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SUMMARY

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Peculiarities of climacteric myocardial dystrophies course in perimenopausal women with unbroken and changed reproductive function in the past history.

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Changes of the cardiovascular system in aging period can be one of basic factors, affecting female state of health and lifetime. Pains and heaviness in the heart domain, palpitation, changes of arterial pressure and pulse frequent complaints, produced by women in the period under study. In this period together with dyshormonal changes ordinary develops a so called climacteric myocardial dystrophy.

The aim of the present research is to study functioning peculiarities of female cardiovascular system perimenopausal period with unbroken and changed reproductive function in the past history. 60 women, aged 46 -55 y.o., had been under supervision. In comparative researches of women with broken reproductive function in the past history they used instrumental and general clinical methods of investigation. A climacteric myocardial dystrophy was exposed 2,1 times frequent, than in women with normal reproductive function. Besides, the clinical disease displays were severally more expressed in that group. Together with cardialgiae a considerable place in the clinical picture of the disease took other symptoms: palpitation without objective tachycardia, violation of sleep and lowering of ability to work, asthenic syndrome with expressed irritability, tearfulness or depression, periodic dizziness. Pains in heart were attended with changes on ECG: by automatism (sinus tachycardia, rarely bradycardia) function violations, conductivity (acceleration or slowing down antioventricular conductivity, bunch legs blockade Hiss), myocardium excitability (ventricular, atrium extrasystole). The most typical changes on ECG were the prong changes of T - wave in appearance of its inversion and amplitude lowering and interval S-T. They did not reveal definite localization changes of T - wave and S-T interval. There was no distinct parallelism between ECG displacements and intensity of pain syndrome.

Like so, damages of myocardium of non- coronogenic (dystrophic) origin, so called climacteric myocardial dystrophy, more frequent arises in women with broken reproductive function in the past history. It may be related with the fact that frequent inflammatory ovaries diseases, prolonged infertility, violations of ovarian-menstrual cycle, surgery performed on uteral appendages and etc. change nature of ovarian secretion, bring duration down ovarian activity, that as result indubitably lead to worsening of dyshormonal changes in menopause.