

**The TUMS-KhNMU International
USERN Spring e-Course**

April 12th - May 14th, 2021

Held by:

*Tehran University of Medical
Sciences (TUMS), Tehran, Iran*



TEHRAN UNIVERSITY
MEDICAL SCIENCES

*Kharkiv National Medical University
(KhNMU), Kharkiv, Ukraine*



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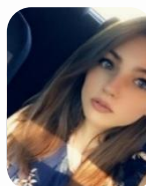
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MEDICAL SCIENCES

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Obesity effect on the menstrual function of women in reproductive age

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Topicality: Worldwide, an increase in obesity and overweight is detected, which negatively affect certain functions of the human body, especially reproductive health. In predominantly, in women with obesity, there is a violation of the ovarian axis of the hypothalamus-pituitary gland, which often leads to menstrual dysfunction, leading to anovulation and infertility.

Goal: In this study, we examine the correlation between body mass index (BMI), waist circumference (WC) with oligomenorrhea (OMR) or irregular menstruation in women of fertile age.

Research methods and materials: This prospective cohort study enrolled 68 women aged from 18 to 40 years. All members were required to fill out a menstruation questionnaire. The criterion for inclusion in the OMR group was the duration of menstruation ≥ 38 days. The irregular menstruation is the duration of menstruation more than 8 days. WC, height, weight were measured in women, and BMI was calculated. Participants were divided into 4 groups according to BMI ($\leq 18.5, 18.5-24.9, 25-29.9, \geq 30$ kg/m²). Women were also divided into 4 groups according to WC ($\leq 70, 70-79.9, 80-89.0, \geq 90$ cm). Using binary logistic regression models, we assessed the odds ratio(OR) of different BMI and WC groups in reporting menstrual function. The ROC curve was used to compare the forecasted effects of BMI and WC with OMR and not regular menstruation.

Results and discussion: 63 participants completed the questionnaire correctly. Of the 63 participants, 5 women (7.9%) had a BMI ≥ 30 kg/m², 10 (15.9%) had a WC ≥ 90 cm, 5 (7.9%) had an OMR and 14 (22.2%) had irregular menstrual periods. Typically, women with BMI ≥ 30 kg/m² or WC ≥ 90 cm should have longer menstrual cycle. The occurrence of not regular menstruation was over with BMI ≥ 30 kg/m² (OR=2.5), WC ≥ 90 cm (OR=2.3). The ROC curve showed that all anthropometric parameters had a forecast effect, but there was insignificant difference in the prognosis of OMR. WC was better prognostic factor of irregular menstruation than BMI.

Conclusion: Obesity, OMR and not regular menstruation are spread in women of reproductive age, and obesity was associated with OMR and irregular menstruation. Abdominal obesity may have a greater prognostic effect for not regular menstruation.



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Registration and
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