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# Effectiveness of prevention of recurrences after surgical treatment of ovarian endometriosis

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Endometrioma is one of the main pathologies of endometriosis, though its pathogenesis still remains enigmatic. Exploring potential risk factors for endometrioma recurrence, thereby contributing to the individual management of the disease and improving the patients' prognosis.

Objective: to evaluate the effectiveness of dienogest in preventing recurrence of ovarian endometriosis after surgical treatment.

**Materials and methods:** The study included 104 patients aged 20 to 49 years with a confirmed diagnosis of ovarian endometrioma according to laparoscopy and morphological examination (ICD-10:N80.1) who underwent laparoscopic cystectomy with capsule enucleation. The participating women were stratified into 2 groups depending on the therapy: I (n=82) - taking dienogest daily 2 mg per day, for 24 weeks, according to the instructions for the drug; II (n=22) – patients who categorically refused any hormonal /non-hormonal drug therapy after surgery. Observation and evaluation of the results of treatment were carried out for 12 months.

Research design: prospective, observational, comparative study.

**Results:** The frequency of endometrioma recurrence based on TV ultrasound data in group I was 1.22% (1 out of 82, after 1 year), in group II - 22.7% (5 out of 22, after 1 year). In group I, against the background of dienogest therapy on all scales (NRS, VAS dyspareunia, dysmenorrhea and HTB), there was a statistically significant decrease in the average severity of the pain syndrome and its transformation from moderate to average by the third month of treatment (on average 2.5 times), and to mild or complete relief by the sixth (on average 5 times compared to the indicators before the appointment of therapy). In group II, there was a statistically significant intensification of the average pain syndrome index on all scales. The results obtained in group II patients did not show statistically significant changes in the concentrations of the studied markers (interleukin-17 (IL-17), IL-6, IL-10, tumor necrosis factora (TNF- $\alpha$ ) during the study, while in group I a statistically significant decrease in concentrations was revealed all the studied markers of inflammation and the CA-125 marker.

**Conclusion:** Due to the high effectiveness of prevention of relapses of endometriosis, significant therapeutic effect and acceptable safety profile, the possibility of using DNG as the main method of long-term prevention of relapse of endometrioma after surgical treatment should be considered.

#### **Recent Publication**

Mekan Orazov, Victor Radzinsky, Olga Sharapova, Igor Kostin & YuriiChitanava (2020) Oxytocinergic regulation in pathogenesis of pelvic pain caused by adenomyosis8,Gynecological Endocrinology, 36:sup1, 20-23

Orazov, Mekan R., V. E. Radzinskiy, Marina B. Khamoshina, Elena Varlamovna Kavteladze, Irina F. Pukhalskaya, V. B. Shustova and Yurii S Chitanava. "Treatment efficacy of infertility due to recurrent external genital endometriosis." Gynecology (2019): n. pag.

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