

17th World Congress of the Academy of Human Reproduction

*15–18 March 2017
Rome, Italy*

TITLE

MANAGEMENT OF PATIENTS WITH OVARIAN NEOPLASIAS IN THE POSTOPERATIVE PERIOD

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ABSTRACT

Context The management of patients after ovaries tumors surgery is the major condition for healing and absence of relapses.

Objective is to optimize preventive treatment of women who had surgery for benign ovarian tumors.

Methods & patients There were 72 patients 28-37 years old after surgery for benign ovarian neoplasia. 52 patients - main group received oral combined contraceptives 20 mcg ethinylestradiol and 150 mcg desogestrel contraceptive mode (21 active pills and 7 days off), and epigallocatechin-3-gallate (of EGCG) 90 mg indole-3-carbinol 400 mg (of I3C) in daily for 6-12 months. 20 control group patients refused admission hormonal drugs and took 3 months only 90 mg EGCG with 400 mg of I3C.

Results. All patients of the main group had a normalization of the menstrual cycle. There were no any recurrent ovarian tumors after 12 months of observation. Also, there was a reduction of clinical signs of mastopathia - the reduction of cysts, breast pain. We also saw normalising of dopplerografic ultrasound results for pelvic and breast vascularization. In the control group in patients receiving 90 mg of EGCG with 400 mg I3C for 3 months also showed a decrease in clinical signs of mastopathia, the relative normalization of cycle. After discontinuation of the drug complaints resumed, 1 of 20 (5%) women (control group) after one year after surgical treatment had tumor relapse in the second ovary.

Conclusion. The combination of low-dose oral contraceptives 20mcg ethinylestradiol and 150 mcg desogestrel with EGCG 90 mg to 400 mg of I3C can be considered one of the optimal methods of prevention relapse of ovarian neoplasia, and therapy dishormonal states. The preventive treatment must be obligatorily carried out in the postoperative period.

INSTITUTE

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