

POSSIBILITIES OF USING ULTRAMICRODOSED PILLS IN ADOLESCENT GIRLS

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INTRODUCTION

Currently, the widespread use of hormonal combined oral contraceptives (COCs) in adolescent girls is due to their possession of a number of positive non-contraceptive properties. Experience with the use of microdose estrogen progestin drugs in adolescent gynecology has shown a positive effect on the correction of hyperandrogenic conditions, premenstrual syndromes, as well as androgen-dependent dermatopathy. There is an undeniable reduction in undesirable effects and side effects when the dose of estrogen in the drugs used is reduced.

Purpose of the study. Studying the effect of ultramicrodosed COCs on some indicators of cytokine status in girls with oligomenorrhea, as well as tolerability and the presence of side effects in this age category of patients.

Materials and methods: the study involved 20 teenage girls aged 15-18 years, observed in the Republican specialized scientific and practical medical center for maternal and child health from 2022-2023, with oligomenorrhea of unknown etiology, who made up the main group. The control group consisted of 12 teenage girls of the same age with a normal menstrual cycle and no chronic diseases.

All girls participating in the study underwent determination of FSH, LH, estradiol, testosterone, thyroid hormones, as well as a study of cytokine status (IL-1, IL-6 and TNF).

After obtaining informed consent for treatment and excluding contraindications to the use of hormonal therapy, all girls were prescribed a combined monophasic ultra microdose oral contraceptive containing 15 mcg ethinyl estradiol and 60 mcg gestodene. Treatment began on the first day of the spontaneous or natural gestagen-induced menstrual cycle (10 mg 2 times a day). The study of cytokine status was carried out twice: before treatment and after 4 months of using ultramicrodosed COCs.

Results and discussion. Data from the preliminary examination revealed a significant increase in the studied cytokines by 2-2.5 times compared to the control group. Main group: IL-1 32.8 ± 10.7 , IL-6 40.4 ± 15.1 , TNF- α 30.9 ± 10.6 ; control group IL-1 18.73 ± 3.4 , IL-6 12.94 ± 2.5 , TNF- α 17 ± 4 ($p < 0.05$). After COC

therapy, the blood of the patients of the main group was retested. Cytokine status data showed a significant decrease in proinflammatory cytokines in the blood serum: IL-1 22.76 ± 2.4 , IL-6 20.5 ± 2.9 , TNF- α 21.6 ± 3.4 ($p < 0.05$ relative to the original data). During the period of treatment, there were no intolerances or side effects characteristic of this group of drugs.

CONCLUSIONS

Data from the study show the effectiveness and safety of the use of ultramicrodosed COCs in adolescents, as well as a decrease in the content of proinflammatory cytokines in the blood serum in patients with idiopathic oligomenorrhea.