May Aid Surgical Planning

Endometriosis *from page 1*

When laparoscopy was used as the preferred procedure, TVS had a sensitivity of 57% and a specificity of 95% for diagnosing the absence or presence of endometriosis, reported lead author Dr. Tom Holland of the early pregnancy and gynecology assessment unit, University College London Hospitals.

The sensitivity and specificity for diagnosing absent to mild versus moderate to severe disease were 89% and 97%, and for absent to moderate versus severe endometriosis, 85% and 98%.

The positive and negative likelihood ratios for severe disease were 43.5 and 0.15.

"TVS performed by experienced operators has a high sensitivity and specificity at detecting severe pelvic endometriosis," Dr Holland said.

"TVS is a good method for triaging women with pelvic endometriosis for optimal surgical care," he added.

In a separate retrospective, observational study of 72 women (mean age 31 years) who had a bowel resection for presumed deep infiltrating endometriosis, preoperative TVS could detect deep infiltrating endometriosis of the rectosigmoid colon in 79% of cases, Dr. Dominique Van Schoubroeck reported during the same session at the meeting.

Deep endometriosis nodes were recorded by ultrasound as "yes" in 51 women, "possible" in 6, and "no" in 15 cases, with definite and possible cases considered abnormal. Histology reported deep nodes as present in 88% and absent in 12% of cases, said Dr. Van Schoubroeck of the obstetrics and gynecology unit, University Hospitals, Catholic University Leuven (Belgium).

She noted that accurate prediction of the extent of distal bowel involvement in cases of deep endometriosis could help in surgical planning.

Conventional laparoscopy will suffice if the endometriotic lesion only superficially involves the bowel wall, whereas deep infiltrating endometriosis into the muscularis necessitates bowel resection.

"It's important for all to get familiar with these images," she said.

The 79% sensitivity in the current study compares favorably with prior studies using TVS to identify rectosigmoid endometriosis, with sensitivities ranging from a low of 67% (Hum. Reprod. 2008;23:2452-7) to a high of 98% using 3-D TVS (Hum. Reprod. 2007;22:3092-7).

Dr. Holland and Dr. Van Schoubroeck disclosed no conflicts of interest. ■

OC/Metformin Combo Betters Lipids in PCOS

WASHINGTON — A combination of metformin and the oral contraceptive Ortho Tri-Cyclen improves lipid profiles more than does an oral contraceptive alone in patients with polycystic ovary syndrome, according to preliminary data from a small pilot study presented at the annual meeting of the Androgen Excess and PCOS Society.

In this randomized, double-blind, placebo-controlled study, Dr. Pauline Essah of Virginia Commonwealth University, Richmond, and colleagues assigned 17 women with PCOS to an OC plus 500 mg of metformin three times daily or an OC plus a placebo three times daily.

After 3 months, there was no difference between the two groups in weight, BMI, fasting insulin, or fasting glucose measurements. However, the OC-metformin group experienced a trend toward higher HDL cholesterol (55.6 vs. 47.6 mg/dL) and lower triglyceride levels (86.8 vs. 152.7 mg/dL) compared with the group that took OCs alone. The combination group also demonstrated a significant increase in acute insulin response to glucose.

Also, patients in the OC-metformin group "went from 4.7% to 9.4% in flow-mediated dilatation," a significant improvement, while patients in the OC-alone group did not experience a significant change, Dr. Essah said. "The combination seems to be more beneficial than OC monotherapy because it enhances beta-cell function and endothelial function, and improvements in these factors may attenuate the cardiovascular risks from OCs." The study was funded by the National Institutes of Health. Dr. Essah said she had no financial conflicts of interest to report.

—Joyce Frieden