



Early detection of hyperplastic and dystrophic processes of reproductive system

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The diseases of female sexual system, a gynecologist has deal in his praxis most frequently with, are hysteromyoma and endometriosis belonging to innocent hyperplastic and dystrophic diseases. The dairy glands, as well as uterus, are organs, which can be regarded as targets for sexual steroid hormones and, accordingly, they are subject to pathologies [1].

Disorder of hormonal homeostasis is the main reason of developing hyperplastic processes in uterus and in dairy glands, combined with disordered carbohydrate, lipid and other kinds of metabolism changes. The arising of hyperplastic processes in endometrium, in dairy glands can be promoted by burdened heredity (hysteromyoma, cancer of genitals and of dairy gland, essential hypertension and other diseases), damaging influences during the intra-uterine life, diseases in the period of puberty and disorders of menstrual and reproductive function connected with them. The hyperplastic processes of female sexual system are often accompanied by fatness, essential hypertension, diabetes, and disordered function of liver, which is responsible for metabolism of hormones.

The direct reasons of hyperplasia, particularly of endometrium, also can often be disorders of ovulation (anovulation, monophasic cycles) for which absolute or relative hyperestrogenia is characteristic. It is known, that this pathology is observed in the pubertal or premenopausal period a little bit less often this pathology can have women of reproductive age with unstable regulation of reproductive system functions. The hyperplasia of endometrium can be observed in case of sterility caused by disordered ovulation. The hyperplastic processes quite often arise in case of polycystic ovary, namely when having the secondary form of this pathology connected to disordered functions of hypothalamic structures and accompanied by fatness. Thus the important role in development of hyperestrogenia plays the synthesis of estrogens in the adipose tissue. The reasons of hyperplasia of endometrium can be hypertecose and feminising ovary tumours, too, but not so often [1,2,3,4].

Proceed from the above-stated, a duly recognition of hyperplastic processes of reproductive system has a great value for a choice of tactics of treatment and prophylaxis of onco-diseases.

There is a lot of diagnostic methods. To detect the illness of endometrium, in particular, the diagnostic curettage of uterus mucous membrane can be used with the posterior histologic



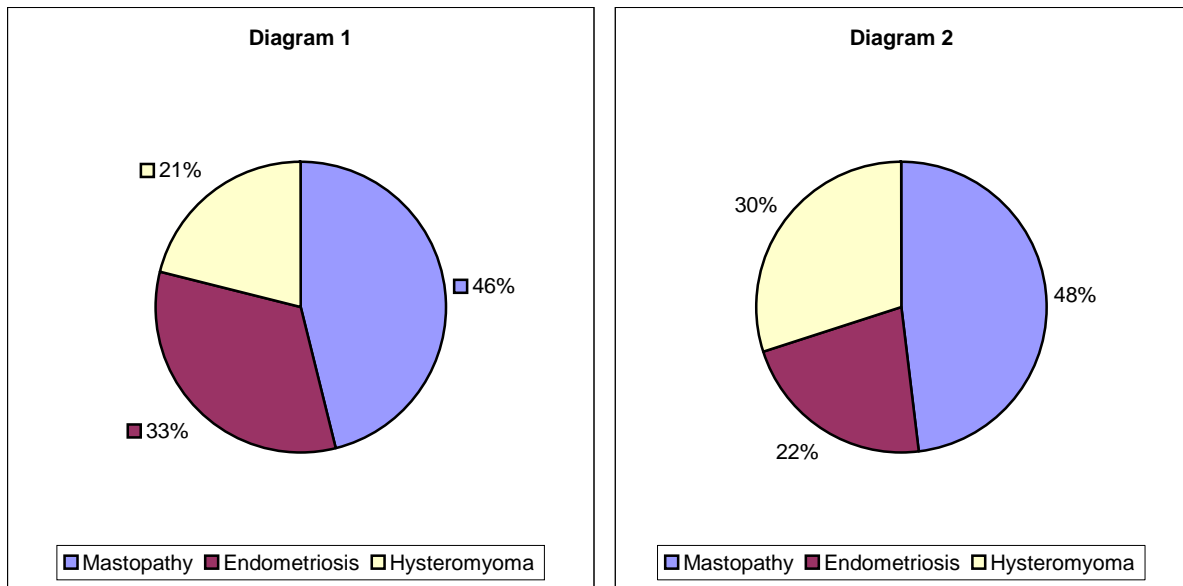
examination of the received material. Thus, under the control of hysteroscopy the whole mucous membrane is being removed, including the area of uterus bottom and of uterine tube corners where the centers of adenomatosis and polyps are located quite often. When doing histological and histochemical examinations of biopsy material, the character of pathology can be defined (hyperplasia glandulocystica, atypical hyperplasia-adenomatosis- diffuse, nidus-formed; polyps – glandular, adenomatous, fibrous), and also the activity hyperplasia depended on degree of mitotic activity of cells, on nucleic acid contents and on other parameters. To control the treatment and to make screening examinations, the cytologic method of studying the uterus contents obtained with the aspiration, is used.

Of significant diagnostic value are also the methods of ultrasonic scanning, hysteroscopy, hystero-graphy and radioisotope examination of uterus, too. To examine the dairy glands, ultrasonic diagnostics, mammography with the posterior cytologic examination are applied [5].

In spite of the fact that all listed methods play an important role in the practice of gynecologists, their recommendation demands certain motivations. That's why the task of our work was to show, that the "Biolaz-Oberon" [6] method has its advantages to be applied when doing pre-clinical diagnostics to detect the pathology of reproductive organs approximately, so that, depended on the results, additional examinations with using of more specialized techniques could be recommended.

According to the task we have set, 121 women had been examined to define the state of dairy glands and uterus. The age of the examined patients was from 32 to 57 years. The majority of them (72 patients) were in reproductive age (from 35 to 45 years), 23 patients were in climacteric age (from 45 to 50 years) and 26 patients had their perimenopausal period (older than 50). The average age of the examined women was 41, 3 years. A preliminary investigation was carried out with "Biolaz-Oberon" equipment. The dairy glands were investigated with palpation, ultrasonic scanning, radiological mammography was carried out, in some cases a cytologic investigation has been done. To examine the organs of small pelvis, the method of ultrasound scanning was used, too; in some cases the hysteroscopy, diagnostic curettage with the posterior hystologic examination has been done.

To give a visual demonstration, some diagrams are shown below, where the results of investigations are represented in their volumetric correlation; these results were obtained with "Biolaz-Oberon" method (diagram 1) and with clinical techniques (diagram 2). The diagram with the results obtained with clinical investigation methods is used as a standard one.



Where:

- yellow colored part means hysteromyoma
- wine-colored part means genital endometriosis
- dark blue colored part means mastopathy

The presented diagrams show, that the results obtained by "Biolaz-Oberon" method differ from the standard ones a little. The differences are applied to various kinds of mastopathy, first of all. (. Some tendency to hyperdiagnostics of genital endometriosis can be noted because of the fact, that myomas have been detected insufficient.

As result of work we have done, the conclusion has been made, that the application of "Biolaz-Oberon" method is quite proved for carrying out the preliminary approximated examination of women's reproductive system organs allowing to detect in most cases an available pathology, that, in its turn, can be used as motivation for differentiated recommendations to be examined with more precise clinical methods of diagnostics.

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