



## “GLYCODELIN QUALITY AFTER ENDOMETRIAL PLASMOLIFTING IN WOMEN WHO HAVE HAD AN UNDEVELOPED PREGNANCY”

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### **ANNOTATION**

Gynecological diseases and various disorders in the functioning of the female reproductive system are among the most common today. At the same time, they are the ones that cause the greatest anxiety in women of different ages. Most of these pathologies are treated with medication, and in some cases it is necessary to resort to invasive methods of intervention. And to increase the effectiveness of the measures taken, gynecologists often recommend that patients undergo a course of plasm lifting. This procedure is familiar to most women, but as a method of facial skin rejuvenation and solving a number of dermatological problems. And not everyone knows about the possibility of its use in gynecology. Nevertheless, PRP therapy has no less pronounced bio stimulating effect on the tissues of the genitals than on the skin of the face. This makes it possible to improve the course of many diseases and even eliminate the inevitable age-related changes, which helps to eliminate unpleasant symptoms, improve well-being, and improve the quality of sexual life at any age.

**Key words:** unpleasant symptoms, injection procedure, blood, stimulate natural

### **INTRODUCTION**

Plasm lifting or PRP therapy is an injection procedure involving the introduction of plasma into the tissues of the patient's own blood, separated by centrifugation. The main objective of the method is to stimulate natural regeneration processes, since blood plasma contains proteolytic systems that help maintain the constancy of the internal environment and activate adaptive-protective reactions of the body. The use of the patient's own biological material ensures 100% biocompatibility and almost completely eliminates the possibility of developing an

allergic reaction. This makes the procedure completely safe and reduces the number of contraindications to a minimum.

Plasma is a liquid intercellular substance of blood that can be separated using a special technology. During centrifugation in test tubes, blood is divided by a density gradient into erythrocytes and plasma containing platelets and coagulation factors.

The history of the invention of plasm lifting goes back more than 100 years ago, when antibiotics were not yet isolated, and the patient's own blood serum was used to treat pneumonia and other severe infections. Today, autologous blood plasma has found active use in all areas of medicine, including cosmetology and gynecology, and its effectiveness and safety are confirmed by the results of tests and studies.

They show that autologous plasma, i.e. obtained from the patient's own blood, has a complex of positive effects on tissues. It contains a high concentration of platelets, which are elements of the blood. These cells act as a natural tool of the body to activate regeneration processes, and also have antibacterial, analgesic, anti-inflammatory properties.

The conducted studies have proved that auto plasm becomes a source of natural growth factors, cytokines, various macro- and microelements, vitamins, amino acids, and ensures the creation of a high concentration of these compounds at the injection site.

insulin-like (IGF);

platelet-like (PDGF);

epidermal (EGF);

fibroblastic (FGF);

Endothelial Cell Growth Factor (vEGF);

placental cell growth factor (PLGF -1/-2);

transforming  $\beta$ -factor (TGF- $\beta$ );

transforming  $\alpha$ -factor (TGF- $\alpha$ ).

They provide anti-inflammatory, antibacterial action, as well as activation of regenerative and regenerative processes at the injection site, including in the mucous membranes of the female genital organs. This helps to eliminate various inflammations, dystrophic changes and accelerates tissue repair. At the same time, PRP therapy provides a stable therapeutic effect and reduces the duration of treatment.

In general, the mechanism of action of plasm lifting can be compared with the process of forming a hematoma or bruise, i.e. creating stress for tissues. This mobilizes the body's defenses and forces it to actively fight the changes that have occurred at the site of plasma injection. At the same time, the maximum concentration of growth factors is created in this area, which ensures a therapeutic effect.

To ensure coverage of the entire area with pathological changes during PRP therapy, the principle of "therapeutic bag" is used. Its essence consists in enveloping the affected area with plasma, which is realized through the implementation of a number of injections around the site.

You can evaluate the result of plasm lifting after the first procedure. But to get the maximum effect, you need to take a course, the duration of which is calculated individually. In case of chronic diseases, it is recommended to repeat them 3-4 times a year.

Indications for the use of plasm lifting in gynecology

## **MATERIALS AND METHODS**

Since the procedure has a wide biological spectrum of effects, plasmolifting in gynecology is used in the treatment of:

Chronic gynecological inflammatory processes of different localization and type (salpingitis, oophoritis, salpingoophoritis, metroendometriosis, exocervicitis);

hypoplastic and hypotrophic processes in the intimate area (endometrial hypoplasia, involutive changes in the vaginal mucosa, external genitalia);

hormonal insufficiency;

female infertility in order to stimulate ovulation;

aesthetic defects of the genitals caused by childbirth, age-related changes.

Also, plasmolifting allows you to increase the tactile sensitivity of the genitals, which allows you to improve the quality of intimate life at any age.

Since autologous plasma is not foreign to a woman's body, it is well combined with hormonal, anti-inflammatory, antibacterial, immunomodulatory and other drugs used to treat gynecological diseases. At the same time, plasmolifting can also be combined with diathermocoagulation, cryotherapy, laser, radio wave, photodynamic therapy and a number of other instrumental methods of treatment. Therefore, it is also used as one of the components of the complex therapy of various gynecological diseases.

Treatment of inflammatory gynecological diseases

PRP therapy is often used as part of the comprehensive treatment of various female inflammatory diseases. It allows you to:

Stimulate local immunity;

Increase the activity of tissue regeneration processes;

Reduce soft tissue swelling;

Reduce pain;

Restore the normal functioning of the organs affected by inflammation.

Therefore, gynecologists often recommend plasmolifting for sluggish and chronic inflammatory processes, but only in the absence of exacerbation. It is also indicated to resort to it after the end of the course of antibacterial therapy, especially if it was long and required to eliminate acute inflammation.

In such cases, 3-6 procedures are indicated performed with a break of 1-2 weeks. At the same time, a woman's menstrual cycle is taken into account and the schedule of plasm lifting sessions is planned so that they do not fall during menstruation.

It will be necessary to postpone the procedure if an increased number of white blood cells are detected in the vaginal smear.

Treatment of cervical erosion

Plasm lifting has proven itself as an effective means to combat cervical erosion. It can be used together with conservative therapy and contribute to the replacement of a multilayer epithelium with a normal one.

But also PRP therapy is indicated to accelerate the processes of tissue regeneration after erosion treatment by cry destruction, electrocoagulation, radio wave surgery or chemical moxibustion. In such cases, the first plasma injection session is usually carried out 5-7 days before the cauterization procedure, and the next 12-14 days after it. With a large volume of removed tissues, up to 5 PRP therapy procedures may be required for effective restoration and epithelialization of the cervix, which are carried out at intervals of 2-4 weeks.

Plasm lifting can help eliminate changes that have resulted from a decrease in the hormone-producing activity of the ovaries as a result of the development of chronic inflammatory diseases, insufficient hormonal stimulation or surgical interventions, provided the appendages are preserved. In such situations, it is indicated to conduct the 1st session of PRP therapy for 3-4 months. At the same time, 2 procedures can be performed during the first month. Injections are planned for the 1st phase of the menstrual cycle, i.e. for the period immediately after the end of menstruation.

But if the reason for the decrease in estrogen levels was menopause, organ-bearing surgery, depleted ovarian syndrome and similar disorders, plasm lifting is not able to reverse these changes. But in such cases, it can be used to reduce the manifestations of vaginal atrophy, which is often observed in women with estrogen deficiency. At the same time, its implementation can be freely combined with hormone replacement therapy.

#### Infertility treatment

Plasm lifting is included in the complex of the therapeutic program for restoring fertility in:

Endocrine infertility in women with decreased estrogen levels, including those caused by hyperandrogenism and hyperprolactinemia;

Other forms of infertility, especially combined with chronic inflammatory processes in the organs of the reproductive system;

The use of assisted reproductive technologies, including IVF

All these pathologies prevent embryo implantation, lead to miscarriage, and inefficiency of assisted reproductive technologies. With the help of PRP therapy, it is possible to increase the effectiveness of other methods of treatment by restoring platelet growth factors to the normal thickness of the endometrium and thus significantly increase the likelihood of pregnancy.

The therapy is designed for 3-4 months, and its effectiveness is evaluated individually based on the results of laboratory tests, ultrasound and the patient's condition.

With age, women inevitably experience changes in the condition of the skin and mucous membranes. They do not bypass the urogenital tract either. This is accompanied by:

a decrease in the tone of the vaginal walls;

a feeling of dryness as a result of a decrease in the production of natural vaginal secretions;

By reducing the folding of the vaginal mucosa;

Decreased sensitivity and quality of sexual life;

Decreased libido, which often causes conflicts in the family

Women may encounter similar symptoms for the first time at the age of 35-40 years, and after the onset of menopause, atrophic changes in the urogenital tract are more or less present in all women. This is often accompanied by the appearance of complexes and mental disorders, which, in combination with clinical manifestations, sharply reduces the quality of a woman's life.

To eliminate them, plasma lifting is used in gynecology.

## **CONCLUSION**

In addition, it is also included in anti-aging programs aimed at improving the aesthetic attractiveness of female genitalia. With the help of 3-6 procedures, it is possible to achieve:

an increase in the tone of the muscles of the vagina and pelvic floor;  
reducing vaginal dryness, eliminating discomfort during intimacy;  
restoration of mucous membranes;  
improving the quality of sexual life;  
restoring libido and the brightness of orgasms.

Also, carrying out plasmolifting with atrophic changes leads to a reduction in the risk of colpitis and disorders of the vaginal microflora.

The aim of the study was to evaluate the effectiveness of the combined effect of ultrasonic cavitation irrigation of the uterine cavity and period dyspnea with hyposulfidic mud on the change in the level of proinflammatory cytokines in women after the interruption of an undeveloped pregnancy. 80 women were included in the study after the interruption of an undeveloped pregnancy in a period of up to 12 weeks.

In the complex of therapy, the patients underwent cavitation ultrasonic irrigation of the uterine cavity with 0.05% chlorhexidine solution in combination with the rectal administration of mud tampons and applications to the "panties" zone. Using the method of ultrasonic cavitation irrigation of the uterine cavity in combination with peloidotherapy in women with regressing pregnancy leads to a decrease in the level of primary mediators of the inflammatory response.

In the group using only standard therapy, no significant reduction was observed.

Despite numerous studies, the frequency of unexplained causes of miscarriage remains high (25-57%) and has no tendency to decrease, which indicates difficulties encountered in the management of patients with adverse pregnancy outcomes in the anamnesis.

The pathophysiology of miscarriage is diverse and includes fetal and maternal factors. Maternal factors include uterine pathology, endocrine disorders, immunological causes and thrombophilic disorders.

Each aborted pregnancy negatively affects the state of the reproductive system. Systems, which leads to repeated early reproductive losses. The risk of

spontaneous miscarriage (SV) and non-developing pregnancy (NB) increases significantly with the activation of the infectious process in a pregnant woman, the presence of immunodeficiency conditions, genetically determined thrombophilia, the development of auto- and alloimmune processes, violations of immunobiological gestational tolerance, endocrinopathies.

According to the concept generally accepted by obstetricians and gynecologists, in all cases of non-developing pregnancy it is necessary to diagnose "chronic endometritis".

The prevalence of chronic endometritis remains to date precisely unknown.

Nevertheless, a number of studies conducted, considering different stages of the pathogenesis of chronic endometritis (CE), led to a greater understanding of the mechanisms of development of endometrial disorders and their impact on the course of pregnancy. Since in the conditions of the constant presence of a damaging agent in the tissue, the final phase does not complete inflammation — regeneration, then tissue homeostasis is disrupted and a cascade of secondary damage is formed. Significant changes are observed in the immune system.

In patients with CE, changes in the following immunity parameters are observed: activation of cellular and humoral proinflammatory reactions, endometrial lymphocytic infiltration, local enlargement T-lymphocytes.

The immune system and non-specific defenses, experiencing constant antigenic stimulation, are unable to completely eliminate the infectious agent. Activation of T-lymphocytes and macrophages cannot to limit bacterial-viral colonization of the endometrium, against the background of the persistence of microorganisms, mononuclear phagocytes, natural killers synthesizing various pro— inflammatory cytokines (tumor necrosis factor — TNF, interleukins - IL-8, IL-6) are attracted to the focus of chronic inflammation.

Cytokines are the most important factors in the immunopathogenesis of inflammatory diseases, they are regulatory peptides produced by the cells of the body that regulate intercellular and intersystem interactions.

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