



Climacteric syndrome in perimenopausal women after covid-19

Резюме

The article presents the results of women in perimenopause with menopausal syndrome after suffering COVID-19, examined in Republican Specialized Scientific and Practical Center of Obstetrics and Gynecology Tashkent. The severity of the climacteric syndrome was determined by the Kupperman menopausal index, the level of hormonal status, biochemical blood test, and coagulogram were examined.

Контакты

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Introduction

The research data on COVID-19 showed that enduring symptoms may continue for weeks or months following an acute case of disease. Perimenopause is associated with hormonal changes and the onset of symptoms of estrogen deficiency which significantly reduce the quality of life. Perimenopausal symptoms includes hot flashes, fatigue, reduced stamina, headaches, dizziness, poor sleep, reduced concentration. In general, some symptoms of post-covid and symptoms of menopausal syndrome are very similar. In this regard, the question arises: how does the recent coronavirus infection affect perimenopause and the severity of menopausal syndrome?

Material and research methods

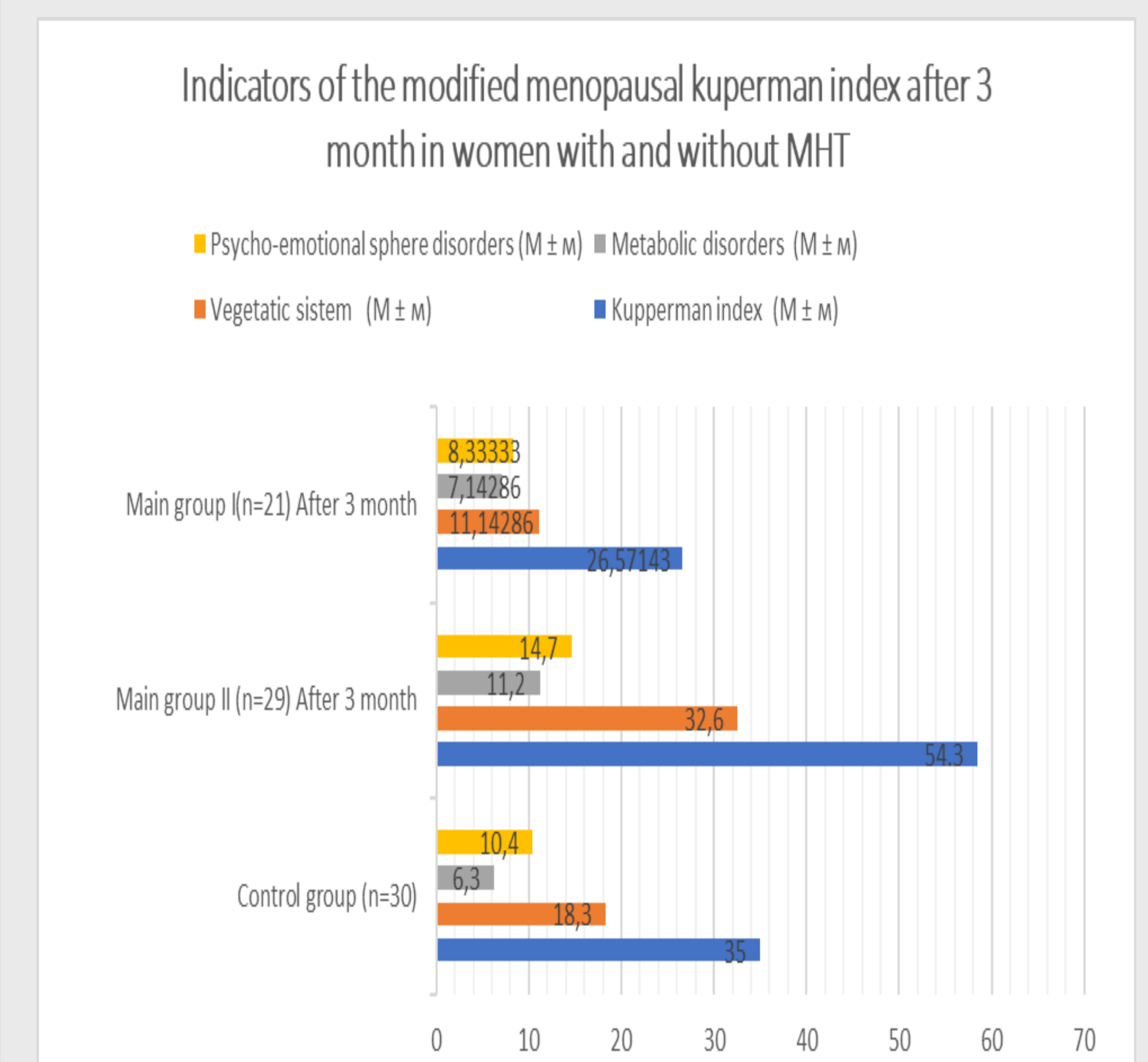
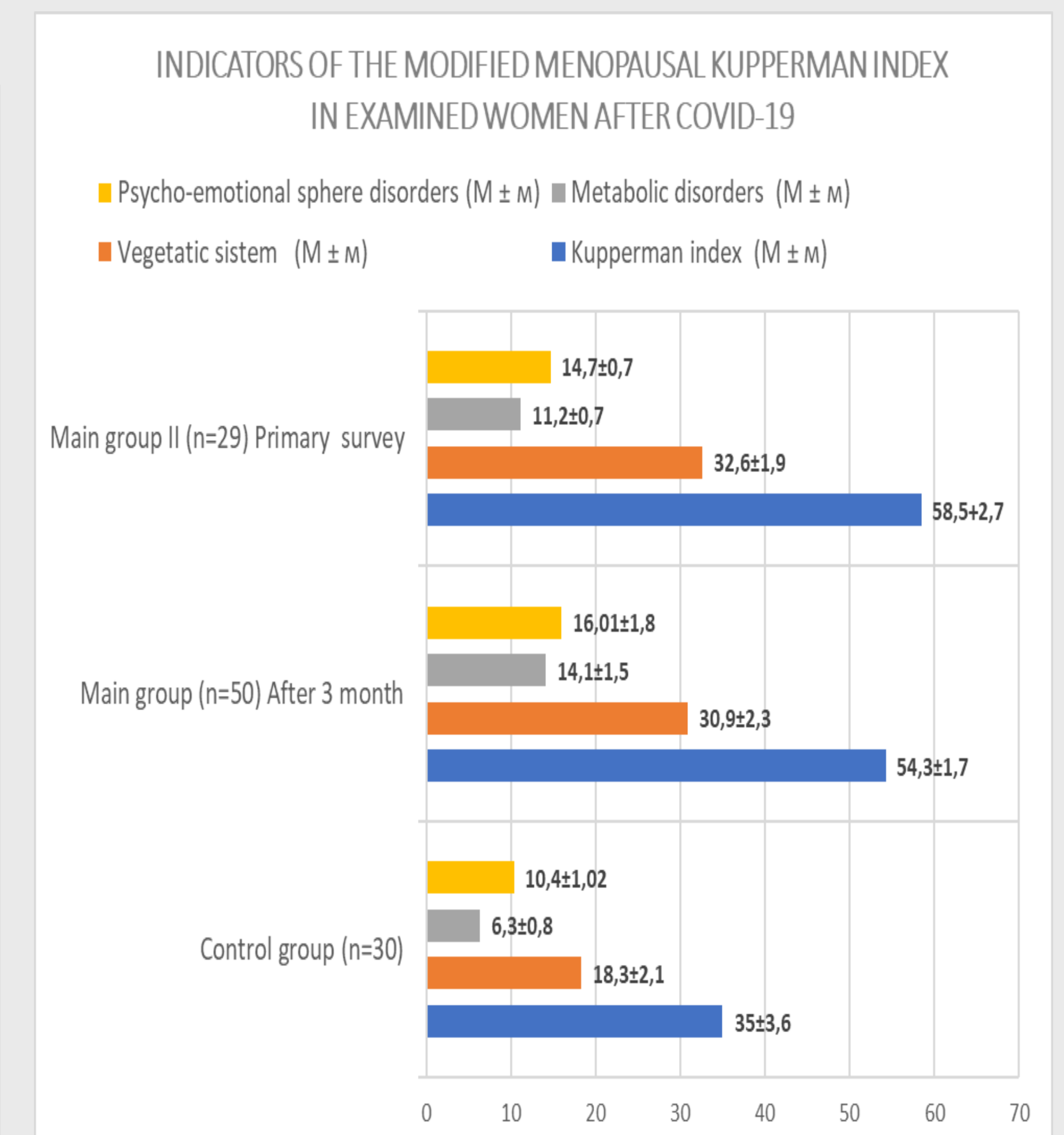
80 women aged 45 to 54 years were interviewed and examined for this study. Of this number 50 patients were treated for covid-19 at the (name) hospital 1-1,5 months prior to the study. Control group consisted of 30 women of the same age. At the time of admission, all women were interviewed using questionnaires of the general condition, the Kupperman index and self-reported depression syndrome (SDS). A general clinical examination was carried out. Laboratory blood tests included hemostaisogram and hormonal tests of the serum level of TSH, prolactin, estradiol, cortisol.

Post-covid patients were divided into two groups. 21 patients in group I were treated by menopausal hormone therapy (MHT) containing estradiol hemihydrate 1.58 mg transdermally in phase mode with 10 mg dydrogesterone orally. The remaining 29 women did not take MHT due to refusal or contraindications.

The comparative assessment of clinical and laboratory tests was carried out at the time of admission and after 3 months in these two groups.

Results

The main complaints of the studied women were fatigue, hot flashes, anxiety, depression, headache, dizziness, sleep in the lower extremities. The indicators of the Cooperman index, both individually and in total, were statistically significant higher in the group of women who had a coronavirus infection (figure 1). These indicators remained unchanged in the 2nd group of patients who did not receive MHT during the entire observation period (3 months). 46% of women reported disturbances to their menstrual cycles. Using of MHT in group 1 showed a significant decrease of Cooperman index and in the studied parameters both in relation to the control and to the initial data ($p < 0.001$). All patients treated by MHT noted significant improving the quality of life.



Conclusion:

Manifestation of climacteric symptoms may partly be due to the disturbance ovarian steroid hormone production and systemic inflammatory response due to coronavirus infection. Combined transdermal MHT should recommend perimenopausal women soon after the coronavirus infection unless cases of contraindications.