МІНІСТЕРСТВО ОСВІТИ ТА НАУКИ УКРАЇНИ СУМСЬКИЙ ДЕРЖАВНИЙ УНІВЕРСИТЕТ МЕДИЧНИЙ ІНСТИТУТ



АКТУАЛЬНІ ПИТАННЯ ТЕОРЕТИЧНОЇ ТА КЛІНІЧНОЇ МЕДИЦИНИ

Topical Issues of Theoretical and Clinical Medicine

ЗБІРНИК ТЕЗ ДОПОВІДЕЙ

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DIFFERENCE IN FREQUENCY OBSTETRIC FISTULA IN NIGERIAN AND EUROPEAN WOMEN

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An obstetric fistula is an abnormal opening between the vagina and organs of pelvis. Each year, more than a quarter million women in Nigeria die in pregnancy and childbirth, of those that do not perish, suffer from obstetric fistula (OF). OF caused by of obstructed labor, without timely medical intervention or Cesarean section. During this time, the soft tissues of the pelvis are compressed between the baby's head and the mother's pelvic bones. The lack of blood flow causes tissue to die, creating a hole between the mother's vagina and organs of pelvis .

Aim: to establish the disparity to development of OFin African countries with respect to their European counterparts.

Aterials and methods: we did an epidemiological research in the Nigerian communities for the last 18 months (FMN, UNPF). Women between the ages of 15-40yrs were taken into account, in various communities sited in Nigeria and United nations population, from the time of pregnancy till postnatal period.

Results: In Nigeria 1.5million women yearly going into childbirth resulting in 2,000,000 accounted births yearly.10% of childbirth results in OF, 15.6 % cases treated immediatiatly,32% much later and wide majority not treated. According WHO is estimated that two million women suffer from OF globally. The cases of OF in Europe has drastically reduced since the beginning of 21 century, with a thin population of estimate of 2 in every 1000 births.

Conclusion: Nigeria accounts for over 45% of world OF cases having a very high risk of prevalence, relating to poverty, early marriage, illiteracy, lack of quality maternal care, abortions, distance from health facility. European cases has become almost extinct due to improved health facility and high standard of living.

VULVOVAGINAL ATROPHY DURING MENOPAUSE

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Objective: To present a basic clinical research based on current evidence about advanced treatment methods for vulvovaginal atrophy during menopause. And on principles of management of patients with vulvovaginal atrophy. Vulvovaginal atrophy (VVA) is a common and underreported condition associated with decreased estrogenization of the vaginal tissue. Symptoms include dryness, irritation, soreness, and dyspareunia with urinary frequency, urgency, and urge incontinence. It can occur at any time in a woman's life cycle, although more commonly in the postmenopausal phase, during which the prevalence is close to 50%. Clinical findings include the presence of pale and dry vulvovaginal mucosa with petechiae. Vaginal rugae disappear, and the cervix may become flush with the vaginal wall

Materials and Methods: Ukrainian and foreign sources onprevalence, cytological method, pap smear, colposcopy method (before and after treatment), current management andtreatment of vulvovaginal atrophy were reviewed. We observed three groups of women, few premenopausal women with VVA, postmenopausal women and a control group. New treatment methods were identified and used on patients of different age groups,. For the treatment we used; hormonal therapy, laser therapy.

Results: The present clinical guidelines give currentdata and information on aetiology, pathogenesis, clinical presentation, diagnosis, differential diagnosis and treatments of vulvovaginal atrophy in menopausal women. These treatment methods can be used for women who are diagnosed VVA. And after treatment the patients showed positive response.