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ASSESSMENT OF ACUTE ABDOMEN RISK IN ADOLESCENT AND YOUNG REPRODUCTIVE AGE

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**Relevance.** Recently, more and more reports have appeared in the literature on the increase in the incidence of benign tumors and tumor-like ovarian formations in children, adolescents and young women. Improvement of the methods of ultrasound diagnosis determines early detection of cystic formations in fetuses. The proportion of tumors and tumor-like formations of the ovaries ranges from 1.5 to 4.8% among gynecological disorders in children, adolescents and young women, and at a young reproductive age, this pathology often causes impairment of reproductive function (T.F. Tatarchuk, 2012, I.A. Tuchkina et al., 2015).

**Materials and methods.** The study was carried out at the clinical base of the Department of Obstetrics, Gynecology and Pediatric Gynecology of KhNMU. The study involved examination of 130 patients aged 11-32 (70 adolescent girls aged 11-17 years and 60 women aged 18-32), which was the main group. The patients underwent comprehensive examination and were treated for acute abdominal pain syndrome in in-patients settings. Control group included 45 healthy age-mates (25 adolescent girls and 20 women).

**Results of the study**. Examination verified the diagnosis – ovarian cyst. It showed that 53 adolescents and 22 women had retention formations of the ovaries, which caused abdominal pain syndrome. These patients were treated conservatively. Operative treatment by laparoscopy was rendered to 17 adolescents and 38 women with ovarian cysts exceeding 5-6 cm in diameter and with the signs of acute abdomen.

Assessment of the course of pregnancy and childbirth in mothers of our patients showed that in the main group both adolescents and women of young reproductive age were more frequently born by mothers with serious obstetric and perinatal abnormalities and complications. These abnormalities included threatened abortion, obstetric hemorrhages, low and excessive weight of newborns, fetal distress. Patients of the main group had a high infectious index, the number of patients who frequently developed respiratory diseases and the incidence of extragenital pathology was 2 times higher than in the control group. Past history of 60% of patients in the main group included inflammatory diseases of the female reproductive system: synechia of vulva (in childhood), vulvovaginitis, bartholinitis, salpingo-ophoritis.

On physical examination all the patients were found to have signs of acute abdomen, tenderness in the area of appendages or tumor-like formations. Echosonography showed effusion in the abdominal cavity up to 100 ml or a formation with a diameter of more than 5-5.5 cm.

**Conclusions.** Pathological course of pregnancy and childbirth in mothers, complicated premorbid background and presence of inflammatory diseases of the female reproductive system in past history can be attributed to the risk factors for the development of tumors and tumor-like formations of the ovaries in adolescents and young women that trigger acute abdomen. The presence and extent of effusion in the abdominal cavity and the size of tumor-like formation are decisive for choosing the method of treatment in “acute abdomen”.