ORIGINAL RESEARCH PAPER

Gynecology

TO STUDY THE CLINICOPATHOLOGICAL CORRELATION OF ABNORMAL UTERINE BLEEDING IN PERIMENOPAUSAL WOMEN

KEY WORDS:

Perimenopausal women, Abnormal Uterine Bledding, clinicopathological correlation

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STRACT.

BACKGROUND: Abnormal uterine bleeding (AUB) is a common problem affecting peri menopausal women and may also have a significant impact on their physical, social, and emotional aspects directly affecting their quality of life. The objective of this study was to evaluate various etiopathological factors responsible for Abnormal Uterine Bleeding in Perimenopausal women. METHODS: The present study was observational study, carried out at AMC MET MEDICAL COLLEGE, L.G. HOSPITAL, AHMEDABAD, in Obstetrics and Gynecology Department During period of June 2020 to January 2021. Around 380 Perimenopausal women of age group 40-55 years with complains of Abnormal Uterine Bleeding this study. The age, parity, menstrual complains were noted and diagnosed clinically along with ultrasonography and histopathological repots were analyzed. RESULTS: Among total 380 women in the study 57.8% were between 40-45 years of age and 74.21% were multipara. Menorrhagia (47%) was the most common presenting symptom. Leiomyoma was the commonest cause (45.5%). Proliferative endometrium was the most common histopathological finding present in 43% of cases. CONCLUSION: Abnormal uterine bleeding predominantly affects women of perimenopausal age group. Although benign lesions are commonest cause of AUB in this age but thorough evaluation is required as it could be the only clinical manifestation of endometrial carcinoma.

INTRODUCTION:

Abnormal Uterine Bleeding (AUB) is a frequently encountered gynecologic complaint in peri menopausal women. Perimenopause is defined as the period of life beginning with menopausal transition and ending 12 months after the last menstrual period and may last for many years (2 to 8 years) [1]. Abnormal Uterine Bleeding may be defined as any variation from the normal menstrual cycle, including alteration in its regularity, frequency of menses, duration of flow, and amount of blood loss[2]. It occurs in various forms such as menorrhagia, polymenorrhea, polymenorrhagia, metrorrhagia, and menometrorrhagia[3].AUB may be an expression of hormonal milieu, or it could be the clinical presentation of benign or malignant lesions of the female genital tract in a perimenopausal woman. AUB is responsible for about two third of all hysterectomies in the world [4]. Although malignancy An international expert consensus from the International Federation of Gynecology and Obstetrics (FIGO) Menstrual Disorders working group has proposed a standardized classification system for AUB to facilitate greater appreciation of the complexities of this clinical entity. PALM-COEIN classification includes nine main categories: polyp; adenomyosis; leiomyoma; malignancy and hyperplasia; coagulopathy; ovulatory dysfunction; endometrial; iatrogenic; and not yet classified. PALM aspect of the classification refers to structural causes that may be evaluated by imaging techniques and/or histopathology; $however, COEIN\,group\,represents\,functional\,aspect\, \hbox{\tt [5]}.$

METHODOLOGY:

The present study was conducted in the department of Obstetrics and Gynecology in a tertiary care hospital. The study included 380 female of age group 40-55 years with the complaints of AUB. Written informed consent was taken from the participants. Patients were examined thoroughly by taking brief history. Gynecological examination along with ultrasonography of patients were done. Tissue specimen of endometrium was collected by Dilation and Curettage.

INCLUSION CRITERIAS:

Patient willing to participate in the study. Age group of 40-55 years. cases of abnormal uterine bleeding With complains of menorrhagia, Polymenorrahgia, mertrorahhgia.

EXCLUSION CRITERIAS:

Patients not willing to participate. Pregnant women. Vaginal bleeding caused by vaginitis. Products of conception in histopathological examination. Patient receiving cyclical hormonal therapy.

RESULT:

The diagnosis was made based on history given by patients, clinical findings, ultrasonography and histopathological reports.

Total 380perimenopausal women with AUB attended the hospital over a time period of 6months. about 57.8% of the women were between 40-45 years of age. (Table1)

Table 1: Age distribution of perimenopausal women in the study

Age (in years)	No. Of Patients	Percentage (%)
40-45	220	57.8
45 -50	100	26.4
50 -55	60	15.7

Most of the cases of AUB were multiparous (74.21%) followed by grand multiparous (13.15%), primiparous (9.21%) and nulliparous (3.42%). (Table2)

Table 2: Distribution of women in the study according to parity

Parity	No. Of Patients	Percentage (%)
Nullipara	13	3.42
Primipara	35	9.21
Multipara	282	74.21
Grand multipara	50	13.15

Perimenopausal women with Abnormal Uterine Bleeding

most common menstrual presentation was menorrhagia (47%) followed by polymenorrhagia (27%), metrorrhagia (11%),(5.7%), polymenorrhoea (7.84%).(Table3)

Table 3: Clinical presentation of perimenopausal women in the study.

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Clinical presentation	No. of Patients	Percentage (%)
Menorrhagia	180	47
Metrorrhagia	44	11
Polymenorrhea	104	27
Menometrorrhagia	22	5.7
Polymenorrhea	30	7.8

Among the histological finding of endometrial tissue in cases of AUB in perimenopausal female proliferative endometrium was found in 43.1%, endometrial hyperplasia in 22%, secretory endometrium in 12%, atrophic 7.5%, Adenocarcinoma 1.31%, chronic inflammation 7.1%cases. (Table 4)

Table 4: Histological pattern of endometrium in perimenopausal women with AUB

Histological finding	No. of Patients	Percentage (%)
Proliferative	164	43.1
Secretory	46	12.1
Adenocarcinoma	5	1.31
Chronic inflammation	27	7.1
Atrophic	30	7.5
Simple Hyperplasia	82	22
Complex Hyperplasia	18	4.73
Atypical Hyperplasia	8	2.1

Out of the various causes of abnormal uterine bleeding, women in perimenopause most commonly were clinically diagnosed to have leiomyoma (45.52%) followed by AUB (ovulatory) (22.63%), adenomyosis (17.36%), polyp (9.2%) and endometrial carcinoma (1.3%). (Table 5)

Table 4: Different causes of AUB in perimenopausal women.

Diagnosis	No of Patients	Percentage (%)
Liomyoma	173	45.52
AUB(Ovulatory)	86	22.64
Polyp	35	9.21
Endometrial carcinoma	4	1.31
Adenomyosis	66	17.36
Infection	15	4.1

DISCUSSION:

Earlier the cause of abnormal uterine bleeding was thought to be chronic inflammation, but now it has been clear that abnormal uterine bleeding is due to various causes ranging from functional to malignancy [6].

In this study most of patients the (57.8%) were in the age group of 40-45 years which was similar to the study done by S. Sudhamani et al in which also 65% of the patients belonged to same age group [8]. In the study conducted by Talukdar B et alalso 67.97% of the women were from 40 to 45 years of age [7].

74.2% were multipara and only 3.42% of the patients were nullipara which is similar to the study conducted by Sreelakshmi U *et al* in which 80.6% were multipara and 3.7% only was nullipara [9].

Most of the perimenopausal women with Abnormal Uterine bleeding presented with complaint of menorrhagia 47% of case which was similar to the study done by Talukdar B et al (43.6%) and Lotha L et al (49%) [7,10]

On histological examinations endometrium most commonly presented as proliferative phase as seen in 43% cases which

was similar to the study done by Sudhamani S et al in which majority (48.7%) were having proliferative endometrium [8].

Uterine leiomyoma was the most common cause of AUB in perimenopausal women present in (45.52%) cases followed by AUB (22.63%). This was same as the study of Lotha L et al in which fibroid preceded the list and was present in 52.7% cases. Carcinoma endometrium was present in 1.31% of cases similar to the study of Talukdar B (1%) and G. J. Vani Padmaja et al in which malignancy was seen in 1% cases [11].

CONCLUSION:

Abnormal Uterine Bleeding is one of the most common cause for women to seek medical help in perimenopausal age group. This study shows most of perimenopausal women belong to age group of 40-45. Most common presentations of Abnormal Uterine Bleeding is menorrhagia. It is mostly associated with Abnormal endometrial histopathological findings in this study. Histopathological study of endometrium will help us to plan for further management. Although the benign lesions of endometrium and myometrium are the most common causes for abnormal uterine bleeding in perimenopausal women, the possibility of endometrial hyperplasia and cancers of uterus must be considered. A comprehensive clinicopathological study will usually help in arriving at the correct diagnosis.

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