ISSN: 2776-0960 Volume 3, Issue 11 Nov., 2022

ResearchJet Journal of Analysis and Inventions
https://reserchjet.academiascience.org

ABOUT THE CAUSES OF ENDOMETRIAL HYPERPLASIA AND FORMS OF ENDOMETRIAL HYPERPLASIA

Sarkisova Victoria Vladimirovna
Assistant, Samarkand State Medical University

Abstract

Endometrial hyperplasia is a gynecological disease characterized by the growth of the endometrium - the inner layer of the uterus, as a result of which its thickness and volume increase. According to statistics, a similar disease is diagnosed in 10-20 percent of patients. The disease develops in young women of childbearing age. With the onset of menopause, the risk of developing the disease increases several times.

Keywords: Forms of endometrial hyperplasia, Causes of endometrial hyperplasia, Risk group, Symptoms, Complications of endometrial hyperplasia, Diagnosis, Treatment.

Usually, the functional layer of the endometrium increases in the first half of the cycle: the uterus is preparing for a possible pregnancy. If fertilization does not occur, then the functional layer is rejected and removed from the body during menstruation. These cyclic changes are regulated by the correct ratio of female sex hormones.

All processes depend on the correct ratio of female sex hormones. At the slightest hormonal deficiency, the maturation and rejection of the endometrium is disturbed, the cells are actively divided, but not removed in time, the inner layer of the uterus thickens, and excessive growth can occur both in separate places and uniformly. After a certain time, the endometrium is still rejected and bleeds profusely. If there is no treatment, the process is constantly repeated. Various complications can occur with endometrial hyperplasia, one of which is the malignancy of the process that turns into cancer.

Forms of endometrial hyperplasia

Depending on the proliferation of endometrial elements, several types of the disease are distinguished:

Certificate of the Russian Federation for registration of the program for selection of the correct algorithm for identification and treatment of patients with endometrial hyperplasia. Fig. 2. Certificate of the Russian Federation for

ResearchJet Journal of Analysis and Inventions
https://reserchjet.academiascience.org

registration of the program for the selection of the correct algorithm for the identification and treatment of patients with endometrial hyperplasia.

glandular form - there is an increase in glandular tissue that is not prone to malignancy, the probability of developing cancer is only 2-6%.

glandular-cystic - the growth of glandular tissue and the formation of cysts, which is a benign formation that can turn into cancer in some cases.

atypical - this type of hyperplasia is called precancerous, it is the most severe form, pathological changes are observed both in the functional layer and in the basal layer. Without treatment, the probability of developing cancer reaches 40%.

focal - the cells of the inner layer grow unevenly, forming separate foci with a diameter of 2-3 mm to several centimeters, the cells in these areas are more sensitive to the effects of hormones and help to divide more actively will give. If cell growth occurs in a polyp, then its size increases significantly.

Causes of endometrial hyperplasia

Various negative factors can cause the development of the disease.

Hormonal disorders, as a rule, are present in patients with gynecological diseases: myoma, polycystic disease, mastopathy, endometriosis. Also, uncontrolled intake of oral contraceptives affects the hormonal background.

Diseases of endocrine glands: thyroid gland, pancreas, adrenal glands, which have a negative effect on the endometrium or the functioning of the ovaries.

Abortions, diagnostic curettage, as a result of which endometrial receptors lose their sensitivity to the effects of hormones, despite the fact that hormones are normal, cells continue to multiply.

Hereditary predisposition, when the disease is diagnosed in close relatives.

Risk group

The presence of an unfavorable factor in the anamnesis does not necessarily mean that the disease will develop. The likelihood of developing endometrial hyperplasia is sometimes influenced by a combination of factors.

The risk group includes overweight women with diabetes mellitus, hypertension, polycystic ovary syndrome, etc. Frequent stress and a sedentary lifestyle increase the likelihood of developing the disease. In addition, it should be noted that the disease is often diagnosed several times in patients during menopause.

Symptoms

The main symptom of endometrial hyperplasia is bleeding. They are cyclic and acyclic, in the first case they are more likely to disturb women of reproductive age. Unlike menstruation, they are longer in time and can last about three weeks.

ResearchJet Journal of Analysis and Inventions
https://reserchjet.academiascience.org

With acyclic bleeding, the flow appears during the intermenstrual period or after a slight delay, then they are moderate. Both light and heavy bleeding can occur in menopausal patients. Strong, with clots, bleeding during the formation of the cycle is characteristic of hyperplasia in adolescence.

Often, the disease is asymptomatic, there are no manifestations, and the woman goes to the doctor about infertility. Therefore, even if nothing bothers you, regular visits to the gynecologist are recommended. Then the disease can be detected at an early stage, in which case the treatment will be more effective and not as long as in advanced cases.

Complications of endometrial hyperplasia

If left untreated, prolonged bleeding can lead to anemia. In addition, excess estrogen, cycle disorders and anovulation often lead to infertility. With an atypical form of hyperplasia, there is a risk of transition to a malignant disease.

Diagnostics

There are several ways to determine endometrial hyperplasia:

Ultrasound (transvaginal) is one of the effective and painless methods of diagnosis, which allows to identify thickening of the endometrium, foci of hyperplasia and polyps.

Hysteroscopy - examination of the uterine cavity with the help of special optical equipment, which allows a detailed examination of the endometrium, identification of changed areas. During the procedure, a separate diagnostic curettage or targeted biopsy can be performed, followed by histological examination of the obtained material.

Endometrial aspiration biopsy is one of the most effective diagnostic methods, and the material obtained during the procedure is sent for examination. Atypical cells can be identified with the help of histology, a malignant process can be confirmed or excluded.

Hormonal studies - prescribed to identify hormonal disorders. Estrogen and progesterone levels are checked, thyroid hormones and adrenal glands can be studied.

In order to determine the correct tactics of surgical treatment, please send me to my personal e-mail address puchkovkv@mail.ru a complete description of the pelvic ultrasound, if possible, hysteroscopy and histology data, age and main complaints should be sent. . Then I can answer your situation more clearly.

ResearchJet Journal of Analysis and Inventions
https://reserchjet.academiascience.org

Treatment

Treatment tactics for endometrial hyperplasia are determined individually and depend on the age of the woman, the severity of the disease and the type of the disease. In some forms of hyperplasia, after receiving the results of a histological analysis, drug treatment is possible, the purpose of which is to suppress the further growth of the endometrium and restore the hormonal balance.

When conservative methods are ineffective, as well as when the disease recurs, surgical treatment is indicated. Today, thanks to the use of modern technology, it is possible to get rid of the disease without removing the uterus. One of the well-established methods is hysteroscopy, which is indicated for reproductive and premenopausal patients. Also, this method is used in cases of large blood loss, emergencies or the presence of polyps. The advantages of this method include low impact, short procedure and short recovery period. In the presence of cysts and polyps, a combination of surgical treatment and drug therapy is used.

Endometrial ablation is also a very effective method - a minimally invasive procedure, during which it is possible to completely remove the endometrium (both basal and functional layers), as well as a part of the main myometrium. Electrosurgery and laser ablation methods are used, but they are all performed under the control of a hysteroscope, which allows you to visually control all the actions of the doctor.

If an atypical form of hyperplasia is detected during menopause, it is recommended to remove the uterus. If there are no pathological changes in the ovaries, only the uterus is removed, with adenomyosis or when malignant cells are detected, hysterectomy with appendages is indicated.

Prevention of endometrial hyperplasia

In order to minimize the risk of developing the disease, it is necessary to timely treat diseases of the genital area of an inflammatory and infectious nature. In addition, concomitant diseases should be given great importance: with diabetes - constant control of glucose levels, with hypertension - timely lowering of blood pressure, overweight women should normalize their weight. It is also necessary to abandon abortion and uncontrolled intake of oral contraceptives. It should be remembered that often the disease continues without any symptoms in the initial stage. Therefore, regular visits to the gynecologist twice a year will help to detect any disease in time.

ResearchJet Journal of Analysis and Inventions
https://reserchjet.academiascience.org

References:

1.Tohirova J., Shernazarov F. ATHEROSCLEROSIS: CAUSES, SYMPTOMS, DIAGNOSIS, TREATMENT AND PREVENTION //Science and innovation. – 2022. – Т. 1. – №. D5. – С. 7-12.

Farhod o'g'li S. F. GASTRIT—SABABLARI, ALOMATLARI, TASHXISLASH, DAVOLASH, DORILAR, ASORATLARI, OLDINI OLISH //Лучший инноватор в области науки. – 2022. – Т. 1. – №. 1. – С. 103-107.

Tohirova J., Shernazarov F. ATHEROSCLEROSIS: CAUSES, SYMPTOMS, DIAGNOSIS, TREATMENT AND PREVENTION //Science and innovation. – 2022. – Т. 1. – №. D5. – С. 7-12.

F. Shernazarov ATHEROSCLEROSIS: CAUSES, SYMPTOMS, DIAGNOSIS, TREATMENT AND PREVENTION // SAI. 2022. №D5. URL: https://cyberleninka.ru/article/n/atherosclerosis-causes-symptoms-diagnosis-treatment-and-prevention (дата обращения: 20.10.2022).

F. Shernazarov, J. Tohirova, D. Jalalova TYPES OF HEMORRHAGIC DISEASES, CHANGES IN NEWBOENS, THEIR EARLY DIAGNOSIS // SAI. 2022. №D5. URL: https://cyberleninka.ru/article/n/types-of-hemorrhagic-diseases-changes-in-newboens-their-early-diagnosis (дата обращения: 20.10.2022).

Qizi T. J. I., Farrukh S. TREATMENT OF MYOCARDIAL INFARCTION AND FIRST AID //Science and innovation. – 2022. – Т. 1. – №. D3. – С. 317-320.

Shernazarov F., Azimov A. INCREASED BRAIN PRESSURE-CAUSES, SYMPTOMS, COMPLICATIONS, TREATMENT //Современная медицина: новые подходы и актуальные исследования. – 2021. – С. 73-77.

qizi Tohirova J. I., og'li Ibragimov B. I., og'li Shernazarov F. F. CONGENITAL HEART DISEASE-CAUSES, CLASSIFICATION, DIAGNOSIS, TREATMENT, COMPLICATIONS, CONSEQUENCES //Eurasian Journal of Medical and Natural Sciences. – 2022. – Т. 2. – №. 3. – С. 84-89.

Mratbaevna W. N., Farrux S. The Structure of the Heart and its Physiology in Regular Athletes //Eurasian Scientific Herald. – 2022. – Т. 8. – С. 102-105.

Farhod o'g'li S. F. GASTRIT—SABABLARI, ALOMATLARI, TASHXISLASH, DAVOLASH, DORILAR, ASORATLARI, OLDINI OLISH //Лучший инноватор в области науки. – 2022. – Т. 1. – №. 1. – С. 103-107.

Фаррух Ш. и др. ПУТИ УСТРАНЕНИЯ САХАРНОГО ДИАБЕТА //Science and innovation. – 2022. – Т. 1. – №. D3. – С. 313-316.

15.ПУТИ УСТРАНЕНИЯ САХАРНОГО ДИАБЕТА. Тоҳирова Жайрона Иззатилло Қизи, Шерназаров Фаррух «Science and innovation» 2022 yil 3-sonida 313-316 bet
https://doi.org/10.5281/zenodo.6803520

16. Shernazarov Farrukh. (2022). TREATMENT OF MYOCARDIAL INFARCTION AND FIRST AID. "science and Innovation" International Scientific Journal. ISSN: 2181-3337, 1(3), 317–320. https://doi.org/10.5281/zenodo.6803550

17. Shernazarov Farrux. Eurasian Scientific Herald
P E N A C C E S S , P E E R R E V I E W E D J O U R N A L
HTTPS://GENIUSJOURNALS.ORG/INDEX.PHP/ESH
V O L U M E 8 | M A Y 2 0 2 2
I S S N (E) : 2 7 9 5 - 7 3 6 5
The Structure of the Heart and its Physiology in Regular Athletes
102-105 https://geniusjournals.org/index.php/esh/article/view/1427

18. Shernazarov Farrukh Farkhod og‘li. (2022). CONGENITAL HEART DISEASE - CAUSES, CLASSIFICATION, DIAGNOSIS, TREATMENT, COMPLICATIONS, CONSEQUENCES. EURASIAN JOURNAL OF MEDICAL AND NATURAL SCIENCES, 2(3), 84–89. https://doi.org/10.5281/zenodo.6408056

19. Shernazarov Farrux Farhod o'g'li. (2022). GASTRIT — SABABLARI, ALOMATLARI, TASHXISLASH, DAVOLASH, DORILAR, ASORATLARI, OLDINI OLISH. The Best Innovator in Science, 1(1), 103–107. https://doi.org/10.5281/zenodo.6023027

20. ПУТИ УСТРАНЕНИЯ САХАРНОГО ДИАБЕТА. Тоҳирова Жайрона Иззатилло Қизи, Шерназаров Фаррух «Science and innovation»
https://cyberleninka.ru/article/n/puti-ustraneniya-saharnogo-diabeta

ResearchJet Journal of Analysis and Inventions
https://reserchjet.academiascience.org

21. Shernazarov Farrukh. (2022). TREATMENT OF MYOCARDIAL INFARCTION AND FIRST AID. "science and Innovation" International Scientific Journal. ISSN: 2181-3337, 1(3), 317–320. https://cyberleninka.ru/article/n/treatment-of-myocardial-infarction-and-first-aid

22. F. Shernazarov, J. Tohirova, D. Jalalova TYPES OF HEMORRHAGIC DISEASES, CHANGES IN NEWBOENS, THEIR EARLY DIAGNOSIS // SAI. 2022. №D5. URL: https://cyberleninka.ru/article/n/types-of-hemorrhagic-diseases-changes-in-newboens-their-early-diagnosis (дата обращения: 29.10.2022).

23. qizi Tohirova J. I., og‘li Ibragimov B. I., og‘li Shernazarov F. F. CONGENITAL HEART DISEASE-CAUSES, CLASSIFICATION, DIAGNOSIS, TREATMENT, COMPLICATIONS, CONSEQUENCES //Eurasian Journal of Medical and Natural Sciences. – 2022. – Т. 2. – №. 3. – С. 84-89.

24. qizi Tohirova J. I., og‘li Ibragimov B. I., og‘li Shernazarov F. F. CONGENITAL HEART DISEASE-CAUSES, CLASSIFICATION, DIAGNOSIS, TREATMENT, COMPLICATIONS, CONSEQUENCES //Eurasian Journal of Medical and Natural Sciences. – 2022. – Т. 2. – №. 3. – С. 84-89.

25. Тураев Б.Т., Хаятов Р.Б. Различия в поведенческих нарушениях и злоупотребления спиртными напитками в катамнестическом исследовании лиц с расстройствами зрелой личности // Антология российской психотерапии и психологии, 2019. С. 171-171.

26. Тураев Б.Т., Хаятов Р.Б. Суицидальные намерения у лиц с синдромом алкогольной зависимости при наличии депрессивных расстройств // Вестник врача, 2019. № 2. С. 114-116