

## ORIGINAL ARTICLE

**High Variability in Clinical and Histopathological Patterns of Abnormal Uterine Bleeding in Perimenopausal Women**ASIFA ALIA<sup>1</sup>, SABEENA UMER<sup>2</sup>, SHUMAILA YASIN<sup>3</sup>, SHAZIA ROMAN<sup>4</sup>, NUSRAT MANZOOR<sup>5</sup>, FAIZA IRSHAD<sup>6</sup><sup>1</sup>Associate Professor Department of gynecology and obstetrics Rai Medical Collage Sargodha<sup>2</sup>Assistant Professor Department of gynecology and obstetrics Sialkot Medical College Sialkot<sup>3</sup>Assistant Professor Department of gynecology and obstetrics Gujranwala Medical College Gujranwala<sup>4</sup>Assistant Professor Department of gynecology and obstetrics Sialkot Medical College Sialkot<sup>5</sup>Professor Department of gynecology and obstetrics Niazi Medical and Dental College Sargodha.<sup>6</sup>Associate professor Anatomy University medical & dental college. Faisalabad

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**ABSTRACT**

**Background:** The term "abnormal uterine bleeding" (AUB) refers to bleeding from the uterus that is either more than usual, occurs for a longer amount of time than normal, or occurs at an irregular time. All three of these factors can contribute to AUB. AUB can affect persons of any age and can manifest itself in a variety of ways. It is also one of the most common reasons that patients go to see their physicians because it is a presenting complaint or symptom. There is a wide variety of underlying reasons, some of which include fibromyoma, adenomyosis, endometrial polyp, ovarian tumour, pelvic inflammatory disease (PID), endometrial hyperplasia, endometrial cancer, hormonal imbalance (such as hypothyroidism), or hypothalamus pituitary illnesses.

**Place of Study:** Rai Medical College Sargodha

**Duration of Study:** November 2018 and March 2022

**Methods:** The Obstetrics and Gynecology department of RAI Medical College in Sargodha carried out this prospective observational study during the months of November 2018 and March 2022. One hundred and ten patients in all were given permission to take part in the research project after meeting the prerequisites for participation.

**Results:** According to the statistics, the largest number of cases, 51.2%, fell within the age range of 41-50 years. The next largest number of cases, 28.9%, fell within the age range of 31-40 years. In total, there were 110 people who agreed to take part in the research. The average age of all of the patients was 44.87 years old, with a standard deviation of 9.45 years. According to the findings of our investigation, the most common mode of presentation was heavy menstrual bleeding, which was recorded in 54 cases (49.9%). This was followed by delayed menstrual bleeding, which was observed in 23 instances (20.9%). Endometrial hyperplasia was found in 16 (14.5%) of the patients, proliferative endometrium was found in 47 (42.7%) of the cases, secretory endometrium was found in 38 (34.5%) of the cases, and endometrial hyperplasia was found in 15 (13.6%) of the cases.

**Keywords:** Abnormal uterine bleeding, histopathology, dysfunctional uterine bleeding

**INTRODUCTION**

Abnormal uterine bleeding, also known as AUB, is described as bleeding from the uterus that is either more than usual, happens for a longer amount of time than typical, or occurs at an unexpected time. All three of these characteristics are included in the definition. All of these situations are examples of abnormal bleeding from the uterus. AUB can strike persons of any age, and its symptoms can present itself in a wide range of different ways. In addition to this, it is one of the most significant symptoms or presenting concerns that prompt people to seek medical attention. These are just some of the many potential causes. Endometrial disorders are continuously ranked among the most prominent forms of gynaecological conditions that are encountered by women all over the world. This is the case regardless of the country in which the women in question reside. When a person has AUB, the pattern of bleeding can range from mild to moderate to severe, which can have a significant influence on a person's quality of life on both the social and emotional levels. There is a possibility that the symptoms will be quite moderate, which may lead to issues that will resolve themselves without the need for a hysterectomy. If this is the case, then the issue may be resolved without the need for hysterectomy. In order to get at a diagnosis, it is necessary to perform a full history, a comprehensive clinical examination and investigation, and, most importantly, a comprehensive histological examination. Only then can a diagnosis be arrived at. When trying to arrive at a diagnosis, the use of histology as a method of examination is a crucial influence. As a consequence of this, a study is currently being carried out with the objective of analysing the most common presentation of AUB in addition to the several histological patterns that can be seen in the endometrium of patients who have the condition.

**MATERIALS AND METHODS**

This prospective observational study was carried out between the months of November 2018 and March 2022 by the Obstetrics and Gynecology department of RAI Medical College in Sargodha. In the course of the research, each and every instance of abnormal uterine bleeding that met the requirements for being considered for inclusion was analysed.

**Inclusion Criteria**

- All cases that presented with abnormal uterine bleeding and attended the gynaecology outpatient department (OPD) with complaints of heavy menstrual bleeding, prolonged menstrual bleeding, Heavy Prolonged menstrual bleeding, Intermenstrual bleeding, and continuous bleeding in the age group of 20-58 years.

**Exclusion Criteria**

- Patients on cyclical hormones.
- Pregnant females.

**Procedure:** The pertinent clinical findings and the extensive history that was acquired were entered into a proforma case sheet that had previously been created. Investigations were carried out in addition to the clinical evaluation that had already been completed. Histopathological analysis was performed on endometrial samples before the procedure was carried out.

**RESULTS**

The patients' participation spanned the time period from November 2018 to March 2022. The largest number of cases, 51.2%, fell within the age range of 41-50 years. The next largest number of cases, 28.9%, fell within the age range of 31-40 years.

In total, there were 110 people who agreed to take part in the research. The average age of all of the patients was 44.87 years old, with a standard deviation of 9.45 years.

According to the findings of our investigation, the most common mode of presentation was heavy menstrual bleeding,

which was recorded in 54 cases (49.9%). This was followed by delayed menstrual bleeding, which was observed in 23 instances (20.9%).

Endometrial hyperplasia was found in 16 (14.5%) of the patients, proliferative endometrium was found in 47 (42.7%) of the cases, secretory endometrium was found in 38 (34.5%) of the cases, and endometrial hyperplasia was found in 15 (13.6%) of the cases.

Table 1: Demographical Data

Age	Percentage
21-30 Year	16.1
31-40Year	28.9
41-50Year	51.2
51-60Year	3.8
Total	100.0

Table 1: Distribution of cases according to mode of presentation.

Presentation	Percentage
Heavy menstrual bleeding	49.9%
Prolonged menstrual bleeding	20.9%
Intermenstrual bleeding	11.7
Heavy Prolonged menstrual bleeding	11.4
Continuous bleeding	6.1
Total	100

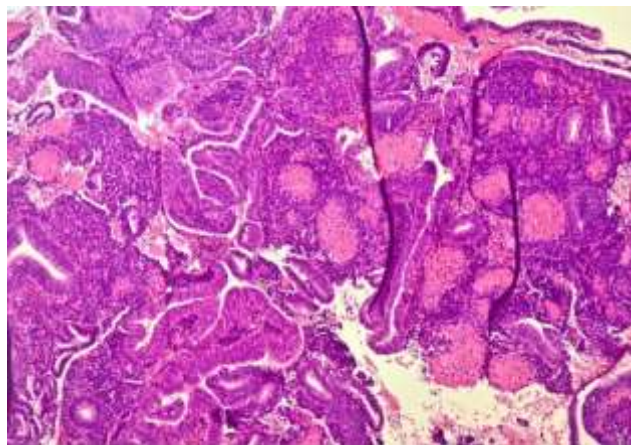


Fig 1: Abnormal Uterine bleeding

## DISCUSSION

More than 70 percent of all gynaecological consultations in the perimenopausal and postmenopausal years are brought on by women experiencing abnormal bleeding from the uterus. The majority of patients were between the ages of 41 and 50 years old (51.2%), followed by those between the ages of 31 and 40 years old (28.9%). The findings were consistent with those found in research carried out by Muzaffar M et al, who found that 32% of instances were found among those aged 38 to 52 years old. The increasing prevalence of abnormal uterine bleeding in this age group (38–52 years) may be attributable to the fact that this is the age group that is approaching menopause, during which the cycles

or menstrual periods become brief and irregular. Alternatively stated it was found that heavy menstrual bleeding was the most common mode of presentation in 49.9% of cases, followed by prolonged menstrual bleeding in 20.9% of cases. This finding was in line with the findings of a study that was conducted by Luqman M et al and Parveen S et al, who found that heavy menstrual bleeding was the most common mode of presentation in 47.2% and 45% of cases, respectively. The majority of the cases in our study were clinically diagnosed to have leiomyoma (57.4%), followed by DUB (36.8%). These findings were consistent with the study carried out by Lotha L et a, who noted leiomyoma as the most commonest cause in 51.6% of cases. On the other hand, our study was in contrast to the study carried out by Mahapatra M et al, which recorded DUB as the most common cause in 42.9% of The proliferative endometrium that was observed in 43.1% of cases was the most prevalent histological pattern, followed by the secretory endometrium that was seen in 35.3% of cases.

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