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SEARCH FOR MOLECULAR-GENETIC MARKERS OF RISK GERMINATION HYPERPLASTIC PROCESSES IN ENDOMETRY COMBINED WITH HYSTEROMYOMA

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Introduction: Germination hyperplastic processes belong to one of the basic forms of the proliferous endometrial disease and considers the most widespread pathology's mucousis membrane's female. The most important moment in the process of studying pathogenesis germination hyperplastic is combination with membrane's female, that's why benign proliferative diseases of women's reproductive system, belong to endometrial hyperplasia and hysteromyoma are have mutual molecular links of pathogenesis – the main reason why occurring often. Studies on the role of combinations molecular-genetic markers of cytokines in germination hyperplastic processes combined with hysteromyoma are part of this study.

Methods: Material for investigation was DNA of 250 patients with germination hyperplastic process and 248 women's population controls were dedicated of whole venous blood by method phenol-cloroform extraction. Genotyping of the studied loci was performed using polymerase chain reaction using standard oligonucleotide primers followed by analysis of gene polymorphism +36 A/G TNFR1, A/G I-TAC (rs4512021), -801G/A SDF1 TaqMan probe detection method using real-time. To study the role of combinations of molecular genetic markers of cytokines in the development, combined with uterine used software APSampler, using Monte Carlo Markov chains and Bayesian nonparametric statistics.

Results and Conclusions: Found that among 250 patients with GHP, uterine cancer occurred in 48.00% of the women (n = 120), respectively, in 52.00% of patients (n = 130) uterine fibroids absent. In conducting a comparative analysis of combinations of genetic variants of cytokines between the group of patients with GHP with uterine fibroids and population control was no statistically significant difference (p> 0.05). In turn, the established differences in the frequency of the genotype combinations +36 AG TNFR1 with alleles A and I-TAC-801G SDF1 between the group of patients with uterine fibroids without GHP and population control. The concentration of the combination of genetic variants in a population control was 36.13%, while in patients this figure is 58.27% (pcor = 0.05, OR = 2.47, 95% CI 1,59-3,84). Thus, we can conclude that a combination of genetic variants +36 AG TNFR1, A I-TAC and-801G SDF1 (OR = 2,47) is a risk factor for endometrial hyperplastic processes without fibroids.

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MORPHOMETRIC MEASUREMENTS OF SACRAL HIATUS IN ADULT HUMAN ANATOLIAN SACRA: ANATOMICAL BASIS FOR SUCCESSFUL CAUDAL EPIDURAL BLOCK

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Introduction: Caudal epidural block has been widely used for the treatment of lumbar spinal disorders and also for the management of chronic back pain. The aim of this study was to evaluate morphometric characteristics of the sacral hiatus in human Anatolian dry sacra and to describe the nearest bony landmarks to perform correct needle insertion and to prevent complication during caudal accesses.

Methods: Ten parameters were measured on twenty human dry sacra using digital caliper. Length of sacral hiatus was measured from its apex to the midpoint of its base, the other measured parameters were anteroposterior diameter