P3-IS-46 Illicit medication and pregnancy outcome: a regression analysis study

Iranian Institute for Health Sciences Research, Iran1, Reproductive Health Research center, Tehran University, Iran2
Sedigheh Sadat Tavafian1, Fatemeh ramezanzadeh1, Maryam Vahdaninia1

Objective: Consequences of fetal exposure to illicit medication during pregnancy have been of much interest to health professionals. The objective of this study was to investigate the effect of maternal illicit medication exposure on a set of adverse pregnancy outcomes measures in province of Tehran, Iran.

Materials & Methods: A cross-sectional study was conducted among women who ended their pregnancy in university hospitals in the Greater Tehran District. The study subjects were interviewed using a questionnaire covering demographic characteristics plus illicit medication during pregnancy, obstetric history and pregnancy outcomes. As for adverse fetal outcome measures, hospital records were consulted for data on low birth weight, small for gestational age (SGA) status, intrauterine growth retardation (IUGR), intrauterine fetal death (IUFD) and congenital anomalies, also for adverse maternal outcome data on abortion, placenta previa, premature rupture of membrane, premature delivery and abnormal delivery were collected. Each of fetal and maternal outcome, summarized in the form of a dichotomous variables, and were entered into a logistic regression model and its relationship to the above-mentioned factors was examined using the SPSS software package, version 13.

Result: A total of 4303 women were interviewed. The mean age of the respondents was 25.8 (SD = 5.4). Self-reported illicit medication using among women was 9.14%. The logistic regression analysis indicated that illicit medication using by pregnant women were predictors of fetal adverse outcomes with OR: 2.58, CI: 2.07-3.22 (P<0.001) and maternal adverse outcome with OR: 1.69, CI: 1.31-2.17 (P<0.001).

Conclusion: These findings indicate the adverse effect of illicit medication on pregnancy outcome and the need to develop effective educational program to improve maternal knowledge regarding complication of illicit medication during pregnancy.

P3-IS-47 Effect of French Maritime Pine Bark Extract on Endometriosis as Compared with Leuprorelin Acetate

Department of Obstetrics & Gynecology, Keiju Medical Center
Takafumi Kohama, Tomomi Matsubara

[Objective] To clarify the effect of Pycnogenol, French marine pine bark extract, on endometriosis. [Methods] 58 women attended this study. They were operated conservatively for endometriosis, surgically diagnosed with endometriosis. All patients were followed up before, at 4, 12, 24 and 48 weeks after starting treatment to check for their endometriosis – symptoms including the changes of CA-125 and estrogen levels (E2). 32 patients in Pycnogenol treatment group (P group) took 60mg Pycnogenol orally a day for 48 weeks. The 26 patients who received Gn-RHa therapy (G group) were treated in a current way. This study complied with the code of ethics of the World Medical Association. [Results] Treatment with Pycnogenol reduced slowly, but steadily all symptom scores. The treatment with Gn-RHa reduced scores more efficiently, however, 24 weeks after end of treatment scores signalize the reoccurrence of symptoms. No influence of treatment on menstrual cycles and on E2 was observed in P group. CA-125 decreased in both treatment groups, patients with smaller endometriomas responded better to treatment compared to patients with endometriomas of large size. In the G group, the lowering of CA-125 concentrations was by fare more pronounced, however, a clear rebound effect was to observe. [Conclusion] Pycnogenol is a therapeutic alternative to Gn-RHa in the treatment of endometriosis.

P3-IS-48 Age related changes in hemostatic parameters in healthy women

Department of Human Care, Hokusho University
Shigenori Suzuki

[Objective] There is growing evidence that a hypercoagulable state may be involved in the pathogenesis of thrombosis. To investigate the age-related changes in bloodcoagulation-parameters, fibrinolytic activity in healthy women, plasminogen-activator activity together with platelet capacity were carried out simultaneously. Menopause-related changes were also determined. [Methods] We have got informed consent. The population consisted of 98 consecutive healthy women aged 22-65 years (35 women 22 to 35 years, 30 women 36 to 50 years, premenopausal, 33 women 51 to 65 years, postmenopausal) recruited in a health check-up medical center. None were using oral contraceptives. Bloodcoagulation-parameters such as 1) Fibrinogen 2) TAT 3) Platelet-Hemostatic-Capacity (PHC) 4) Factor VII (FVII), FII-antigen (FVII-a) 4) Plasminogen-Activator were determined. [Results] 1) In premenopausal women, PHC was 174.7 ± 65.8 sec in follicular phase, decreasing to 135.6 ± 31.3 sec in the luteal phase. 2) A significant change in the FVII/FVIIa was 0.98 was observed in premenopausal women. 3) Fibrinolytic activity was lower in postmenopausal women. [Conclusion] 1) Low values of plasminogen activity values and raised Factor VII values suggest hypercoagulability in postmenopausal women. 2) Progesterone and estrogen appear to strongly influence the platelet hemostatic capacity.