

## P310. Low-dose local hormonal therapy for VVA in postmenopausal women.

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Relevance. Up to 57% of postmenopausal women are concerned about the symptoms of vaginal atrophy (VA), such as dryness, burning, itching, vaginal discomfort, dyspareunia and spotting during sexual intercourse. The gold standard for the treatment of VA symptoms is the use of local hormone therapy (HT) by estrogens. At present, European countries tend to use low doses of local estrogens.

The aim of the study was to study the dynamics of atrophic changes in the vaginal mucosa against the background of low-dose regimens of local hormonal therapy in patients with postmenopausal VA.

Materials and methods. For the study, 44 patients with vaginal atrophy were selected. The duration of the follow-up was 3 months. Using block randomization method, the participants were divided into 2 groups of 22 people each. In the first group, a drug containing estriol in a dose of 0.5 mg was used, the second group used a preparation containing a lyophilized culture of lactobacilli L. casei rhamnosus Doderleini - 341 mg; estriol - 0.2 mg; progesterone - 2.0 mg.

Results: According to the analysis of D. Barlow complaints, a statistically significant decrease in symptom intensity was observed only in group B (group A: symptom intensity initially -  $2.05 \pm 1.3$ , after treatment 1.57  $\pm 1.3$  (p = 0.135), group B: initially -  $2.04 \pm 1.43$ , after treatment -  $0.95 \pm 1.32$  (p = 0.013)).

Against the background of the use of drugs in both groups, recovery of the vaginal epithelium was noted: a reduction in basal, parabasal, intermediate cells and a statistically significant increase in surface cells (p <0.0001). After 3 months of therapy in the observation groups, the high efficacy of the drugs according to the IMVE parameter was noted. In A group the IMVE averaged was  $76.8 \pm 12.9$  (p <0.0001), in group B -  $79.4 \pm 19.6$  (p <0.0001).

Conclusions:Local HT with estrogens is the most effective method of treating VA. Low-dose local HT contributed to an increase in IMVE, a decrease in pH, a decrease / elimination of vaginal symptoms in postmenopausal women with VA. The use of a combined preparation containing estriol, lactobacilli and progesterone was accompanied by a more pronounced decrease in the intensity of vaginal symptoms (p = 0.013) and an increase in the proportion of lactoflora from CBS compared with estriol monotherapy.

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