

ENDOMETRIAL BLEEDING

P260

THE EFFECT OF ENDOMETRIUM IN POSTMENOPAUSAL WOMEN RECEIVING HORMONE REPLACEMENT THERAPY ALTERNATIVE TO ORAL THERAPY.

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The use of natural estrogens and progestogens is a valid alternative to oral therapy in postmenopausal women because of its non negative effect on lipidic, glicidic and hemocoagulative metabolism. Micronized progestogen available in vaginal suppositories and vaginal creme has very high absorption rate through vaginal epithelium, maintaining a clinical and pharmacological level of progestogens which does not changes the physiopathologic state of vaginal mucosae membrane alterations. Postmenopausal patients submitted to the treatment with: 1) 50 mcg/die of 17 β E2 transdermal for 21 days plus micronized progestogens in creme with the dose of 100 mg/day (12 days/month) - (n. 15 cases) - 2) 50 mcg/die of 17 β E2 transdermal for 21 days plus micronized progestogens suppositories with the dose of 25 mg twice a day (12 days/month) - (n.20 cases) - 3) 25 mcg/die of 17 β E2 transdermal for 4 months plus micronized progestogens suppositories or vaginal progestogens in creme in the last 15 days every cycle of therapy.

The data show a secretive endometrium in the first group in 26,7% of cases, in the second group in 38, 8 % of cases, in the third group in 36,36% of cases, in the six month of observation. After 18-24 months this percentage increases in the first group till 45,4% of cases, in the second group of 45,4% of cases, in the third group in 37% of cases.