12° CONGRESS of the EUROPEAN SOCIETY of Gynecology
BARCELONA 18/21 OCTOBER 2017

P18. FACTORS AFFECTING CARDIOVASCULAR MORTALITY RISK IN POSTMENOPAUSAL AGE WOMEN WITH STABLE ARTERIAL HYPERTENSION.

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CONTEXT: The postmenopausal period has a well-known impact on cardiovascular mortality risk. Stable arterial hypertension with no pressure drop is more common in postmenopausal women and contributes to increased mortality for cardiovascular reasons.
OBJECTIVE: The purpose of the study was to evaluate the relation of the circadian blood pressure profile and the profile of sex hormones, and carbohydrate metabolism in postmenopausal women with arterial hypertension.
METHODS: In thirty five postmenopausal women with arterial hypertension, 24-hour blood pressure monitoring was performed and the blood serum concentrations of estradiol, testosterone, dehydroepiandrosterone, sex hormone-binding protein, insulin and glucose levels were determined.
RESULTS: The main group of postmenopausal women with arterial hypertension with no pressure drop during the night consisted of 42 patients, and controlling group with arterial hypertension with pressure decrease during the night of 44 patients as well. The study groups did not differ in age, duration of menopause and hypertension, mean systolic and diastolic blood pressure, percentage of patients treated with cardiovascular drugs or rates of obesity. The studied groups did not differ statistically significantly in the levels of serum estradiol, testosterone, dehydroepiandrosterone sulfate and sex hormone-binding protein. In the studied groups, fasting glucose levels were similar, whereas insulin levels were significantly higher in the group of postmenopausal women with arterial hypertension with no pressure drop during the night.
CONCLUSION: In hypertensive women in the postmenopausal period, the circadian blood pressure profile of postmenopausal women with arterial hypertension with no pressure drop during the night is very common. In postmenopausal women with high blood pressure, the profile of arterial hypertension with no pressure drop is accompanied by hyperinsulinemia.

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