

Women with Abnormal Endometrial Pathology: Experienced at a Tertiary Care Hospital in Bangladesh

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Abstract

Background: Transvaginal sonography is superior to transabdominal sonography in most cases of pelvic pathology. **Objective:** This study was undertaken to see the clinical/pathological characteristics of endometrial hyperplasia. **Methodology:** This cross sectional study was carried out from January 2007 to December 2008 for a period of two years. All suspected cases of endometrial hyperplasia were included for this study. Transvaginal sonography (TVS) performed and confirmation was done by histopathological examination. **Result:** A total number of 40 cases were enrolled for this study. The most common diagnosed endometrial pathology was endometrial hyperplasia which was 42.5% cases. Endometrial polyp was diagnosed in 32.5% cases. Endometrial carcinoma was in 7.5% patients and submucosal fibroid was in 10.0%. **Conclusion:** Endometrial hyperplasia is the most common disease among the women presented with endometrial pathology. [J Shaheed Suhrawardy Med Coll, 2013;5(1):11-13]

Key words: Endometrial hyperplasia, histopathology of endometrial hyperplasia, endometrial pathology

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Introduction

Abnormal uterine bleeding (AUB) is a common clinical manifestation of endometrial pathology for gynecologic visits¹. Up to 33% of women referred to gynecological out patient clinics have AUB and this proportion rises to 69% in a peri or postmenopausal group². Endometrial pathology associated with AUB often cause thickening of endometrium which might be diffuse or focal. Endometrial hyperplasia is related to an abnormally high, prolonged level of estrogenic stimulation with diminution or absence of progestational activity. Endometrial hyperplasia (EH) is considered to be a frequent cause of abnormal uterine bleeding³. Thus, hyperplasia occurs most commonly around menopause or in associated with persistent anovulation in younger women. Most importantly the differential diagnosis includes endometrial carcinoma, endometrial polyp and hydatidiform mole. The purpose of the present study was to see the disease profiles among the women presented with abnormal endometrial pathology.

Methodology

This cross sectional study was performed among patients

who were clinically suspected having thickened endometrium during duration of 2 years to confirm the clinical diagnosis. Clinically suspected patients admitted in Department of Obstetrics & Gynaecology suffering from endometrial pathology were enrolled in this study. The study was carried out in the Department of Radiology and Imaging at BSMMU with collaboration at the Department of Obst & Gynecology, Department of Pathology and Histopathology of the same institute. The study was carried out January 2007 to November 2008 for a period of two years. All the information were collected in a pre-designed structured data collection sheet. Sampling method was purposive type of non-probability sampling. Inclusion criteria of selection of patients were pre, peri and post menopausal women with abnormal uterine bleeding for more than 6 months who were clinically suspected to have endometrial pathology and patients with abnormally thickened endometrium (>15 mm in premenopausal women and >5 mm in postmenopausal women) detected on transabdominal ultrasonography or transvaginal sonography. Exclusion criterias were patients having AUB due to causes other than endometrial pathology and patients who were unfit or unwilling to do TVS. Prior to

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the commencement of this study, the research protocol was approved by the institutional review board (IRB). Specimen was obtained by endometrial curettage and /or hysterectomy specimen. Written consent was taken from all the patients after informing the necessary information regarding the research study. Then data were collected in a pre-designed structured data collection sheets. Data were collected from primary source starting from the clinical history and physical examination. The patients were followed up to histopathological diagnosis of endometrial curettage and/ or hysterectomy specimen. Further statistical analyses of the results were done by computer software device as statistical packages for social scientist (SPSS). The results were presented in tables, figures & diagrams.

Results

A total of 40 consecutive cases were selected who were attended in the department of Radiology and Imaging at BSMMU with clinically diagnosed endometrial pathology. Histopathological examination was done from respective pathology department. It was the peri-menopausal women (40-50 years) who were suffering from the majority of the cases of endometrial abnormality among which endometrial hyperplasia was the commonest (figure I).

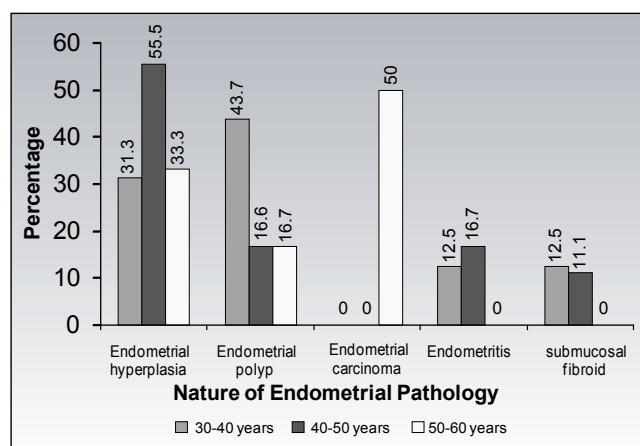


Fig. I: showing endometrial pathology according to age group

Among 40 patients the most common diagnosis was endometrial hyperplasia which included 18(45.0%) cases. The results are shown in figure 2. In this study the most common diagnosed endometrial pathology was endometrial hyperplasia which was 17(42.5%) patients cases. Endometrial polyp was diagnosed in 13(32.5%) patients. Endometrial carcinoma was in 3(7.5%) patients and Submucosal fibroid was in 4 (10.0%) patients (Table-1).

Table 1: Histopathological Diagnosis of Different Endometrial Pathology

Endometrial Abnormalities	Frequency	Percentage
Endometrial hyperplasia	17	42.5
Endometrial polyp	13	32.5
Endometrial carcinoma	3	7.5
Submucosal fibroid	4	10.0
Total	40	100.0

Discussion

In this present study endometrial hyperplasia was diagnosed in 45.0% cases. Most of this appeared as diffuse and homogenous thickening of echogenic endometrium on Transvaginal Ultrasonography (TVS). El-Mowafi et al⁷ observed in their histopathological diagnosis that out of 42 cases normal postmenopausal atrophic endometrium was seen in 19(45.2%) cases which is similar to the present study and chronic endocervicitis was diagnosed in 5 of them. An endometrial pathology was found in 23(54.8%) patients, endometrial hyperplasia was diagnosed in 8(19%) cases, a polyp was found in 11(26.2%) cases, endometritis was found in 2(4.8%) cases and endometrial carcinoma was the histopathological report of 2(4.8%) cases. Endometrial echoes were visualized and measured by TVS in all cases. An abnormal endometrial texture was found in 17 of the 23 cases with endometrial pathology. Hyperplasia was diagnosed in 7 of the 8 cases, while the other case was diagnosed as normal atrophic endometrium. A polyp was diagnosed in 9 cases of the 11, while the other 2 cases were diagnosed as normal atrophic endometrium.

Maia et al¹¹ found that endometrial hyperplasia was in 10 patients, all of them had abnormal uterine bleeding. The results of above authors are comparable with the present study. According to histopathological diagnosis of different endometrial pathology in this study it was observed that the most common diagnosed endometrial pathology was endometrial hyperplasia 42.5% which was. Endometrial polyp was diagnosed in 12.5% cases, endometrial carcinoma in 7.5% cases and submucosal fibroid was in 10.0% cases. Mathew et al¹² found in their study that endometrial hyperplasia was 18.2%, endometrial polyp was diagnosed in 39.1% cases and endometrial carcinoma in 0.9% cases in histopathological diagnosis. Wilailak et al¹³ found in their study that endometrial hyperplasia was 17.3% and endometrial polyp was diagnosed in 4.9% cases in histopathological diagnosis. Tsikouras et al¹⁴ observed on 123 postmenopausal women with suspicious endometrium >5 mm, endometrial polyps was 7.13%, one cervical polyp with extension in the cavity 0.8%, endometrial atrophies 73.1%, atrophic endometritis 8.13%, hyperplasia 1.62% and hyperplasia with atypia was 0.8%.

Conclusion

The study finding permit to conclude that endometrial hyperplasia is the most common disease among the women presented with abnormal endometrial pathology followed by endometrial polyp and endometrial carcinoma.

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