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ABSTRACT **BOOK**





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BIOMEDICAL SCIENCES





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RATIONAL TREATMENT OF BACTERIAL VAGINOSIS IN PREMENOPAUSAL WOMEN

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Introduction. Bacterial vaginosis is a common pathology among women in early menopause. The development of the disease is often associated, in particular, with progressive hypoestrogenism. With a decrease in the level of estrogen, the number of Doderlein bacillus decreases as the environment in the vagina leaches, which forms a favorable environment for the development of the opportunistic flora and vaginosis. Rationally selected treatment taking into account the pathogenetic mechanism of vaginosis development in premenopausal women can eliminate predisposing factors, restore vaginal microbiocinosis and prevent recurrence of the disease.

Materials and methods. The aim of our work is development of a rational method for treating bacterial vaginosis in premenopausal women.

At the clinical base of the Department of Obstetrics and Gynecology No. 1, 15 women at the age of 44-49 with bacterial vaginosis were examined.

According to the results of the bacterioscopy, at the first treatment, a small amount of white blood cells was detected in the smear, mainly coccal flora and gardnerelles were found against the background of absence or reduced amount of lactobacilli, pH of the vaginal environment - neutral. Women were divided into 2 clinical groups: 8 women of the I group used clindamycin phosphate 100 mg in suppositories vaginally, 7 patients of group II took combination therapy, including estrogen preparations and probiotics. After 7 and 30 days of treatment, a control examination was conducted and the results were compared in two groups.

Results. At the first control exploration, 7 women of the I group had a lack of conditionally pathogenic microorganisms and an abrupt decrease in the lactoflora. One patient had a Candida mycelium in small quantities. According to the results of the bacterioscopy of women of the II group, all patients have normalization of clinical and laboratory parameters. At the repeated control examination a month after the treatment in patients of the I group there was a development of dysbiosis and 6 women had candidiasis. The results of a bacterial smear in the II group are within the normal range.

Conclusion. In this way, complex treatment with the use of probiotics and estrogen preparations is pathogenetically founded and more effective for the treatment of bacterial vaginosis in premenopausal women.