**Materials and methods.** Materials of the study were fragments of endometrium with the subject myometrium, which were obtained by hysteroscopic surgical intervention with subsequent mechanical evacuation of the tissue and conducting its histological and histochemical examination. The study was attended by 36 women of late reproductive age. Depending on the nature of the pathological process in the resulting biopsy material, the patients were divided into the following groups: I group consisted of 18 cases of adenomyosis I-II degree, II group - 6 cases of endometrial hyperplasia, group III - 6 cases of glandular fibrotic polyp of endometrium, IV group - 6 cases of glandular-fibrous polyp on the background of glandular hyperplasia of the endometrium.

**Results.** As a result of a morphological study, it was found that in the cases of groups II, III and IV, the boundary between endometrium and myometrium is quite clear, collagen fibers are observed in small numbers in the stroma of the basal units of the endometrium, that is, in the endometrial part of the junctional zone, and in polyps of collagen fibers are located mostly in the so-called "leg" in a moderate amount. In the study group I, the junctional zone "jagged" due to immersion of the endometrium in the myometrium on interfascicular spaces of the connective tissue, endometrial glands are hypertrophied, in the basal department are surrounded by a stroma with a large number of cells. In the stroma of the lower third, and sometimes 1/2, the layer of endometrium, collagen fibers were diffusely found in a moderate amount, in places with a significant number of the latter. In all the groups, in addition to the stroma, collagen fibers were detected along the basement membranes of the glands and blood vessels. As for the myometrial part of the junctional zone, collagen fibers surrounded the tufts of smooth muscle fibers. In adenomyosis, smooth muscle fibers are slightly enlarged in comparison with the comparison groups.

**Conclusion.** It has been established that the stroma of the endometrium and the junctional zone in adenomyosis and some proliferative processes of the endometrium differ both in the survey microscopic pattern and in the number and location of collagen fibers, which may be one of the differential criteria between the pathological processes studied in this study.
Materials and methods. We analyzed the results of treatment of 45 patients with AUB. Patients were divided into 3 groups. 1 group consists of 15 patients with acute prolonged uterine bleeding (APUB). Group 2 consists of 15 patients with AUB on the background of uterine leiomyoma. And group 3 is 15 patients with AUB on the background of adenomyosis. The mean age of the patients of group 1 was 49.3 ± 1.2; group 2 - 45.6 ± 2.5; and group 3 - 48.6 ± 1.6 years. Regarding the volume of menstrual blood loss (VMBL), the following was noted: in group 1 - 185.7 ± 10.2 points on the PBAC scale; in group 2 - 193.3 ± 8.5 points; in group 3 - 180.3 ± 9.1 points. On the body mass index was noted: in group 1 - 22.5 ± 1.8; in group 2 - 23.2 ± 1.2; in group 3 - 22.8 ± 3.1. For the purpose of treatment and secondary prophylaxis of AUB development, for patients were assigned Tranexamic acid 500 mg 3 times a day from the first day to the third day of the menstrual cycle for three months.

Results. In the course of the research, it was revealed that VMBL decreased from 1 month of treatment with further improvement in treatment dynamics. VMBS in the 1 group of patients with APUB decreased from 185.7 ± 10.2 to 175.2 ± 8.4 points; in the 2 group of patients with uterine leiomyoma - from 193.3 ± 8.5 to 171.6 ± 7.3 points; in the 3 group of patients with adenomyosis - from 180.3 ± 9.1 to 163.6 ± 8.8 points. A more pronounced decrease of VMBL was observed in patients of groups 2 and 3. It was noted that all patients had a good transfer of the therapy. Side effects were not found in any of the patients.

Conclusion. As a result of our researches was determined the high efficacy, good tolerability and safety of the tranexamic acid preparation in the treatment and prevention of AUB in patients with APUB, adenomyosis and patients with uterine leiomyoma which one had the most pronounced treatment effect.

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MODERN APPROACHES TO THE TREATMENT OF CHRONIC SALPINGO-OOPHORITIS IN WOMEN OF REPRODUCTIVE AGE
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Introduction. Currently, chronic salpingo-oophoritis (HSO) in women of reproductive age is considered as a general polysystemic disease involving reproductive as well as endocrine and immune systems in the pathological process. According to the authors, in conditions of chronic inflammation, both microbial invasion and immunological disorders are the factors of pathologic changes. It is known that in patients with chronic pelvic diseases there is an increase of endogenous intoxication, which leads to immunosuppressive and cytotoxic conditions. Determine the effectiveness of treatment of HSO with the inclusion of the immunomodulator preparation glutamyl-cysteinyglycine disodium to the standard therapy.