmaceutical Research, 2020. 2(10), 53-59
6. Khodjieva D. T., Khaydarova D. K., Khaydarov N. K. Complex evaluation of clinical and instrumental data for justification of optive treatment activites in patients with resistant forms of epilepsy. American Journal of Research. USA. № 11-12, 2018. C.186-193.
7. Khodjieva D. T., Khaydarova D. K. Clinical and neuroph clinical and neurophysiological ch ogical characteristics of teristics of post-insular cognitive disorders and issues of therapy optimization. Central Asian Journal of Pediatrics. Dec.2019. P 82-86
8. Sadriddin Sayfullaevich Pulatov. (2022). Efficacy of ipidacrine in the recovery period of ischaemic stroke. World Bulletin of Public Health, 7, 28-32.
9. Tukhtarov B.E., Comparative assessment of the biological value of average daily diets in professional athletes of Uzbekistan. Gig. Sanit., 2010, 2, 65–67.
10. . Ergashovich, K. B., & Ilhomovna, K. M. (2021). Morphological Features of Human and Rat Liver and Biliary Tract Comparisons (Literary Review). *International Journal of Discoveries and Innovations in Applied Sciences*, *1*(4), 27–29.
11. Kamalova M., Khaidarov N., Shomurodov K. Microscopic examination of brain tissue in hemorrhagic stroke in uzbekistan //Матеріали конференцій МЦНД. – 2021.
12. Kamalova, M., Ismatova, S., Kayumova, S., Gulomova, S., & Akhmedova, J. (2021). Blood supply to the shoulder and forearm muscles in the human foetus. *Збірник наукових праць ΛΌГОΣ*.