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Clinical and Biochemical Features of Patients with Uterine Myoma

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Resume. It is available not only for visual observation, but also for detection at early stages of development during mass preventive gynecological examinations of women. Mass surveys of women have a 50-year history. However, in the context of socio-economic changes in the country, along with the violation of the preventive focus of health care, screening programs aimed at the prevention and early diagnosis of cancer in general and cervical cancer in particular have been curtailed.

It follows from the above that the issues of prevention of RHYTHM and diagnosis of the initial stages of carcinogenesis still remain the most important medical and social problem.

Keywords: cervical cancer, malignant tumors, female genital organs, screening, female population.

Relevance. Cervical cancer (CC) is one of the most common malignant tumors in women. According to the WHO, about 500 thousand new cases of cancer of this localization are detected annually in the world, ranking first in the structure of morbidity and mortality among all malignant neoplasms of the female genital organs. In recent years, in economically developed countries, against the background of a general decrease in the incidence of cervical cancer, due to the introduction of screening programs into practice, a new phenomenon has been discovered in a number of countries - an increase in the incidence at a young age - up to 35 years. Despite the fact that in many countries of the world there is a downward trend in incidence, mortality rates from cervical cancer (CC) have not changed much over the past 20 years. This is due to the fact that the disease is very often (in 46 cases out of 100) detected already in the late stages. The average standardized incidence rate (10.8 cases per 100,000 women) and mortality (5.0 per 100,000 women) have stabilized in recent years, however, at a young age, the incidence increases by 2% annually.

It is available not only for visual observation, but also for detection at early stages of development during mass preventive gynecological examinations of women. Mass surveys of women have a 50-year history. However, in the context of socio-economic changes in the country, along with the violation of the preventive focus of health care, screening programs aimed at the prevention and early diagnosis of cancer in general and cervical cancer in particular have been curtailed.

The occurrence of cervical cancer can be prevented by identifying and treating precancerous diseases. Distinguish between primary and secondary prevention of cervical cancer. Primary prevention consists in the prevention of sexually transmitted diseases, abstinence from the early onset of sexual activity, the use of mechanical barriers for contraception, the full restoration of the integrity of the cervix in case of injury during abortion or childbirth, smoking cessation. Secondary prevention of the disease is to identify and eliminate precancerous changes through a systematic examination of women and their adequate treatment.

In the Republic of North Ossetia – Alania (RNO-A), the problem of cervical cancer has not been studied by anyone. The standardized incidence rate of CC is 13.04 higher than the average Russian rate of 10.8 per 100 thousand of the female population, and the neglect of CC is also higher than 12.9 and 11.7, respectively. In addition, there is the highest mortality in the Southern Federal District in North Ossetia-Alania 7.8 per 100 thousand female population.

The above facts convincingly testify to the relevance and need to improve the methods of screening cervical cancer in the conditions of North Ossetia-Alania, the search for new simple, affordable and at the same time effective methods for the prevention and early diagnosis of cervical cancer, in order to ensure timely treatment of this serious and dangerous disease.

The purpose of the study. Improving the efficiency of organizational, diagnostic and therapeutic measures aimed at early detection of background, precancerous diseases and cervical cancer.

Materials and research methods. We examined 55 patients who were under examination and inpatient treatment in the therapeutic departments of the ASMI clinic in pregnant women with multimorbid diseases.



Research results. For the first time, the effectiveness of the developed system for screening patients with cervical cancer, which combines the method of selecting patients from high-risk groups, the implementation of improved colposcopic and cytological methods of examination in an outpatient setting, has been substantiated.

For the first time, the diagnostic significance of the developed tool and the method of simultaneous sampling of material from various areas of localization of the pathological process on the cervix for morphological verification of the diagnosis is shown.

The developed method of forming groups of patients with a high probability of developing and detecting cervical cancer contributes to the improvement of early diagnosis, adequate treatment and prevention of cervical cancer in the outpatient service of the general medical network of North Ossetia-Alania.

Simplicity, accessibility and cost minimization in the implementation of the developed system of organizational forms of screening allows outpatient service specialists to increase the detection of background and precancerous diseases of the cervix by 1.4 times.

The development of a tool for taking material for cytological examination in patients with underlying diseases of the cervix made it possible to increase the detection rate of cervical cancer by 1.5 times.

The onco-epidemiological situation of cervical cancer in the Republic of North Ossetia-Alania during the study period is characterized by an increase in the incidence, an increase in the proportion of patients in the age group of the able-bodied female population, as well as patients in the II and III decades of life.

Positive trends in the detection of preinvasive and microinvasive cervical cancer in the ROD of the Republic of North Ossetia-Alania do not have a significant impact on the overall mortality statistics, the average life expectancy of patients and are accompanied by a negative dynamics of the five-year survival rate of patients with II-III stages of the disease.

The most significant risk factors for the development of cervical cancer in the female contingent of the Republic of North Ossetia-Alania are metabolic disorders, dysbiotic conditions of the vaginal microbiocenosis and sexually transmitted infections, as well as early onset of sexual activity, the underestimation of which has an adverse effect on the statistical indicators of oncological morbidity and mortality. The colposcopic method for diagnosing pathological processes of the cervix in the Republic of North Ossetia-Alania during a clinical study of patients at the stage of the outpatient-polyclinic link is not widely developed and is performed in 48.7% of cases. At the same time, insufficient qualification of specialists makes it possible to diagnose background processes and early stages of cervical cancer only in 0.9% of cases. The priority direction of the polyclinic service of the general medical network in North Ossetia-Alania is the developed system of organizational measures that determines the main stages of providing medical care to patients diagnosed with cervical cancer and belonging to high-risk groups of its development.

Conclusion. The incidence of cervical cancer in North Ossetia-Alania has increased 1.3 times over 15 years (from 10.87 in 1989 to 14.5 in 2003). The incidence rate among rural residents (14.54) is somewhat lower than the incidence of cervical cancer among urban residents (16.87). Mortality from cervical cancer during this period decreased by 1.2 times (12.3 and 14.9, respectively).

The formation of high-risk groups for cervical cancer with a high and medium degree of its probability is carried out on the basis of the subjective factors of probable detection established by us (pulling pains in the lower abdomen, mucopurulent discharge from the genital tract, spotting) and objective factors of probable detection (degree of anemia, flora of the vagina, changes in the mucous membrane of the cervix).

We have identified risk factors for developing cervical cancer: age over 50 years, overweight, tall height, living in the city, early onset of sexual activity, history of sexually transmitted diseases, history of cervical pathology, trauma of the cervix during childbirth, a large number of abortions.

The method of taking material for cytological examination during colposcopic examination, improved with the help of the tool developed by us, made it possible to increase the detection of cervical cancer by 1.5 times.

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