



ABNORMAL UTERINE BLEEDING: A STUDY OF HYSTERECTOMY SPECIMENS

Pathology

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ABSTRACT

Background: Hysterectomy, which means removal of uterus, is the second most common major surgical procedure performed all over the world next to caesarean section. Hysterectomy is curative in various conditions like leiomyoma, adenomyosis, uterine polyp, uterine prolapse and malignancy. Majority of these disorders present with abnormal uterine bleeding and pain.

Objective: To study uterine pathology in hysterectomy specimens from cases of abnormal uterine bleeding and their age wise distribution.

Methods: During this study from January 1st, 2019 to December 31st, 2019, 243 hysterectomy specimens were included from patients with history of abnormal uterine bleeding. Histopathological diagnoses, given at Department of Pathology, B. J Medical College, Ahmedabad, were correlated with age.

Results: 38% patients had leiomyoma, 21% had adenomyosis, 11.5% had leiomyoma with adenomyosis and 24.3% had dysfunctional uterine bleeding (DUB) in which no underlying pathology was found.

Conclusion: Leiomyoma is the most common cause of hysterectomy in patients who present with abnormal uterine bleeding.

KEYWORDS

Adenomyosis, Leiomyoma, Placenta Increta

INTRODUCTION

Abnormal uterine bleeding (AUB) can be defined as bleeding that deviates from the normal cyclical bleeding in either volume/ duration/ frequency with or without associated dysmenorrhea.¹ It can be caused by various well defined pathologic conditions such as chronic endometritis, submucosal leiomyomas, endometrial polyps or endometrial neoplasms, although the most common cause turns out to be dysfunctional uterine bleeding (DUB) which lacks any organic or structural abnormality.²

Among the various modalities for management of AUB, medical management is the preferred initial treatment. Surgical management is based on various patient factors plus desire for future fertility. Hysterectomy is the definitive treatment for controlling heavy bleeding mainly for patients who do not respond to medical therapy.³

AIMS AND OBJECTIVES

To study uterine pathology in hysterectomy specimens from cases of abnormal uterine bleeding and their age wise distribution.

MATERIALS AND METHODS

The present study was carried out on 243 patients admitted in the Department of Obstetrics & Gynaecology in between January 1st, 2019 and December 31st, 2019 with complaints of abnormal uterine bleeding who underwent hysterectomy for its management. Patients who underwent hysterectomy for any other indication like uterine prolapse or obstetric hysterectomy due to post partum hemorrhage were excluded from the study. Suspected cases of malignancy on radiological examination were referred to the specialized cancer center present on campus.

The hysterectomy specimens were received at the histopathology section of Department of Pathology. After 24 hours of tissue fixation in 10% neutral buffered formalin, routine tissue processing was done. Examination of Hematoxylin & Eosin stained slides was done and diagnosis was established.

RESULTS AND OBSERVATIONS

We evaluated specimens obtained from 243 patients from January 1st, 2019 and December 31st, 2019.

- Out of the 243 patients, 96 (39.5%) patients were in 31-40 year age group, 131 (54%) patients were in 41-50 year age group and only

10 (4%) patients were in 51-60 year age group.

- Underlying structural abnormality like leiomyoma, adenomyosis, polyp was found in 181 (74.5%) of the cases, Dysfunctional Uterine Bleeding was found in 59 (24.3%) of cases in which no organic lesion was found. 3 (1.2%) cases were found to have placenta increta.
- Leiomyoma was the underlying pathological abnormality in 38% cases, making it the most common underlying pathology.

Table 1: Distribution of cases of abnormal uterine bleeding with underlying pathology according to the age group.

CAUSES	21-30 years	31-40 years	41-50 years	51-60 years	TOTAL (n = 243)
Leiomyoma	1	34	53	5	93 (38.3%)
Leiomyoma with adenomyosis	-	7	19	2	28 (11.5%)
Adenomyosis	-	22	28	2	52 (21.4%)
Polyp	-	4	3	1	8 (3.3%)
DUB*	3	28	28	-	59 (24.3%)
Placenta Increta	2	1	-	-	3 (1.2%)
Total	6 (2.5%)	96 (39.5%)	131 (54%)	10 (4%)	243

*Dysfunctional Uterine Bleeding

DISCUSSION

In the present study most of the patients with menorrhagia were in the age group of 41 – 50 year, 131 (54%), which correlates well with similar studies conducted by Soleymani⁴ E et al, and Nilima⁵ et al. in which it was 61% and 41% respectively.

The most common histopathological finding was leiomyoma which was found in 38 % of cases followed by adenomyosis (21.4%) and leiomyoma with adenomyosis (11.5%). Yogesh Neena⁶ and Bhaskar Honey had similar results with leiomyoma (24.65%) being the most common histopathological finding followed by adenomyosis (12.15%) in their study.

In a similar study from Kerela, Leiomyoma was found in 54% cases who underwent hysterectomy for abnormal uterine bleeding.⁷

Yogesh Neena⁶ et al had 36.11% cases in which no significant pathology was diagnosed and these cases were labelled as DUB. The

incidence of DUB in their study is greater than the present study in which 24.3% patients had no underlying structural abnormality.

In the age group of 21-30 years total 6 hysterectomies were done out of which 2 (33.3%) were due to emergency obstetrical cause like placenta increta in this case. This incidence is slightly lower than a study conducted in Faridkot⁸ in which 61% cases were due to emergency obstetrical causes in patients of age 30 years.

CONCLUSION

Leiomyoma is one of the most common causes for which women in their reproductive age group undergo hysterectomy.

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