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Lay-out:

S.E.M. Anema

Predicting Insulin Resistance As A Pledge Of Successful Recovery Of The Reproductive Potential In Patients With Abnormal Uterine Bleeding In Puberty



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Introduction

The number of people with obesity, including children, is steadily growing all over the world in the recent years. In this connection formation of abnormal uterine bleeding of pubertal period (AUB PP) against obesity and overweight is increasing as well. The authors have established that AUB PP is accompanied by some pronounced disorders in the lipid and carbohydrate metabolisms (dyslipoproteidemia, hyperinsulinemia, and insulin resistance). However, despite the varying views on the pathogenesis of AUB PP general practitioners do not always take into account the significance of hyperinsulinemia (HI) and insulin resistance (IR) in this pathology and do not correct the indicated health states.

Methods

Our study is aimed at singling out a set of clinicoanamnesic signs, characteristic of IR formation in patients with AUB, and make it possible to foresee the presence of HI and IR already at their first appeal for medical aid, with the subsequent adequate examination and treatment. The problem has been solved by determining the most informative clinical and anamnesic characters using conventional Wald test and Kullback information measure. To make a decision regarding the presence of IR and HI the most informative signs have been singled out from their totality, namely: early menarche (girls under 11), premature puberty, a waist/thighs circumference ratio (> 0.75), the first occurrence of the menstrual function disorders after two years of its formation, the concomitant somatic pathology (increased sizes of the uterus and ovaries according to the echosonography data and an enlarged intrauterine M-echo), as well as pathological course of pregnancy and childbirth in mothers of our patients.

Results

Thus, the authors have determined the most informative clinical and anamnesic characters concerning the forecast of IR. Prognostic tables which make it possible to calculate personal prognosis, enabling general practitioners to carry out individual correction of such states, have been developed.

Conclusion

Clinical application of the prescribed drugs in the combined treatment, aimed at removing metabolic disorders, will contribute to a decrease in the development of such states in the future, achievement of a long-term success in the treatment of patients of the kind, and the reproductive potential recovery.



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