

18th World Congress of the Academy of Human Reproduction

3-6 April 2019

Convention Centre Dublin, Ireland

P96. Choice Of Tactics Of Treatment In The Combination Of Myoma And Adenomyosis In Women Of Reproductive Age

N Muratova (UZ) [1], G S Babadjanova (UZ) [2], S Abdurakhmanova (UZ) [3], Z Khodjaeva (UZ) [4]

Treatment of women with a combined form of fibroids and adenomyosis is much more complicated than each disease separately. Infertility is a common cause of treatment in these patients. The purpose of this study was to determine the tactics of treatment of women with a combined form of fibroids and adenomyosis. We examined 65 women with menstrual disorders. All examined were divided into 3 groups: group 1 - 55 women with a combined form of fibroids and adenomyosis, group 2 - 40 women with adenomyosis, group 3 - 40 women with uterine myoma. The control group consisted of 20 healthy women. The median age of the patients was 36.1 ± 0.9 years. The methods of the study were Dopplerometry of the blood flow nodes. The results of the study showed that the clinical manifestation of combined forms of fibroids and adenomyosis differs from the symptoms of only fibroids or adenomyosis. When combined with fibroids and adenomyosis, abnormal uterine bleeding (AUB) was often observed in 37 patients (67.5%). Ultrasound in the combined form in the examined patients often revealed multiple myoma nodes of small size and diffuse adenomyosis of the I-degree. In group 2 AUB was observed in combination with algomenorrhea in 17 women, less than in group 1 (42.5%, $p < 0.05$). In patients with myoma (type 4-5 fibroids according by FIGO), hypermenorrhea (37.5, $p < 0.05$) occurred. In group 1 of patients with a combined form infertility was observed in 52.3% of women. In patients of groups 2 and 3 infertility was observed - 45.0% and 35.0%, respectively. Therefore, with the combination of fibroids and adenomyosis, the clinic of menstrual disorders is more pronounced and infertility is observed more often with a duration of 2 to 6 years. The treatment was chosen depending on the identified pathology: with myoma, 5 mg of ulipristal-acetate (UPA) was prescribed for at least 2 courses for 3 months, for adenomyosis, 2 mg of dienogest was administered continuously for 6 months. In the combined form, treatment was started with dienogest continuously, then prescribed for UPA for 3 months. The results of treatment for 6-8 months showed that in most patients the cycle was normalized, the pain disappeared. A quarter of patients had a pregnancy.

Conclusion. Combined forms of uterine fibroids and adenomyosis have a more complex clinical picture, often complicated by infertility. Comprehensive treatment of these diseases leads to the restoration of the menstrual and reproductive functions of women.

[1] Tashkent State Dental Institut, Tashkent, [2] Tashkent Medical Academy, Tashkent, [3] Tashkent Medical Academy, Tashkent, [4] Tashkent State Dental Institut, Tashkent