

BODY WEIGHT DEFICIENCY AND GYNECOLOGICAL DISEASES IN YOUNG WOMEN**Mamajanova Saida Otaxonovna**

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Abstract:The article presents the results of a cohort prospective study devoted to studying the prevalence of underweight, the frequency and structure of gynecological diseases in women 20-25 years old. It was found that the prevalence of underweight in the study cohort is 122.61%, the prevalence of gynecological diseases is 489.83%. Their structure is dominated by inflammatory diseases (47.9%), menstruation disorders (25.7%) and non-inflammatory diseases of the cervix (20.3%).

Keywords:underweight, women of reproductive age, gynecological diseases.

INTRODUCTION:At present, there is no doubt that the final result of shaping the level of women's reproductive health is multifactorial. One of the indicators important for its assessment and prognosis is body weight [1]. An analysis of the literature shows that in the last decade, along with obesity [2], the problem of body mass deficiency (BMD) has acquired particular interest for scientists and clinicians.

MATERIALS AND METHODS:The results of numerous studies [3] indicate the negative impact of BMD on the development of the reproductive system, the state of reproductive health and the implementation of the reproductive function of women, while a number of studies confirm the role of BMD as a medical and biological determinant of reproductive disorders. BMD is associated with the development of a number of obstetric complications [4] and gynecological diseases, including dysmenorrhea, menstruation disorders, and is a risk factor for endometriosis. At the same time, there is still no complete data on the relationship between gynecological diseases and BMD in women, as well as the possibility of predicting them. To develop a set of measures to improve the level of reproductive health of young women, an in-depth study of the patterns of the influence of BMD on the development of gynecological diseases is necessary, since body weight is one of the controllable medical and biological factors.

The purpose of this study was to study the prevalence of BMD and gynecological diseases among women 20-25 years old.

RESULTS AND DISCUSSION:To study the characteristics of the prevalence of gynecological diseases in women with BMD, two groups were formed from among students undergoing preventive examinations, selected using the "copy-pair" method based on age, place of residence, marital status and education. The study group consisted of women with BMD (n = 100). Inclusion criteria were age 20–25 years, BMI < 17.9. Exclusion criteria were refusal to be examined, a history of anorexia nervosa, and the use of special diets to reduce body weight. The control group (n = 100) was formed from women 20–25 years old with normal body weight (NBW).

Women in the study and control groups, after receiving their consent to participate in the study, were subjected to a comprehensive socio-psychological study through an anonymous questionnaire using the "Questionnaire for medical and social research of women of reproductive age", developed on the basis of a systematic approach to the study of reproductive health, according to its definition given by WHO and adapted for this study taking into account the objectives. After the respondent filled out the questionnaire, the author made adjustments and additions to the blocks of questions regarding information about the presence of gynecological diseases, aimed at obtaining the most complete information about the woman's health status. Additional data were obtained as a

result of an objective examination, a special gynecological examination, and also by copying from primary medical documentation. When diseases of the reproductive system were detected, women in the study and control groups were sent for a comprehensive outpatient or inpatient (as indicated) examination to treatment and preventive institutions included in the study.

The study showed that the prevalence of BMD among women 20–25 years old is 122.61%, i.e. it is observed in every eighth. This does not contradict the data of a number of studies, according to which among girls 15–18 years old, the detection rate of BMD ranges from 15.9–33.3% [3]. Such a wide range of fluctuations, in our opinion, is due to the lack of a unified approach to assessing body weight in adolescents and the use of standards for adults, with a lower limit of BMI = 18.5–19.0. When determining the lower limit of normal BMI = 18.5–24.9, recommended by WHO, the figure we obtained for women 20–25 years old would be 16.1%, with the lower limit - 19.0–30.4%.

When studying the distribution of identified BMD by severity, it was found that mild BMD (73.5%) was typical for the study cohort, moderate degree was detected in 19.5% of women in the study group, severe BMD in 7.0%. These data do not differ from the results of studies conducted in adolescents ($p < 0.05$) [6], and suggest that the prevalence of BMD in general and BMD of varying severity in women 15–25 years old does not depend on age ($p > 0.1$). According to some authors, the period of active weight gain in the population of modern teenage girls is shifted from prepuberty to the year of menarche or the year preceding it [5]. It is possible that in modern conditions the chronological completion of puberty does not yet imply the end of physical development and the completion of the formation of hormonal and metabolic processes important for the function of the reproductive system.

CONCLUSION: To summarize the study, we can conclude that low body weight is an important factor determining the level of reproductive health of women of optimal reproductive age. Typical for women 20–25 years old is mild BMD; it is detected in every eleventh woman (90.11%), while every thirtieth woman (3.3%) has moderate and severe BMD. These data do not differ from the results of studies conducted in a cohort of adolescents 15–18 years old, and suggest that the prevalence of BMD in general and BMD of varying severity in women 15–25 years old does not depend on age, being a relatively constant indicator.

In practical healthcare, the importance of BMD as a factor influencing the development of gynecological diseases has traditionally been underestimated. The study allows us to state that women aged 20–25 years are characterized by a high prevalence of gynecological diseases, with a predominance in their structure of inflammatory diseases (47.9%), menstrual disorders (25.7%) and non-inflammatory cervical diseases uterus (20.3%).

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