

P256. The frequency of clinical symptoms in a combination of genital tuberculosis and external genital endometriosis in women with infertility

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We analyzed 171 women at risk of genital tuberculosis (GT) with tubal peritoneal infertility after laparoscopy (mean age 32.1 ± 4.8 years). Patients were divided into 4 groups: 1 GT group (N=63), 2 GT group in combination with external genital endometriosis (EGE), (N=13), 3 group with EGE (N=11), 4 group without GT and without EGE (N=84). We also conducted a ranking of complaints from these patients in four groups.

The clinical characteristics of women with infertility and genital tuberculosis were associated with general intoxication manifested by pathological weakness, malaise, increased sweating (62%), prolonged subfebrile condition (33.3%), lymph node enlargement (23.8%), (all $p < 0.05$ for the compared groups). This group of women had frequent exacerbations of chronic salpingo-oophoritis (47.6%). Women with infertility and EGE often had dysmenorrhea (54.5%), bloating (45.4%). Women with tubal peritoneal infertility without GT and endometriosis had no complaints of weight loss, prolonged subfebrile condition and lymph node enlargement ($p < 0.05$).

We conducted a ranking of complaints.

The first group. The first ranking place - pathological weakness, fatigue, sweating $n=39$ (62%). The second ranking place: painful menstruation $n=33$ (52.4%). Third: frequent exacerbations of chronic salpingo-oophoritis $n=30$ (47.6%), periodic pains in the lower abdomen $n=28$ (44.4%), weight loss - 27 (42.8%). Four: subfebrile condition $n=21$ (33.3%), bloating (23.8%).

The second group. The first ranking place: pathological fatigue, weakness, increased sweating $n=8$ (61%). The second ranking place: painful menstruation $n=6$ (46.2%). Third: bloating, periodic pain in the lower abdomen (38.5%). The fourth: weight loss, long subfebrile condition (31%).

The third group. The first ranking place: painful menstruation (54.5%). Second rank: bloating (45.4%). Third: recurrent abdominal pain (36.3%). The fourth: weight loss, frequent exacerbations of salpingo-oophoritis (27.3%).

The fourth group. The first ranking place: frequent inflammation of the genitals 36 (42.8%), painful menstruation (42.8%). Second: recurrent abdominal pain $n=28$ (33%). Third: fatigue weakness $n=18$ (21%). Four: weight loss $n=16$ (19%).

Ranking of nonspecific clinical signs and complaints in women with infertility from the risk group of genital tuberculosis, will suggest endometriosis or genital tuberculosis or their combination / absence.