

SUMMARY AND CONCLUSION

Dysfunctional uterine bleeding (D.U.B.) is an abnormal uterine bleeding in absence of an obvious organic cause, it is unassociated with pregnancy, inflammation or tumour. DUB is a disease which is diagnosed by exclusion. It is classified into primary and secondary :

Primary D.U.B; is defined as a dysfunction in hypothalamo-pituitary. Ovarian axis.

Secondary D.U.B; may be due to systemic disorders as hypothyroidism, clotting dysfunction, iatrogenic causes as intra uterine contraceptive device and hormonal contraception.

Medical treatment is the usual first line approach; non steroidal anti inflammatory drugs such as mefenamic acid or antifibrinolytic agents such as tranexamic acid will reduce blood loss by 25-50%.

The combined oral contraceptive pill may reduce blood loss by 50%. Cyclical progestins such as norethisterone decreases MBL by 80%. They have been widely used for the treatment of anovulatory cycles.

Medications which suppress ovarian function such as danazol or gonadotrophin releasing hormone analogues are highly effective in lessening or inhibiting menstrual blood loss but they cause amenorrhea in more than 50%.

If medical treatment fails, hysterectomy should be considered, though less invasive surgical methods of endometrial ablation are being developed and proved to be very effective in treatment of menorrhagia with success rate ranging from 70 – 97%. Hysterectomy is sometimes necessary to cure women with menorrhagia, but it may be inappropriate

in younger women and unnecessary in women near menopause. Progestogen releasing intra uterine system reduces menstrual blood loss by 90%. It's an effective treatment for menorrhagia and may be used as an alternative to hysterectomy. It releases levonorgestrel which causes atrophy of endometrial glands and it may also inhibits ovulation.

Indomethacin releasing intra uterine device developed recently for treatment of dysfunctional uterine bleeding without hysterectomy proved to be highly effective. It releases indomethacin intrauterine which inhibits the generation of prostaglandins and lightens the endometrial impairment caused by IUD. It is also an effective contraceptive method and reduces dyspareunia as it contains no threads. It's also very cheap and economic.

Conclusion:

The indomethacin releasing intrauterine contraceptive device is an effective and acceptable modality of treatment for menorrhagia, the menstrual alteration is well tolerated. Significant reduction of MBL results in an improvement of hemoglobin level .

Recommendations :

We recommend that further studies and more researches should be carried on the indomethacin releasing intrauterine contraceptive device to show more benefits and advantages over other methods of contraception.