

Sonographic Assessment of Pelvic Pathology among Post-Menopausal Sudanese Women

Moawia Gamersddin¹, Maha Bihairi², Mariam Mohammed³, Mohamed Yousef⁴

¹Taibah University, College of Medical Applied Sciences, Department of Diagnostic Radiologic Technology, Almadinah Almunawwarah KSA

m.bushra@yahoo.com ,

²Alzaeim Alazhari University, Faculty of Radiological Sciences and Medical Imaging.P.O.Box1432 Khartoum Bahri 13311-Sudan

³College of Medical Radiologic Science, Sudan University of Science and Technology, P.O.Box 1908, Khartoum, Sudan

⁴Radiologic Technology Department, College of Applied Medical Science, Qassim University, Buraduh, KSA

Abstract: Abnormal vaginal bleeding is one of the most common presenting complaints in women of any age seeking gynecologic health care. This study aimed to assess the role of sonography in diagnosis of different pelvic pathologies among 106 post-menopausal Sudanese women. It was done in Khartoum hospitals from July 2010- February 2011. The study found that: Vaginal bleeding , cervical lesion was the most common causes of PMB (43.4%).,Low pelvic pain, abdominal distention and urinary symptoms were the most common symptoms of ovarian cancer.,Ca-ovary is the main findings in the study population and it was increase in multiparity more than null parity 37.7% and 7.5% in null parity. The incidence of Ca-cervix also increase with age, which from 14.2% in age group 50-60 years, 18.9% in age more than 60 years and increase in multiparity more than in null parity.

Keywords: Multiparity, Null parity, Ultrasound pelvic pathologies, Ca-ovary.

1. Introduction

Menopause is the transition period in a women’s life, it occurs when the ovaries stop producing eggs, menstrual activity decreases and eventually ceases, so body decreases the production of female hormones, estrogen and progesterone⁽¹⁾.Menopause effects individual differently. In some cases menstrual activity stops suddenly, but in other menstrual activity tapers off until it completely stops. Menopause is a natural event, occurs between the ages of 40-35 post menopausal up to 55 years old. The age of menopause occurs affected by several factors e.g. nutrition, malnourished women begin menopause about 4 years earlier than well-nourished women. The other factor is early onset of menstruation⁽¹⁾.The main clinical application of ultrasound is to evaluate of post menopausal bleeding and evaluation of palpable pelvic mass. At post menopausal period increase risk for several gynecological diseases including cancer of the breast, ovary and endometrial⁽²⁾. Previous study showed that there a positive relation between post menopausal hormone use (PMH) and ovarian cancer⁽³⁾. Other study showed that post menopausal bleeding is an important indicator of the presence of malignancy⁽⁴⁾. This study aimed to assess the role of sonography in diagnosis of different pelvic pathologies among 106 post-menopausal Sudanese women.

2. Materials and Methods

This is a retrospective study deal with the gynecological disease of post menopausal woman. 106 patients which are post menopausal women referred to the Khartoum State hospitals for menopausal management and diagnosis 2009-2010. Data had been collected from patient’s files, used clinical data sheet, that 106 cases had been selected by the method of non-probability sampling. After that data had been analyzed through interpreting and diagnosis of study

variable from the clinical data sheet used software program SPSS.

3. Results

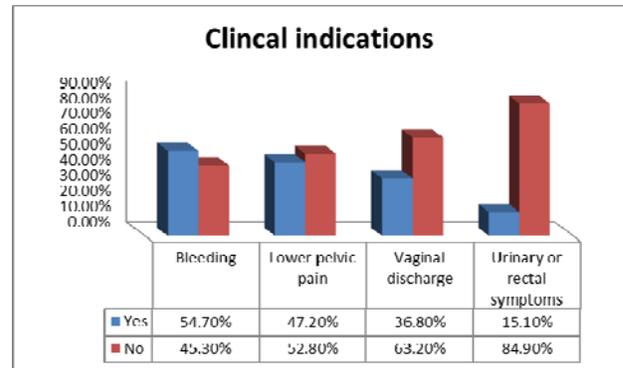


Figure 1. Shows clinical indications

Table 2. Shows relation between final diagnosis and age group

Final diagnosis	Age			Total
	40-50	50-60	> 60	
Fibroid	1 09%	1 09%	1 .9%	3 2.8%
Ca body of uterus	0 0%	1 .9%	3 2.8%	4 3.8%
Cervix	11 10.4%	15 14.2%	20 18.9%	46 43.4%
Ca-endometrium	1 .9%	1 .9%	3 2.8%	5 4.7%
Ca-ovary	8 7.5%	21 19.8%	19 17.9%	48 45.3%
Total	21 19.8%	39 36.8%	46 43.4%	106 100%

Table 3. Shows relation between final diagnosis and parity

Final diagnosis	Parity	
	null	multiparous

	parity		
Fibroid	0 0.1%	3 2.8%	3 2.8%
Ca body of uterus	0 .6%	4 3.8%	4 3.8%
Ca-Cervix	11 10.4%	35 33.6%	46 43.4%
Ca-endometrium	0 0%	5 4.7%	5 4.7%
Ca-ovary	8 7.5%	40 37.7%	48 45.3%
Total	19 17.9%	87 82.1%	106 100%

4. Discussion

Data of this study showed age frequency distribution of post menopausal women whom had gynecological pathology. Study find that (40-45) years which 19.8% from the total percentage (50-60) years from 36.8% and more than 60 years from 43.4%.

1. More than 50% of the post menopausal women included in the study had post menopausal vaginal bleeding as shown in table 2; however several study confirmed that genital tract bleeding in post menopausal women is a sign of underlying pathologic condition. Results reported that the malignant cases were the most common while functional and organic cases had equal distribution which will be similar to the findings. Table 1. Showed that (47.2%) from the total percentage had low pelvic pain, abdominal distention, low pelvic pain and urinary symptoms were that the most common symptom of ovarian cancer, which has been called "silent killer" because it is usually not discovered until it have advanced stage. In 70-75% of the cancer has spread to other parts of the abdomen before it is detected. Several studies agree with this result one of the study done by Laura Dolson ⁽⁵⁾.
2. (36.8%) of the postmenopausal women had offensive vaginal discharge and (63.2%) haven't. postmenopausal vaginal bleeding and vaginal discharge were the most common sign of Ca-cervix. Table 4 showed that there was previous study which agree with the result done by Jeffery L. Stern / M.D. ⁽⁶⁾ Table 1. showed that (15.1%) from postmenopausal women who had pelvic pathology and urinary or rectal symptoms (e.g. hydronephrosis, dilated ureter etc...) might be due to the pressure done by the pelvic lesion on the ureter or rectum. The incidence of Ca-cervix increase with age, (14.2%) in the age group 50-60 years and 18.9% in the group study more than 60 years. These ages have specific trends in the incidence of cervical cancer showed in table (2).Table 3. Revealed that Ca ovary is the main findings in the study population and it is increase in the multiparity more than null parity women. The incidence of the Ca ovary in multiparity 37.7% and 7.5% in null parity. This result was reversed but in fact multiparity and the use of oral contraceptives reduce the risk of ovarian cancer ⁽⁷⁾.

5. Conclusion

From this present study we concluded that the vaginal bleeding in postmenopausal women is the sign of underlying

pathologic condition, the result revealed that cervical lesion is the most common causes of PMB which contributed to (43.4%).

Low pelvic pain, abdominal distention and urinary symptoms is the most symptoms of ovarian cancer (47.2%), vaginal discharge (36.8%) and (15.1%) of postmenopausal women had pelvic pathology. The incidence of Ca cervix increase with age (18.9%) in age more than 60 years. Ca cervix increase in multiparity than null parity the incidence of Ca cervix in multiparity (33%) and (10.4%) in null parity.

Ca ovarian is the main finding in the study population. It was increase in multiparity more than null parity women. The incidence of Ca ovary in multiparity (37.7%) and (7.5%) in null parity, also the incidence of Ca ovary 7.5% in age group 45-50 years and (19.8%) in age over 50 years.

Incidence of pelvic gynecological pathologies concentrated in age over 60 years which from (43.4%) from the total percentage.

References

- [1] <http://www.mamasheath.com/default.asp>.
- [2] Gynecological on obstetric ultrasound Burwin Institute of U/S module 4 / page 56.
- [3] British Journal of cancer (2007) 96, 151-156. Doi: 10-1038 / Sj.bjc.6603527. <http://www.bjcancer.com> publishedonline19 December 2006
- [4] <http://www.bhj.org/journal2005-4703> Bombay hospital journal- original research.
- [5] <http://www.baymoon.com/gyncancer/library/weekly/aa000111a.htm> 29/3/1432
- [6] <http://www.ovariancancercenter.com> 29/3/1432
- [7] <http://www.nejm.org> 29/3/1432