Asian Journal of Multidimensional Research
ISSN: 2278-4853 Vol. 11, Issue 7, July 2022 SJIF 2022 = 8.179
A peer reviewed journal

COMPLEX DIAGNOSIS AND TREATMENT OF HYPERPLASTIC PROCESSES AND ENDOMETRIAL CANCER

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DOI: 10.5958/2278-4853.2022.00166.5

ABSTRACT

The urgency of the problem of endometrial hyperplastic processes is due to the high risk of their malignancy, especially in women in peri- and postmenopause. The frequency of malignancy of endometrial hyperplastic processes varies within a fairly wide range (0.25-50%) and is determined by the morphological features of the disease, the duration of its recurrence, and the age of the patients. The aim of our work is to optimize the tactics of managing women with hyperplastic processes and endometrial cancer based on the development of an algorithm for diagnosing, treating and predicting the outcomes of therapy for this pathology using modern medical technologies. The complex use of clinical, laboratory, instrumental methods allows you to choose the best methods for diagnosing and treating endometrial hyperplastic processes.

KEYWORDS: *Endometrial Hyperplastic Processes, Endometrial Cancer, Diagnosis.*

REFERENCES:

1. Ткаченко Л.В., Свиридова Н.И. Гиперпластические процессы эндометрия в пременопаузе: современные возможности гормональной коррекции и профилактики. Гинекология. 2013; 15 (2): 8–12. [TkachenkoL.V., SviridovaN.I. Giperplasticheskieprotsessyendometriiavpremenopauze: sovremennyevozmozhnostigormonal'noikorrektsiiiprofilaktiki. Gynecology. 2013; 15 (2): 8–12 (inRussian).]
2. Будилова Е., Лагутин М. Гендерные тренды продолжительности жизни в России и мире. Аист на крыше. Демографич. журн. 2018; 7: 12–7.
3. Фадеева Е.П., Лисянская А.С., Манихас Г.М. и др. Ингибиторы ароматазы третьего поколения в эндокринотерапии рака молочной железы и рака эндометрия: успехи и неудачи комбинированной терапии. Обзоры по клин. фармакол. и лекарствен. терап. 2016; 14 (2): 47–57. [FadeevaE.P., LisyanskayaA.S., ManikhasG.M. etal. Aromatase

inhibitors of the third generation in endocrine therapy of breast cancer and endometrial cancer: the successes and failures of the combination therapy. Obzory po klinicheskoyfarmakologiiilekarstvennoyterapii. 2016; 14 (2): 47–57. (In Russ.)] DOI: 10.17816/RCF14247-57.

4. Тапильская Н.И., Глушаков Р.И. Фолатсодержащие гормональные контрацептивы в стратегии первичной профилактики злокачественных новообразований у женщин репродуктивного возраста (обзор литературы). Проблемырепродукции. 2018; 24 (6): 51– 60. [Tapil'skaya N.I., Glushakov R.I. Folate-fortified hormonal contraceptives in the strategy of primary prevention of cancer among women of reproductive age (a review). ProblemyReproduktsii. 2018; 24 (6): 51–60. (In Russ.)] DOI: 10.17116/repro20182406151

5. Altman AD, Thompson J, Nelson G, et al. Use of aromatase inhibitors as first- and second-line medical therapy in patients with endometrial adenocarcinoma: a retrospective study. J ObstetGynaecol Can 2012; 34:664-672.

6. Amanta F., Mirzab M., Creutzbergc C. FIGO cancer report 2012. Cancer of the corpus uteri. // Int J Gynecol Obstet. – 2012. – V. 119, S 2. – P. S110–S117.

7. American Association of Gynecologic Laparoscopists. AAGL Practice Report: Practice Guidelines for the Diagnosis and Management of Endometrial Polyps. J Minim Invasive Gynecol 2012; 19 (1): 3–10.

8. American Cancer Society. Endometrial cancer. Available online. DOI: https://www.cancer.org/cancer/endo metrial-cancer.html.

9. American College of Obstetricians and Gynecologists Committee on Gynecologic Practice. ACOG committee opinion. No. 601: Tamoxifen and uterine cancer. Obstet. Gynecol. 2014; 123 (6): 1394–1397. DOI: 10.1097/01. AOG.0000450757.18294.cf.

10. American college of obstetricians and gynecologists committee on gynecologic practice. ACOG committee opinion. No. 634: Hereditary cancer syndromes and risk assessment. Obstet. Gynecol. 2017; 125 (6): 1538–1543. DOI: 10.1097/01.AOG.0000466373.71146.51.

11. American college of obstetricians and gynecologists committee on gynecologic practice. ACOG committee opinion No. 734: The role of transvaginal ultrasonography in evaluating the endometrium of women with postmenopausal bleeding. Obstet. Gynecol. 2018; 131 (734): e124– e129. DOI: 10.1097/AOG.0000000000002631.