

MORPHOETIOLOGICAL ASPECTS OF THE CERVIX IN MENOPAUSAL WOMEN

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<https://doi.org/10.5281/zenodo.15478626>

Relevance. Menopause is a physiological process characterized by the cessation of menstruation and a decrease in hormone levels, primarily estrogens. These changes in a woman's body have a significant impact on the functioning of various organs and systems, including the reproductive system. One of the most important changes is the transformation of the cervix, which undergoes various morphological and functional changes. This article examines the main morphological aspects related to the cervix in women in menopause, with an emphasis on the impact of hormonal changes, as well as possible pathological processes that can develop during this period.

Keywords: cervix, epithelium, menopause, hormonal imbalance.

Hormonal changes during menopause and their impact on the cervix

Menopause is accompanied by a sharp decrease in estrogen levels, which has a direct impact on the tissues of the cervix. These hormones play a key role in maintaining the normal condition of the mucous membrane of the cervix, as well as in regulating its function.

After menopause, when estrogen levels drop significantly, there is a significant change in the structure and function of the cervix.

Hormonal therapy (HT) used to correct menopausal symptoms can have both positive and negative effects on the cervix. On the one hand, hormones help improve the condition of the mucous membrane, increase vaginal moisture, and reduce symptoms of atrophy. On the other hand, long-term use of hormonal therapy can increase the risk of developing dysplasia and other cervical diseases, so the need for HT requires an individual approach and strict medical supervision.

HT helps improve the condition of the cervical mucosa, and increases its moisture and elasticity. This helps relieve symptoms such as vaginal dryness and reduce the risk of atrophic vaginitis. Hormonal therapy may also have a positive effect on improving the condition of connective tissues and preventing the progression of fibrosis.

Epithelial atrophy: A decrease in estrogen levels causes the stratified squamous epithelium that covers the cervix to become thinner. The epithelium becomes less dense and loses its barrier function, making the organ more susceptible to infection and inflammation.

Decreased secretion: Estrogens maintain normal secretory activity of the cervical glands. During menopause, these glands atrophy, which leads to decreased discharge and dryness in the vagina and cervix.

Changes in vascular structure: Reduced estrogen levels affect the blood supply to the cervix. This can manifest itself as deterioration of microcirculation and increased susceptibility to various pathologies.

Morphological changes in the cervix in menopausal women

Changes in the structure of the cervix during menopause are pronounced:

Decreased collagen fiber density: Collagen is the main structural component of the connective tissues of the cervix. With age and a decrease in estrogen levels, there is a loss of elasticity and firmness of the tissues, which leads to a weakening of the cervix. This can cause it to prolapse and also disrupt its normal functioning.

Atrophy of the mucous membrane: Atrophy of the cervical mucosa is associated with loss of secretory activity and a decrease in the amount of glycogen in the cells. This reduces the protective functions of the epithelium and makes the cervix more susceptible to infections and injuries.

Fibrosis: Some women may experience thickening of the connective tissue of the cervix (fibrosis), which is also associated with hormonal changes.

Pathological changes in the cervix

During menopause, due to hormonal and morphological changes, the risk of developing various cervical diseases may increase. The most common pathologies include:

Cervical dysplasia: When estrogen levels drop significantly, cervical dysplasia may develop, where epithelial cells begin to develop abnormally. This condition requires careful monitoring, as it may precede the development of cancer.

Infectious diseases: Decreased protective functions of the cervical mucosa increase the risk of infectious diseases such as bacterial vaginosis, candidiasis and other sexually transmitted infections.

Atrophic vaginitis: The decrease in estrogen levels affects the vagina, leading to atrophic vaginitis. This disease can be accompanied by pain, itching, burning and other unpleasant symptoms, and also increases the risk of developing infections.

Effects of Hormonal Therapy on the Cervical Sclerosis

Hormone therapy (HT), widely used to relieve menopausal symptoms, affects the tissues of the cervix. The use of estrogens or combined hormonal therapy can slow down or partially stop the tissue atrophy processes. However, on the other hand, hormonal therapy can increase the risk of developing certain diseases, such as endometriosis or breast cancer, which requires careful monitoring of the patient's condition.

Research shows that long-term use of hormonal therapy can affect the development of cervical hyperplasia and dysplasia. Therefore, the need for HT use should be justified and controlled, and possible health risks should be taken into account.

Prevention and diagnostics of cervical diseases

The most important methods of prevention and diagnosis of cervical diseases in the postmenopausal period are regular gynecological examinations and screening tests, such as cytological examination (PAP test) and colposcopy. These methods allow timely detection of changes in the cells of the cervix, such as dysplasia or signs of infection.

Early detection of changes and proper treatment can prevent the development of more serious diseases, such as cervical cancer. For women in menopause, it is especially important to monitor the condition of the cervical mucosa and use methods aimed at maintaining the health of the reproductive system.

Regular examinations and screenings play a key role in the prevention of cervical diseases during menopause. The most effective diagnostic methods are:

Cytological examination (PAP test)

The Pap test is a standard test for early detection of precancerous changes in cervical cells. Women in menopause are recommended to have a Pap test every year or every two years, depending on the indication.

Colposcopy

Colposcopy allows for a detailed examination of the cervix using a special device called a colposcope. This method is used to detect pathologies such as dysplasia or cervical cancer.

Genetic testing and human papillomavirus (HPV) testing

HPV is a major risk factor for cervical cancer, and regular testing for it can help prevent and detect the disease early.

Conclusion

Morphoetiological changes in the cervix in menopausal women are an important aspect of gynecological practice. Changes caused by a decrease in estrogen levels lead to tissue atrophy, decreased elasticity, and increased susceptibility to infections and inflammations. These changes may be accompanied by the development of various pathologies, such as cervical dysplasia and infectious diseases. It is important to pay attention to regular examinations and, if necessary, to use hormonal therapy, which should be prescribed and monitored by a doctor.

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faolligini aniqlashni baholash. Tadqiqot materiallari. Og'irligi 2800-3000 g bo'lgan quyonlarda eksperimental tadqiqotlar o'tkazildi, quyidagi tadqiqotlar baholandi: qinning ph-metriyasi, qin shilliq qavatining jarohat maydonini ball orqali baholash, zamonaviy tezkor test Femoflor-16 yordamida qin mikrobiotsinozini baholash., sitologik va morfologik tadqiqotlar o'tkazildi. Natijalar. Kurkuvir yordamida vaginitni eksperimental davolashning farmakoterapiyasi qinda 2, 34 marta, bachadon bo'yni-2, 23 marta va uretrada-1, 91 marta sezilarli darajada kamayganligini ko'rsatdi. Xulosa. Vaginit va servisitlarni davolash uchun yangi Kurkuvir vaginal shamchalar tavsiya etiladi. Воспалительные заболевания женских половых органов-группа инфекционных заболеваний, которые составляют 60-65% у женщин в структуре гинекологии. Цель. Оценка определения противовоспалительной и репаративной активности новых вагинальных суппозиториев «Куркувир» на модели экспериментального вагинита, вызванного химическим агентом. Материалы и методы. Экспериментальные исследования проведены на кроликах самках массой 2800-3000 г. Оценивались следующие показатели: рН-метрия влагалища, полуколичественная оценка площади поражения слизистой оболочки влагалища в баллах, оценка микробиоциноза с помощью современного экспресс-теста Фемофлор-16, цитологические и морфологические данные. Результаты. Фармакотерапия экспериментального лечения вагинита с помощью Куркувир показал достоверное снижение, (1).

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