

Intrauterine devices and risk for inflammatory tumours

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The object: To examine the linking between IUU and the rise and nature of inflammatory tumour of pelvis. Material and method: 195 patients operated has been analysed for inflammatory tumour of pelvis. Group A -- No=97 (49.74%) patients that used IUU and group B -- No= 98 (50.26%) patients without IUU. Operative treatment -- Hysterectomy cum adnexectomy dependent upon volume of inflammatory process.

Results: It is observed that the users of IUU (group A) have in average more deliveries 1.98 ± 0.92 , CV -- 0.47 in relation to group B -- 1.09 ± 1.13 , CV -- 1.04 and more abortions - 2.33 ± 2.11 , CV -- 0.90 in relation to group B. The increase of incidence of inflammatory tumours is also noted -- Pyosalpinx unilateralis et bilateralis & Abscessus tuboovarialis unilateralis et bilateralis in the group that used IUU in relation to B group with positive correlation in relation to length of carriage of IUU. Sedimentation in both groups of patients was increased, being in average higher in A group -- 87.07 ± 25.73 ; CV -- 0.30 in relation to B group -- 71.01 ± 31.66 ; CV -- 0.45. The value of leukocytes is in average higher in A group -- 11.85 ± 4.20 ; CV -- 0.35 in relation to B group -- 9.64 ± 3.62 ; CV -- 0.38. The length of hospitalisation for A group 13.80 and for B group 14.24.

Conclusion: On the basis of presented results we can conclude that there is a justified risk of using IUU as in view of (in regard to) originating so in view of evolution of inflammatory process of interior genital organs of women. For the insertion of IUU the adequate preparation is needed, regular controls and special care to health education in particular in view of length of caring IUU.