

32. THE ROLE OF ENDOMETRIAL BIOPSY IN THE DIAGNOSIS OF ENDOMETRIAL HYPERPLASIA



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Introduction. Endometrial hyperplasia (EH) is a pathological process of the uterine mucosa characterized by gland proliferation and an increase in the gland-stromal ratio, which develops as a result of excessive estrogenic stimulation with a relative deficiency of the counterbalancing effects of progesterone. The actuality of the problem is due to the increasing prevalence of endometrial cancer, the precursor of which is endometrial hyperplastic processes. There are 2 types of EH: EH without atypia (usually not neoplastic) and EH with atypia (neoplastic, also referred to as endometrial intraepithelial neoplasia). EH is manifested by abnormal uterine bleeding in the form of heavy or intermenstrual bleeding with or without a regular menstrual cycle. The diagnosis of EH requires morphologic verification. Endometrial biopsy can be obtained by: Uterine dilation and curettage; Hysteroscopy; Pipelle biopsy; Histological examination post hysterectomy. According to the American College of Obstetrics and Gynecology (ACOG) hysteroscopy is considered the gold standard, it allows a clear visualization of the uterine cavity and focal lesions, which can be biopsied.

Aim of study. The purpose of this study was to analyze the results of histopathological examination of endometrial tissue obtained by endometrial biopsy in people with suspected endometrial hyperplasia.

Methods and materials. Our clinical research represents a retrospective study based on 433 case histories analysis of patients with suspected EH, who underwent the endometrial biopsy obtained by dilatation and curettage procedure, admitted in the Department of Gynecology of the Gheorghe Paladi Municipal Hospital during the 2022 year.

Results. As a result of the study, it was found that EH without atypia was identified in 42% cases, and it is the most frequent endometrial pathology in any age group, endometrial polyp was diagnosed in 30% cases. EH with atypia was identified in 13% cases, in women over the age of 50. In 15% cases, pathomorphological diagnosis was not made due to insufficient material in the scrape. The prevalence increases with age: from around 1% for those aged <25 years to >41,57% in those aged 45 years or over.

Conclusion. Thus, our study confirmed the high significance of diagnostic endometrial biopsies for determining the causes of abnormal uterine bleeding and diagnosing EH. Even though dilatation and curettage is considered the traditional method of diagnosis for EH, it should be replaced by techniques, with superior diagnostic accuracy.