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Clinicopathological evaluation of abnormal uterine bleeding (AUB) and its correlation with biochemical hormone profile in perimenopausal women

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**Introduction:** Perimenopausal women faces menstrual problems inform of cycle irregularity in form of variation in both length and heaviness of bleeding episodes. Follicular development during this phase is erratic, leading to estrogen level variability. Thus, detailed characterization of sex hormones dynamics during the perimenopause is important for understanding its potential implications for reproductive cancers and other health outcomes.

**Objective:** To evaluate the clinical features and histopathological findings in abnormal uterine bleeding and correlate with hormone profile in perimenopausal women.

**Materials & Methods:** A total of 156 endometrial curettage samples of perimenopausal women age group (40-50 years) which were undergone D&C for AUB were collected and processed and classified according WHO criteria. 2-3 ml serum was collected between day two to day fourth of period and LH, FSH, Estradiol and progesterone hormone analysis was done by chemiluminescent microparticle immunoassay.

**Results:** The predominant pattern of endometrium among benign category was proliferative 46 (30.6%) and disordered proliferative phase endometrium 40 (26.6%) followed by secretory 12 (8%) and mixed endometrium 11 (7.3%). In premalignant group, 33 (22%) had hyperplasia without atypia and 2 (1.3%) had atypical hyperplasia. Patients with benign endometrial lesions (102) and hyperplasia (33) presented with heavy menstrual bleed 91% and 94% respectively while all three patients of malignant lesions complaint intermenstrual bleeding (100%). (p=0.001). No statistically significant correlation was found between hormone levels and endometrial histological pattern.

**Conclusion:** In perimenopausal women, intermenstrual bleeding may represent an alarming symptom of endometrial malignancy. Histopathological pattern of endometrium and clinicopathological factors can predict further management and outcome.

#### **Biography**

Malti Kumari Maurya has completed her MD Pathology from King George's Medical University (KGMU), Lucknow, India in 2008. Then joined as a Lecturer in 2009 in the same Department and promoted to Associate Professor in 2015. She is actively participating in both teaching undergraduate and postgraduate students along with research work and attended national international CME. Her field of interest is gynecologic pathology, onco path, oral and gall bladder tumor. She has published more than 20 papers in reputed journals and serving as reviewer in two to four journals.

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