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Abstract Book

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Disclosure of Interest: None Declared

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WAYS OF COPING WITH STRESS AND GIVING SOCIAL SUPPORT FOR CAREGIVERS OF PATIENTS WITH GYNECOLOGIC CANCER

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Problem Statement: Cancer affects not only the patients but also their caregivers. The aim of this study was to determine whether ways of coping with it are related to social support given to caregivers of patients with gynecologic cancer, or not.

Methods: The descriptive study was performed in The Gynecological Oncology Department of Cerrahpasa Medical School of Istanbul University. Approval was obtained from the ethical board of the institution.

The study was performed as a cross-sectional design in a university hospital in Istanbul, Turkey, with 200 caregivers the data were collected via 3 questionnaires, the first with socio-demographic features, the second with multidimensional scale of perceived social support, and the third with the scale of ways of coping with stress.

Results: The characteristics of participants have been summarized in Table 1.

		n	%
Marital status	Unmarried	52	26.0
	Married	148	74.0
Educational status	Primary school and under	102	51.0
	Secondary school and over	98	49.0
Professional status	Employed	55	27.5
	Unemployed	145	72.5
Relative Level	First level	135	67.5
	Second level	65	32.5

Mean age rate and care duration of our participants were 41.06 (SD, 11.5) years, 14.0 (SD, 36.5) months, and 2.4 (SD, 2.7), respectively. The ECW and ICW mean scores of women were 30.13 (SD, 7.74) and 14.44 (SD, 7.06), and the total score of the MSPSS was 58.59 (SD, 20.46).

Conclusion: Social support is the basic of coping with stress for caregivers of patients with gynecologic cancer. In line with these findings, it is recommended that caregivers should be given a social support. Such caregiver should be backed up further in order to increase social support by family and friends, and governmental and non-governmental organizations.

Disclosure of Interest: None Declared

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ATOSIBAN: THE CLINICAL EXPERIENCE IN PREVENTION OF PRETERM DELIVERY

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Problem Statement: Preterm birth is one of the major causes of perinatal morbidity and mortality. India has the highest number (3.5 million) of preterm births in the world. Management of preterm labor thorough tocolysis is an established clinical strategy. Most of the tocolytics are not utero-specific; therefore, multi-organ fetomaternal side effects are expected. Atosiban, an oxytocin receptor antagonist, is a uterine specific tocolytic with more favorable safety profile. The current study was conducted to establish the efficacy and safety of atosiban (7.5 mg/ml) in Indian population

Methods: This was a prospective, open label, non comparative study conducted at Lokmanaya Tilak Municipal Medical College Mumbai, India. The study was performed in accordance with the Declaration of Helsinki, Good Clinical Practice

(GCP) guidelines and the protocol was approved by the institutional ethics committee of the hospital. Pregnant Indian women (n=110) between the gestational age of 24 to 34 weeks, presenting preterm labour were enrolled in the study. Atosiban was administered as intra venous (i.v.) infusion for 48 hrs. The treatment was initiated by an initial bolus dose (6.75mg), then continuous high dose infusion (300µg/min) for a period of 3 hours followed by 100µg/min up to 48 hrs. Efficacy was assessed by the proportion of women remaining undelivered for a period of 72 hrs and not requiring an alternative tocolytic within 48 hrs post administration of study medication. Safety and tolerability of atosiban was assessed in terms of maternal and fetal side effects. The study was registered with Clinical Trial Registry of India with the registration number: CTRI/2013/11/004166 [Registered on: 22/11/2013]

Results: Out of 110 patients enrolled in the study, 98 patients (89.09%) remained undelivered up to 72 hrs after completion of 48 hrs treatment phase. Ninety seven patients (88.18%) remained undelivered till the end of their hospital stay (upto 7 days). There were 7 patients with multiple birth pregnancy. Atosiban therapy was successful in delaying labor for 72 hrs in all the 7 patients who had multiple birth pregnancy. None of the patients required any alternative tocolytic agent or retreatment with atosiban throughout the study period. The study medication was well tolerated as no adverse events were observed throughout the study duration.

Conclusion: Atosiban, an oxytocin receptor antagonist, has proven to be an effective tocolytic drug in Indian pregnant females for the management of preterm labour with a better safety profile.

Disclosure of Interest: B. Dewan Employee of: Zuventus Healthcare Limited

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FOLIC ACID SUPPLEMENTATION IN THE MANAGEMENT OF MENOPAUSAL SYMPTOMS IN CANCER SURVIVORS AND HEALTHY POSTMENOPAUSAL WOMEN (FOAM TRIAL) – LAUNCHING A NEW RCT

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Problem Statement: Hot flushes are experienced by 75% of menopausal women. Oestrogen was shown to ameliorate hot flushes by reducing noradrenaline and increasing serotonin in the brain. Hormone replacement therapy (HRT), the first treatment option, causes concerns over possible increased risks particularly breast cancer. There is emerging evidence that folic acid supplementation ameliorates hot flushes by the same mechanism as oestrogen.

Methods: To explore this hypothesis, we designed a national multi-centre (8 centres in the UK), phase III, double-blind, placebo-controlled randomized to primarily compare the effect of 5 mg folic acid capsule daily for 12 weeks v placebo (randomized on 1:1 basis) in reducing the frequency and severity of hot flushes (using the validated Hot Flush Score) in postmenopausal women (both healthy and breast and endometrial cancer survivors). The secondary objectives are to study the efficacy on other menopausal symptoms (using Greene Climacteric Scale) and quality of life domains (using Utian Quality of Life Scale). The exploratory translational objectives are to assess the effect on the blood levels of serotonin and nor-adrenaline, and to measure the correlation between clinical improvement, serum folic acid levels and blood levels of serotonin and nor-adrenaline.

Results: Not available yet.

Conclusion: I would like to present as the chief investigator, for the first time in a scientific international meeting, the hypothesis, rationale, methodology of this important RCT. If folic acid supplementation is demonstrated to be effective, it will be a turning point in the clinical practice since it represents a cheap, safe, easily deliverable and well-tolerated alternative to the conventional HRT.

Disclosure of Interest: None Declared

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THE ASSOCIATIONS BETWEEN THE CODON 72 POLYMORPHISM OF TP53 GENE AND THE RISK OF ENDOMETRIOSIS: A COMPREHENSIVE META-ANALYSIS

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