GENETICAL DETERMINANT LINKED WITH ENDOMETRIAL HYPERPLASIA

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Genetical determinant linked with recurrence endometrial hyperplasia

The arm of our work was the investigation link between polymorphism Arg72Pro gene ?53 and (S\S) gene l-myc with endometrial hyperplasia.

Objects. Ninety women average age 49,7±8,3 y.o with uterine bleeding were recruited to research. Main group include 55 women with pathological evidenced endometrial hyperplasia. Controlled group include 35 women with uterine bleeding, but without endometrial pathological changing.

Methods. Polymorphism Arg72Pro gene ?53 and (S\S) gene l-myc were researched on endometrial samplings with Polymerase Link Reaction (PLR) with restrictive analysis and electrophoretic detection in agarose gel.

Results. Nine (16,4%) patients from main group have polymorphism Arg72Pro gene ?53, 8 patients of this 9 have recurrence of endometrial hyperplasia (1 - simple endometrial hyperplasia, 5- complex non-atypical, 2- complex atypical). Yule-Kendall factor 0,78 indicates strong link between polymorphism Arg72Pro gene ?53 and recurrence of endometrial hyperplasia. One patient only (2,9%) have this genetic variant in controlled group. Difference between groups is statistically reliable (?=0,04).

Six patients (10,9%) from main group have polymorphism (S\S) gene l-myc (2- complex nonatypical endometrial hyperplasia, 1- simple atypical, 3- complex atypical). All six patients with this genetic variant have recurrence endometrial hyperplasia. Yule-Kendall factor 0,99 indicates very strong link between polymorphism (S\S) gene l-myc and recurrence endometrial hyperplasia.

Conclusion. Polymorphism Arg72Pro gene ?53 and (S\S) gene l-myc is strictly linked with recurrence progress endometrial hyperplasia.