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THE ROLE OF THE MASTODYNIA IN THE DEVELOPMENT OF PRIMARY INFERTILITY

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Female infertility is one of the urgent problems in gynecology, which leads to a worsening of the demographic situation and is a factor that worsens the quality of a woman's life. The causes of infertility are very diverse and represent a combination of organic and functional disorders in the female reproductive system. The diagnosis of infertility is difficult, it includes a comprehensive examination, in the form of a number of instrumental and clinical laboratory studies, which are sometimes reused. Thus, the problem arises of identifying early functional disorders, the diagnosis of which will reduce the incidence of female infertility through their timely correction. The aim of this work was to study the presence of mastodynia in adolescence for the occurrence of primary infertility in reproductive age. Materials and methods: 50 women 25-29 years old (25.6 ± 0.1 years old) with primary infertility were examined. The study included the identification and recording in special maps of a history of pain symptoms in the area of the mammary glands, their periodic engorgement, increased nipple sensitivity and discomfort when touched. Additionally, the level of prolactin (PRL) in the blood was investigated on the 3-4th day of the menstrual cycle using chemiluminescence immunoassay. To exclude a sporadic rise, the PRL level was determined by us twice in two menstrual cycles. The non-tumor nature of hyperprolactinemia was confirmed by X-ray examination of the 197 sella turcica, excluding pituitary adenoma. Results of the study and their discussion: Studies have shown that 40 women (80%), starting from menarche, had 2-3 symptoms of mastodynia, which persisted until the diagnosis of primary infertility was made. The level of PRL in them turned out to be increased, amounting to 37.3 ± 0.1 ng / ml and 36.4 ± 0.2 ng /ml in two subsequent studies, respectively. Additional analysis of the Xray of the skull did not reveal any pathological abnormalities. Based on the study, we concluded that in the presence of mastodynia symptoms, starting from adolescence, an additional examination is required, including determining the level of PRL and X-ray examination of the skull. If changes are detected, it is necessary to prescribe therapy aimed at stabilizing the PRL. A history of mastodynia should be considered as a risk factor for the development of infertility.