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TITLE

SURGICAL AND HORMONAL TREATMENT WITH GONADOTROPIN-RELEASING HORMONE AGONIST AND DIENOGEST OF INFERTILE WOMEN WITH ENDOMETRIOSIS

AUTHOR/S

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ABSTRACT

Endometriosis is a common gynecologic benign disease, affecting 6–10% of women of reproductive age [Imesch P, 2016].

The objective was a comparative evaluation of the effectiveness and compliance the combined treatment of infertility in women with endometriosis with progestogen (dienogest) and gonadotropin-releasing hormone agonist (aGnRH).

Material and methods. It was a prospective randomized study. Randomization was performed using the method of "envelopes". The study included 62 patients with histologically verified of endometriosis and infertility after surgical treatment (excision and coagulation). Criteria for exclusion were: age less than 18 and more than 45 years, male factor of infertility, chronic anovulation, blocked tubes, severe somatic diseases. 42 patients has been administered aGnRH (3.75 mg Diferelin IM every 28 days for 3 months). 20 women were appointed dienogest at a dose of 2 mg per day for 6 months.

The results of the study showed that the combined treatment of infertility in patients with endometriosis with surgical method (coagulation and excision), followed by the appointment of aGnRH or dienogest is effective in 1/3 patients in both groups. The efficacy of treatment was not dependent on the variant of hormonal therapy. However, patients treated aGnRH more likely had a miscarriage – 11.9% vs 5% correspondingly. The effectiveness of aGnRH and dienogest on endometriosis pain relief was high in both groups, but the frequency and severity of adverse events were more significant in patients of aGnRH group (90.5%).

Conclusion. The effectiveness of ?GnRH and dienogest in infertile patients with endometriosis in the treatment of infertility and pain relief were similar. The frequency of side effects and miscarriages was higher in aGnRH group.

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