

The effect of parity with AUB in Perimenopause

¹Dr Ankita Jamwal, MS-OBG, Gynaecologist, Kamla Nehru Medical College, IGMC, Shimla

²Dr Rohini Rao, Associate professor, Gynaecologist, Kamla Nehru Medical College, IGMC, Shimla

Corresponding Author: Dr Rohini Rao, Associate professor, Gynaecologist, Kamla Nehru Medical College, IGMC Shimla.

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Abstract

Background: Abnormal Uterine Bleeding (AUB) is the term to describe any type of menstrual bleeding that does not fall within the normal ranges for amount, frequency, duration or cyclicity.

Methods: Prospective interventional study conducted at Kamla Nehru Hospital for State Mother and Child, IGMC Shimla.

Results: The parity ranged from 0 to 5 in the present study. The incidence of AUB was found to be highest in women with parity 2 (44.97%) with confidence interval of 38.42-51.67% followed by parity 3 (40.61%) with confidence interval of 34.18-47.28% and least in parity 1 (5.24%) with confidence interval 2.74-8.97% and none in nulliparous (0%)

Conclusion: In summary, abnormal uterine bleeding in perimenopausal patients is a common and important part of clinical practice for health-care providers of women.

Keywords: AUB, Parity, Bleeding

Introduction

Perimenopause is defined as ‘the period around the onset of menopause that is often marked by various physical signs such as hot flushes and menstrual

irregularities' [italics added]. Perhaps another way to think of this is that perimenopause is the mirror image of adolescence, which is the coming on to the reproductive years, while perimenopause is the coming off from the reproductive years.¹ Although the median age of menopause, at least in North America, is 51 years, the perimenopause is often highly variable in its age of onset, duration and bleeding patterns. Regular menstrual cycles are associated with ovulation and production of progesterone in the luteal phase. Anovulatory cycles can be highly variable in their bleeding patterns.

The definition of abnormal uterine bleeding (AUB) is ‘flow outside of normal volume, duration, regularity or frequency’.³ One-third of patient visits to the gynecologist are for AUB and it accounts for more than 70% of all gynecological consults in the perimenopausal and postmenopausal years

Material and Methods

Study Design: Prospective interventional study.

Study Settings: After approval from Research and Ethics Committee this study was conducted at Kamla Nehru Hospital for State Mother and Child, IGMC Shimla.

Study Period: 1ST July 2018- 30th June 2019.

Sample Size: All patients coming in the study period fulfilling the inclusion criteria

Inclusion Criteria

- Perimenopausal women in age group 45 years and above with AUB.

Exclusion Criteria

- Patient refusal
- Other age groups with abnormal uterine bleeding
- Isolated cervical or vaginal pathology
- Bleeding diathesis and tendencies
- Pregnancy and its complications
- Patients receiving cyclical hormones
- Endocrine diseases like hypothyroidism, diabetes
- Leiomyoma
- Adenomyosis

Detailed history of the women with abnormal uterine bleeding coming to the opd was taken including the age, parity and menstrual patterns (amount, duration, and pattern of bleeding). General and systemic examination of these patients was done. The patients were subjected to routine investigations as per departmental protocol.

1. Hemoglobin
2. Urinary pregnancy test
3. Fasting blood sugar and post prandial blood sugar
4. Urine routine & microscopic examination
5. Thyroid profile
6. Coagulation profile
7. Ultrasonography of pelvic organs

Observations

Table 1: Relationship of AUB with parity

Parity	No of Cases (N-=229)	Percentage	Confidence Interval
Nulligravida	0	0	

Every patient was posted for endometrial curettage and the endometrial curetting's were taken as day care procedure.

Patients were asked to come next morning nil per orally. After taking the informed consent patients were asked to empty the bladder prior to procedure. The patients were given intravenous sedation. Patients were placed in lithotomy position. Local antiseptic cleaning and draping was done.

Then bimanual examination was performed. Posterior vaginal speculum was introduced. The anterior lip of cervix was grasped with an allis tissue forceps. A uterine sound was introduced to confirm the position and to note the length of the uterocervical canal. Cervical canal was dilated with graduated dilators. After the desired dilatation, the uterine cavity was curetted by a uterine curette directing starting from fundus down to internal os. Vulsellum and speculum was removed.

Endometrial samples were collected in 10% formalin and sent for histopathological analysis to the Deptt. Of Pathology IGMC Shimla.

Endometrial patterns reported were recorded and studied.

Statistical Analysis

The frequency, proportion and percentages were calculated.

Results were summarized in tables, graphs and figures in terms of proportions and percentages. Statistical analysis was done using SPSS version 20.

Para-1	12	5.24%	2.74-8.97%
Para-2	103	44.97%	38.42-51.67%
Para-3	93	40.61%	34.19-47.28
Grand Multiparous	21	9.17%	4.72-12

The parity ranged from 0 to 5 in the present study. The incidence of AUB was found to be highest in women with parity 2 (44.97%) with confidence interval of 38.42-51.67% followed by parity 3 (40.61%) with

confidence interval of 34.18-47.28% and least in parity 1 (5.24%) with confidence interval 2.74-8.97% and none in nulliparous (0%)

DISCUSSION

Table 2: Parity and AUB

	Archana Bhosale et al(2010)	Gupta et al(2013)	Ushagd et al(2014)	Lothal et al(2016)	Sreelakshmi u et al(2018)	Present study
Parity	Percentage	Percentage	Percentage	Percentage	Percentage	Percentage
Nullipara	3.5%	0	5.8%	6.1%	3.70%	0
Para-1	4.4%	4%	8.2%	10.8%	3.70%	5.24%
Para-2	32.18%	32%	25.8%	64.9%	51.85%	44.97%
Para-3	27.8%	47%	34.11%		28.88%	40.61%
Grand multiparous (>4)	32.18%	7%	25.8%	18.2%	11.85%	9.17%

In the present study ,the highest incidence of AUB was seen in women with para 2 (44.97%), which is in concordance with results of the studies by Sreelakshmi U et al(51.85%),Lotha L et al(64.9%)Archana bhosle et al(32.18%).However in the studies by Gupta et al and Usha GD et al highest incidence was seen in para 3 women i.e 47% and 34.11% respectively. Lowest incidence was seen in nulliparous women in present study which is in concordance with the results of the studies by Sreelakshmi U et al(3.70%),Gupta et al(0%),Lotha L et al (6.1%),Usha GD et al(5.8%),Archana bhosle et al(3.5%). By these observations, it may be implied that incidence of AUB

is highest in multiparous women and least in nulliparous women and fewer (16%) in grand multiparous group as their relative frequency has decreased in recent years due to small family norm.

Conclusion

In summary, abnormal uterine bleeding in perimenopausal patients is a common and important part of clinical practice for health-care providers of women.

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