

505 Immunohistological Study Of Endometriosis. T.Saikawa, M.Awaji, J.Saito, R.Miyazaki, Y.Yoshida, M.Suzuki, M.Takada, Dept. Obst. and Gynec., Juntendo Univ. Sch. of Med., Tokyo.

In recent years, the involvement of abnormalities in local immunity was a focus of attention in the pathophysiology of endometriosis. Against this background, the emergence of anti-phospholipid antibodies in the blood and ascites was pointed out, we have confirmed that such emergence does occur. In this study, we tried to local the anti-phospholipid antibody in tissues affected by endometriosis. We prepared our own Ig-G antibodies sensitive to anti cardiolipin antibody (BW5-1, BWS-24). We carried out fluorescent staining on HLA class I, class II, T cell, B cell, and M ϕ , while staining via indirect fluorescent antibody method. The result was that, 1) Antibodies sensitive to cardiolipin (BW5-1, BWS-24): In terms of endometriosis tissues, Ig-G antibody was found to be positive in the glandular tissue and not present in the interstitium. In the control, neither were stained, remaining negative. 2) HLA-class I and class II: class I: Staining in the positive glandular tissue and interstitium. class II: No staining was noted in the positive glandular tissue, and positivity was mainly confirmed to the interstitium. 3) T cell, B cell, and M ϕ : Positive in the interstitium and Negative in the glandular tissue.

506 Endometrial antibodies in serum and peritoneal fluid of endometriosis patients. M.Ishikawa, R.Onose, F.Hirahara, I.Gorai, H.Minaguchi, Dept. Obst. and Gynec., Yokohama City Univ. Sch. Med., Kanagawa.

Twenty-five women with endometriosis, 21 women without it and nine fertile men were included in this study for measuring antiendometrial antibody levels in serum and peritoneal fluid (PF) with ELISA and further for detecting endometrial antigens against which autoantibodies reacted with Western blotting. Ten of 15 serum samples (66.7%) with endometriosis were positive for antiendometrial antibody titer whereas only one of 14 serum samples (7.1%) without it were positive ($p < 0.001$). The Western blotting analysis revealed that 13 of 18 serum (72.2%), 14 of 18 serum (77.8%) and 15 of 18 serum (83.3%) samples from endometriosis patients had antibodies against endometrial antigens with MW of 26 kD, 34 kD and 42 kD, respectively. Six of 18 serum (33.3%), 8 of 18 serum (44.4%) and 8 of 18 serum (44.4%) samples from normal women reacted against the same endometrial antigens ($p < 0.05$). Other endometrial antigens (MW of 38 and 64 kD) were detected by the antibodies in serum from endometriosis patients as well as normal control women. Antibody reactivity in PF of endometriosis patients was present against endometrial antigens with MW of 26, 34, 38, 42 and 64 kD, while that in PF of normal control women was detected against MW of 38, 42 and 64 kDs. The serum of normal males was negative against any of these antigens.

507 Clinical significance of touch smear of products in cases of spontaneous abortion. S.Sasagawa, M.Ishii, Dept. Obst. and Gynec., Suibara-Go Hosp., Niigata.

Identification of fetal element is indispensable to rule out ectopic pregnancy in abortions. We observed trophoblasts cytologically which appeared in touch smears of products of 36 cases of spontaneous abortion and discussed the clinical significance of this procedure in the identification of fetal element. In 26 cases syncytiotrophoblast (ST) was observed. There was only one false negative case where chorionic villi were confirmed histologically but no trophoblast was identified. On the contrary, ST was detected in one of 10 cases where no chorionic villus was reported histologically. Cytological examination is more economical and less time consuming. These results may support that this procedure is of great clinical significance to rule out ectopic pregnancy in cases of abortion. Intermediate trophoblast (IT) was identified in 16 cases. The cellular and nuclear size of ITs varied and their chromatin was coarsely granular. In addition, one or more marked nucleoli were noted. All these cytological characteristics may be misleading and therefore much attention should be paid to the presence of ITs, clearly benign cells. Finally cytoplasmic vacuoles seemed to be one of the cytological features of trophoblasts in abortions.