



Oral Presentation



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The effect of medroxyprogesterone acetate on the quality of life of women with heavy menstrual bleeding of endometrial origin: clinical trial

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Abstract

Introduction: The aim of this study was to investigate the efficacy and acceptability of long-term use of medroxyprogesterone acetate in treating heavy menstrual bleeding of endometrial origin (HMB).

Methods: In a pre-post trial, 44 women were allocated to long term medroxyprogesterone acetate treatment (for 3 consecutive cycles). Changes in duration and amount of bleeding, quality

of life and also hemoglobin and ferritin values were checked out and compared before and after treatment.

Results: Medroxyprogesterone acetate reduced mean PBLAC score from 220.15(±74.99) in control cycle to 108.81(±74.98) in third cycle ($p<0.0001$). Hemoglobin increased from 12.24(±0.89) to 13.21(±0.88)

g/dl and ferritin increased from 13.38(±6.81) to 30.85(±8.51) ng/dl ($p<0/0001$). Duration of menstrual bleeding decreased from 8.4(±1.47) days to 8.06(±1.53) days ($p=0.001$). Medroxyprogesterone acetate reduced mean MQ score from 66.46(±13.82) to 14.13(±7.98) ($p<0.0001$). SF-36 quality of life scores increased in all aspects (except for bodily pain) ($p<0.0001$).

Conclusion: Our results showed that long term use of MPA is an effective treatment for idiopathic menorrhagia in terms of menstrual blood loss, hematologic indices and quality of life ($p<0.05$) and observed complications are not significant. This makes long-term MPA a favored drug choice in idiopathic menorrhagia management in premenopausal women.

Key words: Medroxyprogesterone acetate, Quality of life, Higham chart, heavy menstrual bleeding