



UTERINE FIBROIDS. A WAY TO SPARE THE UTERUS

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Context. Management of uterine fibroids should be a complex of measures aimed at suppressing the hormonal stimulation of cellular proliferation and other mechanisms of survival of pathologically changed cells.

Objective: to reveal clinical effectiveness of combination therapy for uterine fibroids with ulipristal acetate, indole-3-carbinol and epigallocatechin-3-gallate as a pathogenetically justified approach to managing patients who wish to preserve their fertility.

Methods. 30 patients of reproductive age receiving ulipristal acetate (Esmya, 5 mg/day) as a background therapy of uterine fibroids were divided into 2 groups of 15. Group 1 received additional indole-3-carbinol (Indinole) and epigallocatechin-3-gallate (Epigallate) 2 capsules twice a day each for 6 months. The patients' mean age in group 1 was 31.75 ± 0.6 ; in group 2 it was 29.5 ± 0.4 . In both groups treatment started on day 2-3 of menstrual cycle.

Results. In 63.3% of patients localization of fibroids was intramural; in 36.7%-subserous. The number of fibroids varied from 1 to 4 in all women with a mean of 2.29. Ultrasound imaging with CDI showed that in group 1 the mean fibroid diameter was 2.65 ± 0.6 cm, in group 2 it was 2.32 ± 0.5 cm. After treatment the size of uterus reduced by 36.9% on average in group 1, and by 23.7% in group 2 ($p < 0.05$). The diameter of fibroids decreased by 31.8% in group 1, and by 21.4% in group 2 ($p < 0.05$). The range of reduction in size of the largest fibroid was 15.5 – 79.4% in group 1, and 10.4 – 57.4% in group 2. Thinning of uterine wall was noted in 90.0% and 76.7% of patients in groups 1 and 2, respectively ($p < 0.05$). This indicates a higher effectiveness of combination therapy of uterine fibroids. Post-treatment endometrium thickness was on average 15.3 mm in group 1, and 18.6 mm in group 2. In group 1 inclusion of Esmya and Indinole reduced the rate of occurrence of headaches, mastodynia and flushes by 50 – 70%.

Conclusion. Combination therapy of patients with Esmya, Indinole and Epigallate constitutes a target approach to uterine fibroids therapy as it blocks sex hormone receptors and produces a powerful antiproliferative effect. This increases clinical effectiveness of conservative treatment of uterine fibroids in women desiring to preserve their fertility.

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