



minimally invasive surgery is a fundamentally new type of treatment organ-sparing hyperplastic processes. Important is the question of evaluating the effectiveness of endometrial ablation in different periods of the postoperative period.

**Aim:** to determine the significance of the use of ultrasound of the pelvic organs in evaluating electrosurgical endometrial ablation.

**Material and methods:** In 35 patients for recurrent endometrial hyperplasia and inefficiency hormone was produced electrosurgical endometrial ablation. The average age of patients was 51.1 years. Ultrasound monitoring was carried out using an ultrasonic apparatus «ALOKO SSD- 630 " (Japan). This study was conducted in all patients at admission and at 1, 3, 6, 7, 9, 12, 32 and 45 days after electrosurgical endometrial ablation.

**Results:** After the electro- surgical treatment in the early stages of ultrasound surveillance ( 1- 7th day) exceeds the initial size of the uterus is 5-7 mm. Thickness M-echo in this period amounted to an average of 10 mm, the boundary between the endometrium and myometrium was fuzzy, heterogeneity remained M-echo. Almost all the patients in the first day after surgery was noted that there hyperechogenic rim thickness of 2-3 mm around the periphery of the uterine cavity, most likely, this region corresponded to the zone of coagulation necrosis. During this period, it was also noted the presence of free fluid in the posterior fornix. The majority of patients free fluid from the posterior arch disappeared on the 7th day after surgery, and in patients with a history of chronic inflammatory processes in the pelvis, - on the 12th day. On the 7th day was a decrease in size of the uterus until the source. The boundaries between the projection of the endometrium and myometrium were becoming more apparent. When examining patients on the 12th day border between the endometrium and myometrium were distinct, the median M-echo - a homogeneous, more echogenic, to 4 mm thick . By the 30th day from the essential dynamics of the pelvic organs in echoscopic monitoring was not observed. During the monitoring period the structure and size of the ovaries in women of reproductive age have not changed, the other two ovaries are not visualized . On the 45th day all women with pelvic ultrasound pathology was identified. M-echo appeared homogenous , avascular, 2-4 mm thick.

**Conclusions:** A dynamic ultrasonic testing in patients after electrosurgical endometrial ablation provides an affordable and non-invasive assessment of the course of the early postoperative period, when the use of other methods is not possible.

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### **ECTOPIC PREGNANCY: ARE FAIR-COLORED WOMEN AT INCREASED RISK?**

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**Introduction:** Ectopic pregnancies (EP) implant outside the endometrial cavity. They complicate 1.5-2.0% of pregnancies and are potentially fatal. It commonly occurs in the fallopian tube and other sites such as the cervix, the ovary and the abdominal cavity. Risk factors for EP include damage to the fallopian tubes from previous pelvic inflammatory disease, tubal surgery and a previous EP, a history of cigarette smoking, age over 35 years and others. In Ghana the incidence of EP is between 29-32/1000 deliveries. Over the past several years, observations have been that EP are seen more frequently in women who are light-coloured or have fair skins in Ghana. However, a search in the literature identifies no



such risk. This study was done to scientifically look at this presumed risk factor.

**Aim:** To determine if women presenting to KATH with EP were more likely to be fair in skin complexion compared to those having intrauterine pregnancies.

**Methods and materials:** This was a matched case-control study of women presenting to the Obstetrics and Gynaecology department of KATH with ectopic pregnancy or intrauterine pregnancy between September 2011 and August 2012. All women presenting to the specialist consulting room or admitted to the department's wards of KATH were eligible for the study. All patients admitted to any of the gynaecologic wards: a- for cases, post-surgery confirmed diagnosis of ectopic pregnancy; b - for control, (absence of an EP). Data were recorded on a pre-designed case report form that reflected all variables to be collected. The records were doubly entered into electronic case report forms designed using Microsoft® Access 2007 software. The data were compared and cleaned on a weekly basis to eliminate inconsistencies. Cleaned data were exported to Stata/SE 11.2 for analysis.

**Results:** A total of 3,961 admissions were made to the gynaecologic wards of the hospital in the period under study. Of these, 418 were ectopic pregnancies, giving a prevalence of 10.6% of admissions. In all 330 participants were included in the study, 110 cases and 220 controls. Their ages ranged from 16-48, with a mean of 27.0 years. Most of the study participants were in employment (43.3%); very few (5.8%) had no formal education, and majority had lifetime sex partners of 2-3.

**Conclusion:** The study has established that being fair in skin complexion in black women is an added risk factor. This risk is found to be irrespective of whether the fairness is natural or has been artificially induced with skin toning or bleaching creams and soaps. This undoubtedly will help practitioners diagnose both ruptured and unruptured ectopic pregnancies as well as diagnosing atypical cases such as chronic/ leaking ectopic pregnancy.

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### **PREGRAVIDARUM TRAINING OF WOMEN AFTER UNREALIZED PREGNANCY**

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**Aim.** The research aims at the study of the immunological and histological endometrium peculiarities in women who experienced unrealized pregnancy after IVF in order to ascertain the most favourable background for conception and pregnancy development.

**Materials and methods.** Of the 104 women who were observed 44 women had a definitive diagnosis of unrealized pregnancy after IVF (first group); 30 women opted for pregnancy termination (second group); the control group included 30 healthy women contemplating prospects of pregnancy. Their clinical state was assessed by means of hormonal methods, histological, immunological features.

**Results.** The study elicited significant disturbances in the local cytokine balance, endothelial dysfunction, chronic inflammation in the endometrial histological structure that resulted in receptors susceptibility distortion in the case of unrealized pregnancy after IVF. The results showed that in the pathogenesis of unrealized pregnancy is a violation of angiogenesis accompanied by endothelial dysfunction and impaired immune status. Comprehensive treatment with ozone therapy and immunocorrector polyoxidonium



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