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پانزدهمین کنگره بین‌المللی زنان و مامایی ایران

۱۶ تا ۱۹ مهر ماه ۱۳۹۸
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Dear colleagues
First of all I would like to say many thanks to you because of your support and high-level participation in our incoming international Iranian OB& GYN Congress. Again I would like to thank your active share during congress period with your comments, experiences and ideas for the next coming congress. Once again I appreciate your cooperation and admire you.

Prof. Abdolrasoul Akbarian
Congress President
Message of the General Secretary of congress

As secretary of congress invite you to attend the 15th international Congress of obstetrics and gynecology, which will be held in Beautiful city of Tehran from 8 to 11 October 2019, at the International Razi convention halls. The Congress will be chaired by many Iranian and international distinguished Professors who are working in the areas of Obstetrics and Fetal Medicine, Oncology, Surgery, Gynecology, Endoscopy, Endocrinology and Reproductive Medicine. The Congress will present the latest developments in diagnostic procedures, clinical practices, medical and surgical therapies as well as preventive strategies – all of which are fundamental to obstetrical and gynecological care. Minimally-invasive and surgical methods will also be discussed in terms of their application in both benign and malignant pelvic diseases.

The Congress will review new strategies in the most important areas of reproductive endocrinology, including Polycystic Ovary Syndrome, Premature Ovarian Insufficiency, Adverse Uterine Bleeding, the Menopause and Healthy Aging. The correction of pelvic organ prolapse, and the medical or surgical approach to organic pathologies – such as uterine myoma, adenomyosis, and endometriosis – will also be discussed, together with new developments in gynecological endoscopy and ultrasound technologies.

Finally, the most important advancements in preventive obstetric care will be presented on and discussed, ensuring early diagnosis and personalized therapies in line with maternal and fetal needs, and reducing the incidence of maternal and fetal diseases.

With this in mind, I invite all of you to join us in Tehran.

Prof. Abolfazl Mehdizadeh Kashi
Congress General Secretary
Message of the Scientific Secretary of congress

Dear Colleagues
It is my great honor and pleasure to invite you to join us at The 15th International Congress of Obstetrics and Gynecology, to be held in Tehran on October, 2019.
The Scientific Program Committee is planning more than 50 scientific sessions to enhance your practice, an innovative and original program to present, share, debate, discuss and concur on the edge science and research in obstetrics and gynecology from around the world.
The Congress will have distinguished faculty of global leaders. It will provide an exciting opportunity for you to become involved and share your original research through the call for abstracts, clinical cases, and late-breaking science. The 15th ICOG Congress also includes corporate exhibits displaying the newest products and services in the field industry.
We welcome you to join the congress in Tehran during the fall of 2019 for the largest and most influential international obstetrics and gynecology event. The 15th International Congress of Obstetrics and Gynecology is the “Excellent to attend” event for 2019.

Yours truly,
Prof. Shahla Chaichian
Congress Scientific Secretary
Guest Speakers

Prof. Farhad Nezhat    Prof. Alireza Shamshirsaz

Prof. Christhard Kohler    Prof. Shohreh Beski

Prof. Osama Shawki    Prof. Amir Shamshirsaz

Prof. Hooman Soleymani Majd    Prof. Avideh Nejad

Prof. Khashayar shakiba    Ms. Nimisha Goswami
Congress Organization

Executive committee

- Dr. Abdolrasoul Akbarian; President of congress
- Dr. Abolfazl Mehdizadeh; General Secretary of congress
- Dr. Shahla Chaichian; Scientific Secretary of congress
- Dr. Safieh Shahriari Afshar; In charge of scientific centers and universities affairs
- Dr. Ameneh Sadat Haghgoo; In charge of international affairs
- Kouros Jafari; In charge of Exhibition affairs
- Bahar Mofakham; Informatics Expert
- Amir Reza Fard, Sepideh Shojaei; Experts of Congress

Scientific Committee

Scientific Committee of Gynecologic Endocrinology
Dr. Abdolrasoul Akbarian
Dr. Alireza Esteghamati
Dr. Farzad Hadaegh
Dr. Maryam Razaghi azar
Dr. Ebrahim Khamseh

Dr. Nasim Sanjari
Dr. Hadi Shahrad bejestani
Dr. Fereydoun Azizi
Dr. Manouchehr Nakhjavani

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Dr. Laleh Eslamian
Dr. Hamidreza Akrami
Dr. Maryam Pourreza
Dr. Fatemeh Tara
Dr. Ashrafsaddat Jamal
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Dr. Homera Vafaee
Dr. Solmaz Piri
Dr. Maryam Kashanian.

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Dr. Mohammadrezae Akbari
Dr. Soheyla Aminimoghadam
Dr. Moslem Bahadori
Dr. Nader Behtash
Dr. Taghi Razi
Dr. Jahangir Rafat
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Dr. Mitra Modares Gilani  
Dr. Azamsaadat Mosavi  
Dr. Alireza Nekoufar.

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Dear colleagues
Thank you very much for your astonishing efforts with contribution to improving the scientific level of the 15th International Congress on Obstetrics & Gynecology and by sending us numerous manuscripts.
It is to be announced that all rights and responsibilities of accuracy and originality of all contents of the articles belong to the authors and not the congress executive committee.

Yours truly,
Dr. Shahla Chaichian
Congress Scientific Secretary

“Illnesses are a sign of disrespectful behavior towards nature,” Dr. Gholamali Beski

Regular readers will note that there has been a change in format, from one page per author, to each article being followed immediately by another, sharing the same pages at times. This has been done at the discretion of the Congress Secretariat office as a conscious effort to lessen the environmental impact of the magazine.

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**Cell-free DNA-based FetoQuant Test A Noninvasive Prenatal Diagnosis of Fetal Trisomy 13, 18 and 21 Using Next Generation Sequencing Technology**

Ali Ahani¹, Hamed Vaziri Nasab²
1. Mendel Genetics and Pathobiology Laboratory, Iran, Tehran
2. Mendel Genetics and Pathobiology Laboratory, Iran, Tehran

**Backgrounds:** Non-invasive prenatal testing (NIPT) is frequently used for prenatal diagnosis of trisomies. Recent NIPT are mainly based on next-generation sequencing (NGS) technology. We aimed to develop a screening test for common aneuploidy using cell-free (cfDNA) from maternal blood using next generation sequencing (NGS).

**Material and method:** The 779 blood samples of Iranian pregnant women at higher risk of trisomies used to evaluate the FetoQuant performance in detection of common trisomies 13, 18, and 21. NGS by the Ion ProtonTM platform was used to sequence the maternal cfDNA of plasma. Samples with fetal fraction ≥ 4 were included. Z-score was calculated and an algorithm was developed to determine the likelihood of trisomy, using DNA fragment counts. The results of FetoTest were verified by either amniocentesis or chorionic villus sampling (CVS). Beside the above mentioned samples, we included 5872 unknown pregnant sample who referred for NIPT analysis and pregnancy out comes has been followed.

**Result:** Analysis of FetoTest performance at z-score ≥ 4 revealed that for trisomies 13, 18 and 21, sensitivity were 100%, 100% and 99.3%, specificity were, 99.98%, 99.97% and 99.77%, accuracy were, 99.98%, 99.97% and 99.77%, positive predictive value (PPV) were, 96.15%, 91.3% and 90.97% and negative predictive value (NPV) were, 100%, 100% and 99.98%, respectively.

**Conclusion:** The data indicated that the FetoQuant test could be suggested as a robust non-invasive test for screening of fetal trisomies 13, 18, and 21 using maternal blood in early gestational weeks.

---

**Role of 3D Ultrasound Scan in Diagnosis of Uterine Cavity Abnormalities in an Infertile Population A Cross-Sectional Study**

Firoozeh Ahmadi
Royan Institute Department of Reproductive Imaging Reproductive Biomedicine Research Center Royan Institute for Reproductive Biomedicine ACECR Tehran Iran

**Backgrounds:** To evaluate the accuracy of three-dimensional transvaginal sonography (3D-TVS) in diagnosis of uterine cavity abnormalities among infertile women.

**Material and method:** This was a cross-sectional study performed in Royan Institute, Tehran, between April 2012 and March 2013. All infertile women who were booked for hysteroscopy during this period of time were recruited in the study. Patients
underwent preoperative 3D-TVS by an expert radiologist and hysteroscopy was performed by an expert surgeon. Patient's history, 3D-TVS findings and hysteroscopy results were assessed to collect data. Agreement between ultrasound findings & hysteroscopy results, sensitivity, specificity, positive & negative predictive values, and accuracy of 3D-TVS in diagnosis of congenital and acquired uterine disorders were calculated by SPSS18 software using Cross-tabs, Kappa test, and other statistic analysis.

**Result:** Totally, 153 women were recruited in the investigation. Patients aged 30.78±4.79 years in average and the duration of infertility was 4.2±2.91 years among them. Overall diagnostic accuracy of 3D TVS in diagnosis of congenital uterine anomalies and acquired lesions was calculated 92.8% with Kappa value of 82.3, indicating a good agreement between ultrasound findings and hysteroscopy results. Sensitivity, specificity, positive & negative predictive values of 3D TVS in diagnosis of uterine disorders was calculated 94.55%, 88.37%, 95.41%, and 86.36% respectively.

**Conclusion:** Our study demonstrated that 3D TVS had a good reliable agreement with hysteroscopy in the detection of uterine lesions among infertile women. Therefore, as an accurate cost-effective outpatient tool, it can decrease the number of unnecessary diagnostic hysteroscopies.

---

**The Effect of Exercise During Pregnancy in Prevention of Gestational Hypertension and Preeclampsia**

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Faculty of Nursing & Midwifery, Islamic Azad university, Karaj Branch, Karaj, Iran
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**Backgrounds:** Gestational hypertension and preeclampsia are still the most important complications of pregnancy, which are associated with significant maternal and neonatal mortality and morbidity. Despite many efforts to find prevention methods, it is still not known yet. Some studies show that physical activity during pregnancy prevent or modify the severity of hypertension and preeclampsia. The purpose of this study is to evaluate the effect of pregnancy exercises in preventing these complications.

**Material and method:** The present study is a randomized single-blind clinical trial in which 400 primiparous mothers were randomly divided into two groups of 200 participants in the experimental and control groups from 18-22wk in gestation. The intervention group was assigned to exercise classes and an opportunity for delivery in the health centers of Alborz province. With the aid of the instructor twice a week, each time for 45 minutes, there were 8 sessions, which were first taught in oral form and then in practice including respiratory pattern, stretching exercises and relaxation. The
control group of pregnant mothers were eligible to study in health centers of Alborz Province for routine pregnancy care. In both groups, after receiving the written consent, the demographic questionnaire was completed by the researcher. Before the delivery, both groups were checked in each session. The weight and blood pressure were measured in each visit. Then, both groups were compared for the incidence of gestational hypertension and preeclampsia. The data were analyzed statistically by Spss 17 using T-test and Kolmogorov-Smirnov at a significant level of 5%.

**Result:** In the control group after 8 sessions 2 mothers were diagnosed with gestational hypertension while in the experimental group no one was diagnosed. There was no significant difference between the two groups (P =0/1). In control group, 10 patients had preeclampsia at the end of study but in experimental group only one preeclampsia was diagnosed. There was a significant difference between two groups (P = 0.02).

**Conclusion:** Exercises during pregnancy as a simple, practical and low cost method can be considered for the prevention of preeclampsia and its maternal and fetal complications. Of course, the effects of this method on gestational hypertension requires further extensive studies in future.

---

**Quality of Life Changes in Iranian Patients Undergoing Female-to-Male Transsexual Surgery: A Prospective Study**

Shahla Chaichian 1, Meisam Akhlaghdoust 2*

1.Minimally Invasive Techniques Research Center in Women, Tehran Medical Sciences Branch, Islamic Azad University, Tehran, Iran
2.Pars Advanced and Minimally Invasive Medical Manners Research Center, Pars Hospital, Iran University of Medical Sciences, Tehran, Iran

**Background:** Gender identity disorder (GID) is associated with various adverse health outcomes as well as psychiatric problems. Quality of life (QOL) in patients after surgery is an important issue, as some cases report dissatisfaction and regret after surgery. The present study compared QOL in female-to-male (FTM) GID patients before and after gender reassignment surgery (GRS) in an Iranian population. In the present study, 42 natal female patients with Gender Disorder diagnosis, who were referred to the Fertility Research Center of Tehran University of Medical Sciences for GRS from December 2014 to December 2015, were prospectively recruited.

**Methods:** The demographic characteristics, including age, body mass index (BMI), occupational and marital status, educational level, and family support were recorded. Then, participants were asked to complete the Persian version of the 36-Item Short Form Health Survey (SF-36) questionnaire under supervision of the researcher, once at baseline and once 6 months after surgery.

**Results:** The changes in SF-36 scores and association with the demographic variables were then evaluated using SPSS 16 at significance level of 0.05. Mean age of patients was 34.17 ± 5.58 years with a mean BMI of 43.14 ± 6.91 kg/m2. Most were single
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(54.8%), had primary school education (50.5%), and acceptable family support (59.5%). Total mean score of QOL significantly improved from 26.43±6.81 to 37.52 ± 8.67 (P < 0.001), 6 months after surgery and also in all domains (P < 0.001), although the increase in emotional problem was not statistically significant (P = 0.05).

Conclusion: In conclusion, as the results of the present study highlight, FTM GD patients have a low QOL before surgery that is significantly improved after surgery.

Keywords: Gender identity, Quality of Life, Sex reassignment surgery, Transgender persons.

Introducing a New Device Fetal Head Station Meter and Comparative the Efficiency of This Device with Vaginal Examination

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Backgrounds: Evaluation of the fetal head station in the active phase of labor is performed by repeated vaginal examinations. In this study, the efficacy of the new station meter device was evaluated in comparison with the traditional vaginal examination method.

Material and method: In this study women who had inclusion criteria participated and new station meter device placed in a sterile condition over the head of the fetus and stayed on until the vaginal delivery. At each time, the need to determine the station of the fetal head was initially determined by vaginal examination and at the same time, the researcher determined the station by using the new device. The comparison between the two determined station at the same time and their correlation was done. Also, the number of gloves used and the number of vaginal examinations and satisfaction of the professor, resident, midwife and participants as well as fever or postpartum infection were studied up to 10 days after delivery.

Result: 32 mothers were enrolled in the active phase of labor with dilatation of at least 4 cm and a maximum of 10 (average 6.5 cm) cm and effacement from 40% to 100% (mean 60%). Comparison of the station of the fetal head in two methods of using vaginal examination and fetal head station device showed that there is correlation between these two methods and the rate of P in all cases, 6 positions of the head of the fetus (from position -3 to +2 position) was significant. (p<0.05). The gloves used for vaginal examination varied by an average of 2.9 ± 5.1 and between 1 and 16, respectively. The number of vaginal examinations averaged 5 times and between 1 to 10 times. Residents, professors, midwives and participants were generally satisfied with using this device for determining the station of fetal head in general. None of the participants showed fever or postpartum infection until 10 days after delivery. P less than 0.05 was considered as significant.

Conclusion: New station meter device is a simple and accurate device for determining station in active phase of labor. By using this device reduces costs by decrease the
number of gloves used and number of vaginal examinations which makes the mother satisfied. So residents, professors, midwives were generally satisfied with using this new device for determining the station of fetal head.

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**The Effects of Magnesium and Zinc co-supplementation on Clinical Symptoms Hormonal and Lipid Profiles and Gene Expression Related to Metabolic Profiles in Polycystic Ovary Syndrome**

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**Backgrounds**: Objective: This study was conducted to determine the impacts of magnesium and zinc co-supplementation on clinical symptoms, hormonal and lipid profiles, and gene expression related to metabolic profiles in women with polycystic ovary syndrome (PCOS).

**Material and method**: This randomized double-blind, placebo-controlled trial was performed among 56 women with PCOS, aged 18-40 years old. Participants were randomly assigned into two groups to take either 250 mg magnesium oxide plus 220 mg zinc sulfate supplements (n=28) or placebo (n=28) per day for 12 weeks.

**Results**: Magnesium and zinc co-supplementation significantly reduced fasting plasma glucose (β -6.95 mg/dL; 95% CI, -9.31, 4.59; P<0.001), serum insulin (β -1.73 µIU/mL; 95% CI, -2.69, -0.78; P=0.001), insulin resistance (β -0.41; 95% CI, -0.64, -0.18; P=0.001), total testosterone levels (β -0.35; 95% CI, -0.60, -0.10; P=0.006) and hirsutism (β -0.75; 95% CI, -1.11, -0.38; P<0.001), and significantly increased insulin sensitivity (β 0.005; 95% CI, 0.001, 0.009; P=0.01). In addition, taking magnesium plus zinc supplements were associated with a significant reduction in triglycerides (β -9.07 mg/dL; 95% CI, -16.05, -2.08; P=0.01) and total-/HDL-cholesterol ratio (β -0.41; 95% CI, -0.66, -0.17; P=0.001), and a significant increase in HDL-cholesterol levels (β 3.74 mg/dL; 95% CI, 1.94, 5.55; P<0.001). Moreover, co-supplementation upregulated gene expression of peroxisome proliferator-activated receptor gamma (P=0.02) and low-density lipoprotein receptor (P=0.02).

**Conclusions**: Overall, magnesium and zinc co-supplementation, compared with the placebo, for 12 weeks among PCOS women had beneficial effects on glucose and lipid metabolism.
The Effects of Vitamin D Supplementation on Metabolic Profiles and Pregnancy Outcomes in Patients with Gestational Diabetes: a Systematic Review

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Although several studies have investigated the effect of vitamin D supplementation on glucose homeostasis parameters and lipid profiles, and pregnancy outcomes in gestational diabetes (GDM), findings are inconsistent. GDM is defined as glucose intolerance and insulin resistance with onset or recognition during pregnancy. GDM affects approximately 1-14% of pregnancies depending on the diagnostic criteria, gestational age and characteristics of the study population. Poor maternal glycemic control will result in maternal short- and long-term adverse outcomes, including subsequent development of type 2 diabetes mellitus (T2DM), gestational hypertension, pre-eclampsia, cesarean delivery, macrosomia, birth defects and subsequent adolescent and childhood overweight. Furthermore, lipid disorders in GDM are associated with T2DM, endothelial dysfunction, atherosclerosis, and intrauterine growth retardation.

Recently, increasing effort has been devoted to identify dietary factors that can delay the progression of GDM. While the classic essential nutrients have been widely studied in this regard, there is also great interest in the evaluation of vitamin D. Women with GDM might be more likely to have vitamin D deficiency compared with women with normal glucose tolerance. This status may occur due to insufficient intake of vitamin D, ambient temperature and physical activity, which in turn may affect maternal physiology, and fetal and placental development at the cellular level and contribute to the development of GDM. Thus, it is reasonable to postulate that, vitamin D supplementation may have beneficial effects on diabetes biomarkers including fasting insulin and blood glucose, insulin resistance, as well as lipid profiles and pregnancy outcomes. Few studies have reported that vitamin D administration among GDM subjects resulted in improved glucose homeostasis parameters and few lipid profiles, and pregnancy outcomes. However, others have demonstrated not only no significant effect of vitamin D supplementation on glucose metabolism and lipid fractions, and pregnancy outcomes. These discrepancies might be related to the differences of studies in terms of population and duration of intervention. Despite several randomized controlled trials (RCTs). This systematic review was conducted to summarize the available literature to evaluate the effect of vitamin D supplementation on metabolic profiles and pregnancy outcomes in GDM subjects.

Keywords: Vitamin D, glucose homeostasis, lipid profiles
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Massive Postpartum Hemorrhage Following Inner Myometrial Laceration: A Case Report

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Introduction: Postpartum hemorrhage has many different etiologies. The aim of this report is to introduce a case of massive postpartum hemorrhage following inner myometrial laceration.

Case presentation: A 36-year-old woman G4 P3 had spontaneous normal vaginal delivery. A 3650 gr infant was born, immediately massive postpartum hemorrhage occurred. After evaluation of different etiologies of postpartum hemorrhage, laparotomy was performed. An inner myometrial laceration was found in the lower uterine segment. It was repaired and hemorrhage was controlled.

Conclusion: Uterotonic agents could increase the intrauterine pressure and make inner myometrial laceration which cause the massive postpartum hemorrhage. As the differential diagnosis of postpartum hemorrhage, inner myometrial laceration must be considered in this situation. Early evaluation and repair of inner myometrial laceration could control the postpartum hemorrhage without hysterectomy.

Keywords: Postpartum hemorrhage, Laceration, Uterine rupture, Transfusion

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Backgrounds: Preterm birth refers to a delivery that occurs before 37 weeks and is relatively common, occurring in 5 to 18 percent of births worldwide.

Material and method: Ideally, identification of modifiable and nonmodifiable risk factors for PTB before conception or early in pregnancy will lead to interventions that help prevent this complication. However, few interventions have been proven to prolong pregnancy in women at risk. This goal has been elusive for several reasons: two-thirds of PTBs occur among women with no risk factors, causality has been difficult to prove.

Result: Early signs and symptoms of labor are nonspecific and include: menstrual-like cramping; mild, irregular contractions; low back ache; pressure sensation in the vagina; vaginal discharge of mucus, which may be clear, pink, or slightly bloody (ie, mucus plug, bloody show). The diagnosis of preterm labor is based on clinical criteria of regular painful uterine contractions accompanied by cervical dilation and/or effacement. Uterine contractions (≥4 every 20 minutes or ≥8 in 60 minutes)
and Cervical dilation ≥3 cm or Cervical length < 20 mm on transvaginal ultrasound or Cervical length 20 to <30 mm on transvaginal ultrasound and positive fetal fibronectin (fFN).

**Conclusion:** For women with a history of sPTB, progesterone supplementation reduces the risk of recurrent sPTB by approximately 30 percent. Short cervical length on transvaginal ultrasound examination between 18 and 24 weeks of gestation in the current pregnancy is a risk factor for PTB and is the basis for screening for a short cervix in the midtrimester. For women with no previous history of sPTB who develop a short cervix, progesterone supplementation may prolong gestation. For women with a history of sPTB who develop a short cervix despite progesterone supplementation, placement of a cerclage may prolong gestation. Interventions that have general health benefits and may reduce risk of PTB include smoking cessation, treatment of drug misuse, treatment of asymptomatic bacteriuria, and maintenance of a normal body mass index. Avoiding an interpregnancy interval of less than six months, and ideally less than 12 months, may reduce a woman’s risk for sPTB. Singleton gestations are less likely to deliver preterm than multiple gestations. Prevention and reduction of multifetal gestations, particularly high-order multifetal gestations, can reduce the risk of preterm birth. No biomarker performs well as a screening test for predicting spontaneous preterm birth in asymptomatic low risk women.

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**The Prognostic Value of Preoperative Serum CA125 in Endometrioid Endometrial Cancer with Cervical Stroma and Parametrial Invasion**

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**Background:** Although endometrial cancer is not ranked among the ten most common types in Iran, it is the 12th most prevalent in women and in cancers of the genital tract it is the third after breast and ovarian cancer. The mortality rate was reported 0.6 in 100,000 persons. Several studies have evaluated the correlation of preoperative CA125 in endometrial cancer with several surgicopathologic and prognostic variables, disease recurrence and need for lymphadenectomy. Recent data suggest adjuvant extrafascial hysterectomy after neoadjuvant therapy in spite of the initial radical hysterectomy for locally advanced disease. Therefore it would be helpful to use the preoperative assessment including serum CA125 to predict the extent of the disease and plan a less complicated therapy.
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**Objective:** To evaluate the cut-off value of CA125 in the parametrial and cervical stroma invasion in endometrioid endometrial cancer. Methods: A sample of 128 endometrial cancers, surgically staged from 2012 to 2018 in Imam Hosein Hospital was evaluated. According to exclusion criteria, 82 cases were analyzed finally. Receiver Operating Characteristic (ROC) Curve was used to determine the cut-off value of preoperative CA125 for parametrial and cervical stroma involvement.

**Results:** A high preoperative CA125 level was significantly associated with advanced disease stage, cervical stroma invasion, pelvic lymph node metastases and higher grade (p< 0.05); the test showed marginally significant correlation for parametrial invasion, maybe be due to sample size limitation (p=0.058). However the correlation between CA125 and myometrial / lymphovascular invasions were not statistically significant (P= 0.112, 0.168 respectively). The suitable cut-off for preoperative CA125 in parametrial invasion was 45.5 u/ml (100% sensitivity, 89% specificity, 33.3% Positive Predictive Value, 100% Negative Predictive Value) and for cervical stroma invasion, it was 41.9 u/ml (87.5% sensitivity, 87.8% specificity, 43.75% Positive Predictive Value and 98.48% Negative Predictive Value).

**Conclusion:** Primary radical surgery may not be the first treatment approach in cervical/parametrical involvement. Neoadjuvant (chemo) radiotherapy and adjuvant extrafascial hysterectomy could be an alternative approach with fewer complications. Using preoperative CA125 along with physical examination and imaging modalities would be helpful in this regard. More investigations are needed to assess an agreed cut-off value for preoperative CA125 and endometrial cancer extension.

**Keywords:** CA-125 Antigen, Preoperative Care, ROC Curve, Carcinoma Endometrioid, Hysterectomy.

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**Abdominal Compartment Syndrome After Cesarean Section: A Case Report**

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**Introduction:** The abdominal compartment syndrome (ACS) is rare event after caesarean section (CS). These complications may be due to musculoskeletal trauma and fluid accumulation. It obviously increases the morbidity and mortality rate.

**Case presentation:** We present a 32-year old woman with abdominal compartment syndrome after caesarean section.

**Conclusion:** The intra-abdominal pressure (IAP) is a rare complication of CS. However delay in diagnosis and interventions can be irreversible damage. The physicians should be careful all signs after delivery. Conservative therapeutic strategy and decompressive laparotomy is definitive therapy.

**Keywords:** abdominal compartment syndrome, caesarean section, intra-abdominal pressure.
Acute Kidney Injury (AKI) in Pregnancy

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Acute kidney injury (AKI) is one of the most dreadful underwanted complication during pregnancy with a substantial unpleasant impact on outcome of conception, endangers life of mother and fetus.

AKI is defined as prompt decrease in renal function over a period of several hours to days and could result in proteinuria followed by decreased renal function evidenced by retention of waste products. Inpatient AKI-related mortality is between 25 and 30%.

As renal function in pregnancy is different compared to non pregnant ladies diagnosis of AKI can be difficult if clinician is not familiar with physiologic change of renal function during pregnancy. It is well known that in pregnant ladies BUN, serum uric acid Serum Creatinine are lower than what is reported as normal range. It is well known that the case of physiological low serum uric acid is pregnancy. Clinicians should consider preventive measures for AKI even if serum creatinin and uric acid is in normal range.

Based on trimester of pregnancy AKI can be classified in three groups. As follows: a) first half, b) second half, c) post partum. Which also are known as: pre-renal; renal; post-renal.

In first half the risk of pre-renal oliguria follows even known as hypermesis gravidurum in first trimester pregnant patients following persistent nausea, vomiting resulting in weight loss and ketonuria may present with acute incidence of oliguria associated with hypokalemic metabolic alkalosis. Recommendation is to avoid and withhold non essential drugs such ac iron supplementation that can cause nausea and vomiting. Avoid infusion of dextrose containing fluids which may precipitate Wernick's encephalopathy. A combination of anti-emetic drugs may be required to ameliorate nausea and vomiting to prevent AKI as a result of dehydration between 20 and 30% of cases of AKI in pregnancy are preventable.

Acute oliguria in first trimester may be the outcome of unsafe abortion by un educated mid wife's. Infected abortion complicated by fever, endometriosis remain the most serious treat to pregnant women's health in developing world.

In second half of pregnancy the major cause of AKI is preeclampsia a consequence of specific renal lesion called glomerular endotheliosis in enlarged ischemic glomeruli. Clinical manifestation being blood pressure greater than 140 systolic 90 diastolic after 20 weeks of pregnancy in previously normotensive patients. Proteinuria greater than 300 mg/24 hours main hemodynamic finding is general vasoconstriction and hematocrit concentration with a reduced intravascular volume. If understand up to 5% of pregnant women with preeclampsia develop “HELLP”, defined as combination of hemolysis with an eleate liver enzymes, low platelet count and abnormal RBCs in
Peripheral blood smear. Some of the systemic immunologic disease such as SLE might increase the incidence of preeclampsia and HELLP acute fatty liver pregnancy (AFLP) during second half of pregnancy usually in third trimester fatty infiltration of hepatocytes occur in microvascular system and acute liver failure in pregnant women. AKI develops in 90% of patients with AFLP.

Management
In case of AKI during pregnancy three accepts are to be considered:
1. Renal function supportive care AKI can be prevented by early recognition and treatment of the underlying cause, for example: A-early treatment of infections/sepsis B-early tratment/prevention of dehydration C-correcting hyper & hypervolemia monitoring use of drugs such as NSAIDa and ACE inhibitors.
2. Treatment of underlying disease for instance high doe corticosteroid in case of of underlying SLE.
3. Dialysis

Circular RNAs: A Novel Biomarker for Cervical Cancer

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Neither messenger RNAs, recent RNA-Seq and biochemical analysis showed another type of RNAs as a product of splicing which is named circular RNA (circRNA). Evidence demonstrated that circRNAs are abundant in the cells and are able to show cell/tissue-specific expression or tissue developmental stage which suggest that circRNAs may have regulatory potentials. In recent years, researchers have focused attention on circRNAs because of their key functions in various cellular mechanisms. CircRNAs also have the potential to be as promising biomarkers for diagnosis of various diseases such as cancer. Growing up evidence has shown the various roles of circRNAs in multiple cancers. In recent years, cervical cancer as one of the main causes of cancer death in women has been interesting for molecular research. CircRNAs are one of the novel objects which have recently been evaluated in this cancer. The improvement in our knowledge of the roles of circRNAs in cervical cancer...
may lead to new transcription therapeutic approaches to cervical cancer inhibition. Therefore, the purpose of this review is to review many studies which examined the role of circRNAs in cervical cancer carcinogenesis and progression up till date and to summarize possible mechanisms of action of circRNAs in cervical neoplasm.

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The Diagnostic Accuracy of 3-Dimensional Saline Infusion Transvaginal Ultrasound 3-D SIS in the Distinction Between Septate and Bicornuate Uteri

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**Backgrounds:** The main objective was first to evaluate the diagnostic accuracy of Three-dimensional saline infusion transvaginal ultrasound (3-D SIS) in the evaluation of uterine contour and cavity, and second, to analysis the level of agreement in the results between this method and combined diagnostic laparoscopy/hysteroscopy as a gold standard.

**Material and method:** In a double blind prospective study, 100 reproductive age (30.19 ± 2.34) women with history of spontaneous abortion (57%) or candidate for assisted reproductive technology procedures (43%) and a suspected diagnosis of congenital uterine anomalies by hysterosalpingography were enrolled. The patients underwent (3-D SIS) and hysteroscopy with laparoscopy to establish the final diagnosis. The findings of two procedures were compared.

**Result:** The accuracy, sensitivity, specificity, positive predictive value (PPV), and negative predictive value (NPV) of (3-D SIS) in diagnosis of uterine anomalies were 98.6, 100, 96.77, 97.66, 100%, respectively. The accuracy, sensitivity, specificity, positive predictive value (PPV), and negative predictive value (NPV) in the differentiation of septate uterus from bicornuate uterus were 100%.

**Conclusion:** There is a close correlation between the findings of (3-D SIS) and laparoscopy performed concurrently with hysteroscopy for the diagnosis of congenital uterine anomalies. (Three-D SIS) could be considered as an accurate procedure to assess uterine contour and cavity. This modality have the potential to become the gold standard in distinction between septate and bicornuate uteri.

*         *         *

Conservative and Pharmacological Management of Faecal Incontinence in Adlts

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**Backgrounds:** Fecal incontinence affects up to 36% of primary care patients. Although effective treatments are available, doctors rarely screen for this condition and patients seldom volunteer complaints of fecal incontinence.
Material and method: This article provides an up-to-date commentary on fecal incontinence for the primary care physician. It includes a short summary of the prevalence and impact of this problem on quality of life, recommendations for diagnostic assessment, and a review of treatment options available to the community-based physician. Result: Embarrassment about the stigma of having fecal incontinence was important to many of the patients interviewed, but embarrassment did not separate those who consulted their doctor about this problem from those who did not. However, 2 primary factors were different in patients who consulted doctors: greater knowledge about fecal incontinence and available treatment options, and greater severity of the condition. Patients with more frequent fecal incontinence were also more likely to talk to their doctor.

Conclusion: and do not screen for this condition. Second, diagnosis and management of fecal incontinence do not require referral to a specialist center; a good history and digital rectal examination can identify the most common causes of fecal incontinence and guide treatment or referral. Third, conservative treatments within the community physician’s scope of practice include patient education, normalizing stool consistency with diet and nonprescription medications, and pelvic floor exercises. Such treatment can be expected to improve fecal incontinence by about 60%, and it eliminates the problem for 1 in 5 patients. Finally, the University of North Carolina at Chapel Hill is conducting several research programs funded by the NIH that are attempting to reduce patients’ barriers to consulting about fecal incontinence, increase screening by physicians, and develop online resources to support physicians’ use of conservative treatment.


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Background and Aims: Maternal haemoglobin and haematocrit levels in the first, second, and third trimesters are considered as possible risk factors regarding preterm labour (PTL). The present study aimed to evaluate the relation between maternal haemoglobin (Hb) and haematocrit (HCT) levels with low birth weight (LBW) and PTL.
Materials and Methods: This cross-sectional study was conducted on 383 pregnant women that were admitted in postnatal ward and gave birth to live neonates. Maternal Hb and HCT levels in the first, second, and third trimesters were obtained from subjects’ medical records. The data were analysed using chi-square test by SPSS software (version 19).

Results: A total of 383 pregnant women with the mean age of 25.5 years were participated in this study. There was a significant relation between maternal HCT in the first, second, and third trimesters with LBW (P<0.01). A significant relationship was observed between maternal Hb in the first, second, and third trimesters with the LBW (P<0.01). In addition, a significant relation was reported between maternal HCT with the PTL (P<0.01). There was a significant correlation between maternal Hb in the first, second, and third trimesters with the PTL (P=0.01). Perinatal complication risks in low HCT and the Hb levels in the first trimester were reported higher than those in the second and third trimesters.

Conclusion: Based on the findings of this study, it was suggested that maternal anaemia should be diagnosed and treated at any stage of pregnancy in order to reduce the risk of the LBW and PTL.

Keywords: Low birth weight, Preterm labour, Anaemia, Haemoglobin

Prediction of the Need to Morcellate in Laparoscopic Hysterectomy

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Laparoscopic hysterectomy is considered the gold standard approach for benign gynecologic diseases even in women with large uterine masses. While performing a laparoscopic hysterectomy specimen extraction is an issue of major concern, especially for larger uteri. Morcellation is one of the methods used to extract uterine corpus after hysterectomy which has its pros and cons.

Objective: To determine preoperative factors which could predict the need for uterine morcellation in laparoscopic hysterectomies, and also find the best cut-off values leading to optimum sensitivity and specificity in Iranian population.

Design: Prospective Cohort

Patients: 162 women were recruited in this study from January 2018 till March 2019 who were planned to undergo total laparoscopic hysterectomy (TLH), with or without salpingo-oophorectomy in Arash women’s hospital, TUMS, Tehran, Iran.

Measurements: Preoperative measurements including uterine ultrasonographic dimensions, uterine size in bimanual examination and myoma size in myomatous uteri were recorded. Receiver operator curves (ROC) were used to establish cut-offs that maximized sensitivity and specificity for each factor. Univariate Poisson regression analysis was used to calculate relative risks of each cut-off.
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**Results:** ROC curves demonstrated maximized sensitivities and specificities with a cross-sectional area of 36.5 cm², largest leiomyoma dimension of 5.5 cm, bimanual exam of 13 weeks. Univariate Poisson regression analysis revealed that the strongest predictors of morcellation were bimanual exam (RR: 1.49; 95% Confidence Interval (CI): 1.21–1.83), cross-sectional area (RR: 1.43; 95% CI: 1.21–1.69), and largest leiomyoma diameter (RR: 1.79; 95% CI: 1.27–2.51).

**Conclusion:** Uterine cross-sectional area, largest leiomyoma dimension, and uterine size on bimanual exam can all be used to predict the need for morcellation at the time of TLH.

**Key words:** laparoscopic hysterectomy, tissue extraction, morcellation, predictive factors.

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**Vitamin D Status and Response to Vitamin D3 50000 unit Supplementation in Pregnan Iranian Woman**

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**Background:** Vitamin D deficiency has adverse consequences for both mother and neonate. Most of these conditions are reversible and preventable. Despite taking 600 IU vitamin D per day (recommended dose) during pregnancy, the prevalence of vitamin D deficiency in healthy women still remains high. The aim of this study was to identify the prevalence of vitamin D deficiency in an Iranian pregnant population and to analyze the impact of implementing a screening and treatment protocol among them.

**Material and method:** This is a cross-sectional study designed and conducted at a prenatal care clinic in Tehran, Iran. The screening for vitamin D deficiency was typically performed at two points: one at the initial prenatal visit and another at approximately 28 weeks’ gestation. If Vitamin D status was insufficient an additional vitamin D3 supplement of 50,000 IU of ergocalciferol was prescribed weekly for 10 weeks.

**Result:** The results of this study confirmed that vitamin D deficiency and insufficiency are quite prevalent in the study population, insufficient (79.6%) or deficient (59.7%), and required an increase in their vitamin D level to achieve sufficiency. Supplementation with less than 50,000 IU per week is insufficient to ensure a vitamin D level above 20 ng/ml in all vitamin D deficient pregnant women. Even larger doses are required to achieve sufficient vitamin D levels (above 30 ng/ml).

**Conclusion:** In conclusion, implementing a screening and supplementing protocol during pregnancy resulted in a significant increase in the percentage of women who were able to achieve a status of vitamin D sufficiency.

**Key word:** Vitamin D deficiency, pregnancy, supplementation.
AUB - Study the Frequency of Endometrial Hyperplasia in Women Under Abortion Referred to Imam Reza Hospital AS with Abnormal Bleeding AUB Year 2015-2016

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**Backgrounds:** Endometrial hyperplasia occurs when the endometrium, the lining of the uterus, becomes too thick. It is not cancer, but in some cases, it can lead to cancer of the uterus. The most striking symptom of this is abnormal uterine bleeding (AUB) during and around menopause. The aim of this study is to determine frequency of endometrial hyperplasia in women under abortion referred to Imam Reza Hospital (AS) with abnormal bleeding (AUB) year 2015-2016.

**Material and method:** This is a descriptive-analytic study, that was conducted on women with abnormal bleeding referred to Imam Reza Hospital in the years 2015-2016 and underwent curettage. Ages 45 to 55 years around menopause and after menopause is aged over 55 years. After completing the information in the checklist, the information was entered into the statistical software of SPSS version 16 and analyzed.

**Result:** 576 patients with abnormal uterine bleeding and under diagnostic curettage were studied. 141 patients had hyperplasia on the basis of pathology, which is equivalent to 24.47% of the above cases. 141 patients underwent three groups, before menopause (19.9%), around menopause (74.46%) and post menopause (5.7%). The prevalence of endometrial hyperplasia was more common in adolescents and menopausal intelligence. There was no statistically significant difference between mean age of patients in hyperplasia groups (P = 0.698). In general, 44.7% of cases are simple hyperplasia, 27% complex, 17.7% a complex atopic and 10.6% simple atopic. There was no statistically significant difference in the types of hyperplasia in the three groups before, after and after menopause.

**Conclusion:** The incidence of hyperplasia in women with abnormal bleeding, under diagnostic curettage is 24.47%. The majority of cases of hyperplasia are simple hyperplasia. There was no statistically significant statistical difference in the types of hyperplasia in the three groups before, around, and after menopause.
Effects of Curcumin on Body Weight Glycemic Control and Serum Lipids in Women with Polycystic Ovary Syndrome a Randomized Double-Blind Placebo-Controlled Trial

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**Backgrounds:** The aim of this study was to evaluate the effect of curcumin on body weight, glycemic control and serum lipids in women suffering from polycystic ovary syndrome (PCOS).

**Material and method:** The current randomized, double-blinded, placebo-controlled clinical trial was performed on 50 subjects with PCOS, aged 18-40 years old. Subjects were randomly allocated to take 500 mg/day curcumin (n=24) or placebo (n=26) for 12 weeks. Glycemic control and serum lipids were measured at baseline and after the 12-week intervention. Using RT-PCR method, gene expression related to insulin and lipid metabolism was evaluated.

**Result:** Curcumin significantly decreased weight (-0.8±0.9 vs. -0.2±0.8 kg, P=0.03) and BMI (-0.3±0.4 vs. -0.1±0.3 kg/m2, P=0.03). Curcumin, compared with the placebo, significantly reduced fasting glucose (β -2.63 mg/dL; 95% CI, -4.21, -1.05; P=0.002), serum insulin (β -1.16 µIU/mL; 95% CI, -2.12, -0.19; P=0.02), insulin resistance (β 0.26; 95% CI, -0.48, -0.03; P=0.02), and significantly increased insulin sensitivity (β 0.006; 95% CI, 0.001, 0.01; P=0.02). In addition, taking curcumin was associated with a significant reduction in total cholesterol (β -15.86 mg/dL; 95% CI, -24.48, -7.24; P=0.001), LDL-cholesterol (β -16.09 mg/dL; 95% CI, -25.11, -7.06; P=0.001) and total/HDL-cholesterol ratio (β-0.62; 95% CI, -0.93, -0.30; P<0.001), and a significant increase in HDL-cholesterol levels (β 2.14 mg/dL; 95% CI, 0.36, 3.92; P=0.01) compared with the placebo. Additionally, curcumin administration up-regulated gene expression of peroxisome proliferator-activated receptor gamma (PPAR-γ)(P=0.03) and low-density lipoprotein receptor(LDLR)(P<0.001) compared with the placebo.

**Conclusion:** Overall, curcumin administration for 12 weeks to women with PCOS had beneficial effects on body weight, glycemic control, serum lipids except triglycerides and VLDL-cholesterol levels, and gene expression of PPAR-γ and LDLR.

**Keyword:** Curcumin, insulin metabolism, lipid profiles, polycystic ovary syndrome

Financial sponsor : Kashan University of Medical Sciences
The Impact of Diabetes on Epithelial Ovarian Cancer Survival

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Backgrounds: Objective Diabetes mellitus (DM) is associated with poorer outcomes in some cancers. Its effect on ovarian cancer is less clear. We consider the effect of DM on overall survival (OS) and progression free survival (PFS) in patients with epithelial ovarian cancer (EOC).

Material and method: Methods A retrospective cohort study of 215 patients with EOC diagnosed between 2009 and 2016 was performed. Records were reviewed for standard demographic, pathologic and DM diagnosis data. Cox regression was used to evaluate the relationship between disease status and survival after adjustment for age, body mass index (BMI), parity, stage, grade, histology, debulking status, HTN, menopause status and neoadjuvant chemotherapy.

Result: Patients with DM (27.97, 95% CI: 23.63 to 32.30) had a significantly shorter OS rates compared to patients without DM (41.01, 95% CI: 38.84 to 43.17). The unadjusted hazard ratio (HR) for the association between OS time and DM was 4.76 (95% CI: 2.99 to 7.59, P<0.001). Following adjustment for demographic and pathologic variables, the HR was 3.98 (95% CI 2.21 to 7.16; P<0.001). The PFS in patients with DM (14.10, 95% CI: 11.76 to 16.44) was significantly shorter compared to patients without DM (28.83, 95% CI: 26.13 to 31.54). The unadjusted HR for PFS and DM was 5.69 (95% CI: 3.05 to 10.61; P<0.001). After adjustment for demographic and pathologic variables, the HR was 2.84 (95% CI: 1.27 to 6.32; P<0.001).

Conclusion: Conclusions DM can negatively effect on PFS and OS in EOC patients independent of the effect of other variables.

Evaluation of anti-Müllerian Hormone Predictive Value and Antral Follicle Count in the Success rate of Ovarian Drilling in Polycystic Ovary Syndrome

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Backgrounds: Polycystic ovarian syndrome (PCOS) is the most common cause of ovarian dysfunction in the reproductive age. Laparoscopic ovarian drilling (LOD) is one of the PCOS treatments resistant to clomiphene citrate. Serum levels of anti-Müllerian hormone (AMH) represent the number of growing and saving ovarian follicles which increase in these patients. The aim of this study was to evaluate the predictive value of AMH and antral follicle count (AFC) in the success rate of ovarian drilling in the PICOS resistant to Clomiphene.
Material and method: This was a pre- and post-clinical trial performed on 30 infertile women with PCOS resistant to clomiphene citrate who referred to Imam Reza and Milad Hospitals in Mashhad during 1395 and 1396. Patients underwent standard laparoscopic ovarian drilling. Serum levels of AMH and androgens and AFC survey before LOD and 3 and 6 months after LOD were evaluated. The ovarian ovulation rate in each month was also monitored for 6 months. Then, the association between changes in these parameters, especially the amount of AMH, and post-operative ovulation were investigated. P<0.05 was considered was considered statistically significant.

Result: The mean age was 4.69± 27.70 years and BMI was 1.55 ± 25.72 kg / m². Following LOD, ovulation occurred in 20 patients (67%), of which 6 (20% of all patients) became pregnant. Serum levels of AMH and AFC decreased significantly after 3 and 6 months after LOD compared to preoperative levels; P was 0.007 and 0.000 in the third month and 0.004 and 0.000 in the 6th month, respectively. However, testosterone and DHEAS amounts did not have a significant decrease compared to before LOD; P was 0.138 and 0.663 in the third month and 0.909 and 0.132 in the 6th month, respectively. Comparing patients who had ovulation to the ones who didn’t, 3 and 6 months after LOD, serum levels of AMH, testosterone and AFC showed a significant decrease in the ovulation group, P in the third month was 0.005, 0.055, and 0.000 and in the sixth month 0.005 and 0.043, respectively. However, the amount of DHEAS, 3 and 6 months after surgery did not significantly decrease; P was 0.827 and 0.781, respectively.

Conclusion: The possibility of ovulation after LOD in PCOs resistant to clomiphene citrate is associated with the amount of reduction in post-operative AMH and AFC. Therefore, it may be possible to use the changes of these two variables to predict the success rate of LOD.

A Novel Technique for Resection of Endometrioma

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Background: Endometrioma resection with minimal ovarian tissue damage and resection of all involved tissues is gold standard of Endometrioma surgery. There are two main endometrioma resection techniques which are performed by surgeons. During the first technique, ovarian cyst fluid is aspirated and the surgery is followed by cyst resection from the bulged surface of cyst. Second technique includes mobilizing the ovary over the surrounding adhesive-tissues (caused by endometriosis), and cyst penetration is performed in the location of invaginated ovarian endometrioma tissue. Then the surgery is followed by cyst excision and resection. This technique has been simplified by trimming of fibroser edges, caused by endometrioma, and finding an appropriate plane. The surgery procedure is accompanied by less ovarian tissue damage. Due to complete excision of ovarian endometrioma, the second technique has been adopted as the preferred method.
Although entering into the cyst probably causes difficulties in finding small endometriomas and multiloculated cysts because of intermixed ovarian and cyst tissue, hemorrhage from the site of excision during surgery and overlapping ovarian edges.

**Methods:** The novel endometrioma surgery techniques which I called “The bell pepper method”, includes detachment of ovary from surrounding adhesive-tissues that could be followed by spontaneous chocolate cyst rupture and fluid extraction. The second step is determining fibrotic areas which are developed by endometriosis invagination. After that we don’t enter to the cyst. The surgery will be followed by penetrating appropriate plane and complete resection of endometriosis tissue around the determined periphery and after completing the border determining, the cyst walls will be appeared and extraction of involved tissues will be done. During the surgery, we always focus on preserve the maximum integrity of ovarian tissue. After cyst excision, the remained chocolate fluid will be washed out from the ovary using serum, and when the complete removal of endometriotic lesions is confirmed we don’t use cauterization and only use hemostatic sutures in the ovarian bed and sub edges with trying to use most of sutures inside the ovary as much as possible to prevent ovarian cortex damage and to maintain natural ovarian anatomy. We also try to maintain the tubo-ovarian angle during suturing. After that we suspend the ovary to lateral pelvic side wall. The final step includes total resection of endometriosis lesions from peritoneum and the pelvic floor and every other superficial or deep Endometriosis.

**Conclusion:** Managing endometrioma using minimally invasive surgeries is an effective method. “The bell pepper method” as a novel technique in endometrioma resection surgeries, is able to provide appropriate plane of cleavage and extraction of endometriotic cysts, as well as complete endometrioma lesions resection and ovarian hemostatic repair. Better ovarian tissue preservation could be obtained by this surgical precision and it also would be resulted with lowest recurrence rate of ovarian and surrounded Endometriosis.

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**Adnexal Mass in Pregnancy Diagnosed as Heterotopic Pregnancy A Case Report**

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**Backgrounds:** Adnexal masses have the prevalence of around 0.19 - 8.8% in pregnancy. The incidence decreases with increasing gestational age. Heterotopic pregnancy is a rare and potentially dangerous condition occurring in only 1 in 30,000 spontaneous pregnancies. With the advent of Assisted Reproduction Techniques (ART) and ovulation induction, the overall incidence of heterotopic pregnancy has risen to approximately 1 in 3,900 pregnancies. However, obstetricians and emergency medicine physicians should be considered this entity as a differential diagnosis in the pregnancy and simultaneously adnexal mass.
Material and Method: A 29-year-old pregnant woman gravida3 para1 abort1 with gestational age of 10 week referred to obstetric clinic with sonography consistent with left adnexal mass. She had severe abdominal pain in left lower quadrant. Sonography of abdomen and pelvis showed a heteroechoic lesion measured 70 x50 mm adhered to ovary in left adnex suspicious to hemorrhagic cyst and a single live embryo in uterine cavity. In her past history, she had secondary infertility for 1 yr. Following 2 courses of clomiphene citrate, she has been pregnant. She was observed and her pain recovered, so she was discharged after 2 days. Four weeks next, sonography was done. There was a multiseptate cyst in left ovary measured 95x80 mm. Due to increasing size, she underwent laparoscopy in gestational age of 14 wk. There was a mass in posterior cul de sac adhered to left adnex and some old clot and adhesion around it. The mass was removed and sent for histologic evaluation. The pathology confirmed an ectopic pregnancy. In follow up, there was no problem in prenatal care. At gestational age 39 week, she delivered a healthy male baby weighing 3230g via cesarean section due to previous c/s.

Result: Nowadays, laparoscopy is a reasonable approach for management of adnexal masses in pregnancy. Compare with laparotomy, there was shorter hospital stay, fewer postoperative complications, decreased blood loss. About pregnancy outcomes, there was no differences between two procedures.

Conclusion: We should think about heterotopic pregnancy even in low risk patients as differential diagnosis in adnexal masses in pregnancy and when there is risk factor for heterotopic pregnancy especially when the patient has abdominal pain.

Association of Placental Chorangiosis with Pregnancy Complication and Prenatal Outcome

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Backgrounds: However the pathogenesis of chorangiosis is still unknown, but it should be considered as a placental sign of potential clinical significance. Therefore, this study is designed to review 308 cases with chorangiosis over a 4-year period to determine the association chorangiosis with perinatal outcomes.

Material and Method: In this cross-sectional study, we reviewed all medical records of the mothers whom their placentas had been sent to pathology department of Shiraz University of Medical Sciences for histopathological examination during 4 years. According to histopathology examination, a number of 308 cases were diagnosed as chorangiosis. We randomly considered another 308 cases with other diagnoses in pathology as control group.

Result: Overall, mothers with chorangiosis experienced higher incidence of (0,001=P) cesarean delivery, (0,001=P) NICU admission, dead fetus (0,001=P) fetal
anomaly, compared to those in control group. In addition, the mean of Apgar score at 1 minute and 5 minutes, and birth weight in chorangiosis were significantly lower than control group (0.001 = P) for all. The incidence of placenta membrane, cord and decidua pathologies in chorangiosis were significantly more than control group.

**Conclusion:** However chorangiosis is a rare condition, but it is associated with higher incidence of perinatal and neonatal morbidity and mortality. Therefore, it should be considered as an important clinical sign of adverse pregnancy outcomes, and should be mentioned in the pathology evaluation.

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**The Comparison of Intravenous Tranexamic Acid with Intravenous Oxytocin Effect on the Amount of Bleeding during Hysteroscopic Myomectomy in Women with Abnormal Uterine Bleeding**

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**Backgrounds:** Abnormal uterine bleeding is one of the most common causes of women who referring to gynecology clinics. One of the treatments approaches is removal of myoma by hysteroscopy. For reduction of bleeding volume during hysteroscopic myomectomy, several measures were performed. The aim of this study was to compare the effects of tranexamic acid and oxytocin on bleeding during hysteroscopic myomectomy in women with abnormal uterine bleeding.

**Material and method:** This study was conducted on patients undergoing hysteroscopy in Alzahra Medical Center. By consideration of inclusion and exclusion criteria, 92 patients were selected. After general anesthesia, and upon insertion of the hysteroscope into the uterus, 46 patients in first group received 10 mg/kg of tranexamic acid in 500 ml of Ringer’s serum at 10 ml per minute intravenous infusion, and for 46 patients in second group, 5 units of oxytocin were administered in 500 ml of ringer serum by 10 ml/ min intravenous infusion. In both groups, dextrose solution 5% was used as a media for dilatation of the uterine cavity. The amount of bleeding, absorbed volume, the success rate of surgery, resolution of hysteroscopy image, side effects of two drugs, days of hospital stay, all were recorded in a pre-designed checklist. Finally, data collected and analyzed by SPSS 21.

**Result:** In this clinical trial, 92 patients in both groups were matched for age, gravidity, parity and number of intrauterine myomas. Data showed that bleeding in grade 0 (P= 0.000), grade 1 (p= 0.003) and grade 2 (p=0.00) in first groups was less. The hemoglobin and hematocrit alteration after and before surgery was not different between 2 groups. Hospital stay duration was same in 2 groups. The mean time of hysteroscopic myomectomy was lower in first group. The amount of absorbed volume did not differ between 2 groups. The resolution of image during hysteroscopy in first
group was better (p=0.00). The success rate was similar and no side effect of drug was observed. The electrolytes level did not show significant difference.

**Conclusion:** Our results showed that tranexamic acid is safe and has less side effect, which can reduce the amount of bleeding during surgery, duration of surgery, and clarify the resolution in myomectomy with hysteroscopy.

**Keywords:** Tranexamic acid, Oxytocin, Uterine myoma, Hysteroscopy.

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**Comparison Level of Vitamin D in Follicular Fluid and Serum of Patients Candidate for Microinjection**

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**Backgrounds:** Vitamin D receptors in reproductive system of women including follicular fluid, endometrium, ovary, placenta, and serum plays a central role in fertility and improves fertilization. The purpose of this study was to compare the level of vitamin D in the follicular fluid and serum of candidates for microinjection.

**Material and method:** The present study is a descriptive-analytic study. The study population is female infertility who referred to Motazedi Infertility Center for treatment through microinjection. A blood sample (5 ml) per day was collected from the premature vein in a fast-moving ovary from each patient and sent to the laboratory to determine vitamin D levels. The next level of blood vitamin D laboratory was recorded in the blood and follicular fluid in the questionnaires. Finally, the information obtained by the statistical expert was entered into the statistical software SPPS version 20 and analyzed statistically.

**Result:** The mean age of 41 patients was 32 ± 6.02 years and the mean duration of infertility was 4.94 ± 2.63 years. The mean vitamin D level in the follicular fluid was 19.46 ± 11.55 ng / ml and the blood serum was 18.44 ± 10.36 ng / ml. The average number of Mature oocytes in the whole population was 6.30 ± 4.67 and the mean number of immature and decadent oocytes was 1.36 ± 1.24 in all patients. The mean number of embryos in the total number of patients was 4.11 ± 3.73. There was no statistically significant difference between mean number of embryos at different levels of serum vitamin D (P=0.212) and follicular fluid (P= 0.429). The results showed that the mean thickness of the endometrium in the total population was 8.25 ± 1.72 mm. There was no statistically significant difference between the mean endometrial thickness at different levels of follicular fluid (P = 0.899) and female blood serum (P = 0.977).

**Conclusion:** The results showed that there is no statistically significant difference between vitamin D levels, in follicular fluid and serum of patients with microinjection candidate.
Effects of Melatonin Supplementation on Hormonal Inflammatory Genetic and Oxidative Stress Parameters in Women with Polycystic Ovary Syndrome

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**Backgrounds:** The aim of the current study was to evaluate the effect of melatonin administration on clinical, hormonal, inflammatory and genetic parameters in women with PCOS.

**Material and method:** The present randomized, double-blinded, placebo-controlled clinical trial was conducted among 56 patients with PCOS, aged 18-40 years old. Subjects were randomly allocated to take either 5 mg melatonin supplements (n=28) or placebo (n=28) twice a day for 12 weeks.

**Result:** Melatonin administration significantly reduced hirsutism (β -0.47; 95% CI, -0.86, -0.09; P=0.01), serum total testosterone (β -0.11 ng/mL; 95% CI, -0.21, -0.02; P=0.01), high-sensitivity C-reactive protein (hs-CRP) (β -0.61 mg/L; 95% CI, -0.95, -0.26; P=0.001) and plasma malondialdehyde (MDA) levels (β -0.25 µmol/L; 95% CI, -0.38, -0.11; P<0.001), and significantly increased plasma total antioxidant capacity (TAC) levels (β 106.07 mmol/L; 95% CI, 62.87, 149.28; P<0.001) and total glutathione (GSH) (β 81.05 µmol/L; 95% CI, 36.08, 126.03; P=0.001) compared with the placebo. Moreover, melatonin supplementation downregulated gene expression of interleukin-1 (IL-1) (P=0.03) and tumor necrosis factor alpha (TNF-α) (P=0.01) compared with the placebo.

**Conclusion:** Overall, melatonin administration for 12 weeks to women with PCOS significantly reduced hirsutism, total testosterone, hs-CRP and MDA, while increased TAC and GSH levels. In addition, melatonin administration reduced gene expression of IL-1 and TNF-α.

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Comparison of Pregnancy Associated Plasma Protein a Levels in Pregnant Women with and without Intra Uterine Growth Retardation Referring to the Al-Zahra Hospital during the Year 2016

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**Background:** Maternal serum markers, including pregnancy associated plasma protein a (PAPP-A), are associated with adverse pregnancy outcomes such as aneuploidy, fetal growth restriction, preeclampsia, fetal death, and preterm labor. PAPP-A is a valuable element to predict the risk of adverse pregnancy complications. PAPP-A is different in races and papulations. The aim of this study was to A comparative study between pregnancy-associated plasma protein-A in pregnant women with and without IUGR referred to Alzahra Hoaspital of Rasht in 1396.
**Methods:** In this comparative cross-sectional study, 227 pregnant women referring to Alzahra Hospital in Rasht for labile un 1396 were evaluated. The mothers were divided into two main groups. The first groups that have a definitive diagnosis of IUGR after delivery. Based on the Weight of infants and gestational age (percentile growth < 10%) including 76 people and the second group those who did not have infants with IUGR including 151 people. Data include age, weight, height, PAPP-A concentration, type of delivery, gestational age, birth weight, preeclampsia, gestational diabetes, Apgar score & existence or absence of intrauterine growth restriction registered on special forms. Serum PAPPA level which is one of the first three months screening components was compared in these two groups. Data were analized by SPSS version 21.

**Results:** The mean age of the studied samples was 28.8 ± 5.6 years. The mean number of pregnancies was 0.93 ± 1.7 and the mean weight gain was 12.6 ± 4.9 kg. 2.2% of the samples had a history of stillbirth and 70.9% had cesarean delivery. 33.5% had IUGR. 96.5% of samples had normal amniotic fluid status. In Apgar scores, the majority (46.5%) had the Apgar score of 8 in the first minute and the remaining samples (54.2%) had Apgar score 9 in the fifth minute. The mean neonatal weight was 2646.8 ± 641 gr. The mean PAPPA in subjects without IUGR was 0.48 ± 1.02 with a middle of 1 and in subjects with IUGR was 0.78±0.49 with a middle of 0.64 and statistically significant, so that the level of this protein even after controlling interventionist factors was lower in subjects with positive IUGR. PAPPA levels were significant in the positive and negative IUGR group. In this study cut off point for PAPPA was 0.73 with a sensitivity of 72% and specialty of 60%.

**Conclusion:** Our findings confirm that there is a significant relationship between pregnancy outcomes specially IUGR and low levels of PAPP-A in mothers. Mothers with low PAPP-A require more care and preventive measures to prevent complications due to intruter in growth retardation. In this study cut off point of PAPPA related to IUGR was 0.73 which was higher than other studies in others countries which could be due to racial differences and other characteristics of the population studied.

**Keywords:** Pregnancy-Related Plasma A Protein (PAPP-A), IUGR

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**Low Level Laser Therapy LLLT for Fertility**

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**Backgrounds:** Application of low level laser therapy (LLLT) to improve fertility status is a rapidly growing discipline in medicine. Low-level laser therapy (LLLT) is a form of laser medicine used in physical therapy and veterinary treatment that uses low-level lasers or light-emitting diodes to alter cellular function.

**Material and Method:** To achieve this aim, the related articles from accredited databases such as: PubMed, SID, EMBASE and Google Scholar were investigated. The materials relating to low level laser therapy, Women’s Fertility and induction of ovulation were studied. Then, content analysis was carried out and the results were summed up.
Result: The impact of LLLT on oocytes maturation merits consideration. The studies show that low level laser therapy (LLLT) used on acupuncture points on the neck and over the ovaries appears to enhance mitochondrial activity and ATP production, increase blood flow and helps to reduce oxidative damage and The number of cells progressing through the cycle and mitochondrial membrane potential enhanced significantly. Besides, cyclin B and cyclin-dependent kinase (CDK4) levels are similarly increased.

Conclusion: Laser therapy for infertility is a non-invasive and inexpensive method, and more studies are needed in this field.

Dysfunctional Uterine Bleeding In Adolescent And Teenage Girls

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Dysfunctional uterine bleeding in adolescent girls is a common problem that faces many gynecologists in their practice. The underlying etiology is hypothalamic pituitary dysfunction leading to anovulatory cycles. The endometrium is under unopposed estrogen effect that stimulates proliferative changes and increases its thickness. This eventually leads to disintegration of the endometrium in certain areas with bleeding episodes. It is essential to reach the correct diagnosis by proper history, physical examination, and hematologic and endocrine studies. The treating physician has to rule out pregnancy, liver disease, kidney disease, pelvic tumors, and endocrine problems including thyroid disease, hyperprolactinemia, and hyperandrogenism. Furthermore, coagulation studies should be included to rule out defects in coagulation factors such as idiopathic thrombocytopenia and von Willebrand's disease. Dysfunctional uterine bleeding is usually treated hormonally with progestins in cyclic fashion. This treatment is effective in patients with chronic bleeding episodes. In patients with heavy bleeding, intravenous estrogen treatment has been effective in controlling the acute episode of bleeding followed by progestin treatment. If hormonal treatment fails, these patients should have hysteroscopic evaluation of the uterine cavity to rule out intrauterine lesions such as polyps, submucous fibroids, and arteriovenous malformations.

KeyWords: Dysfunctional uterine bleeding, Hypothalamic pituitary dysfunction, Coagulation defects, Progestins, Arteriovenous malformations.
The Impact of Intraperitoneal Dexmedetomidine with Bupivacaine on Patients’ Postoperative Pain in Endometriosis Laparoscopic Surgery; A Randomized, Clinical Trial

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Background: Endometriosis is routinely treated with laparoscopy, which despite significant advantages over laparotomy cannot diminish postoperative pain. Insufficient postoperative pain control decreases patient satisfaction.

Objectives: This study was designed to evaluate the efficacy of intraperitoneal dexmedetomidine (DEX) combined with bupivacaine on postoperative pain in endometriosis laparoscopic surgery.

Methods: Fifty-three patients with endometriosis, scheduled for laparoscopy in Rasoul-e-Akram Hospital, Tehran, from January 2016 to May 2017 who were randomly divided into three groups, including group 1 (G1, n = 21) received 50 mL intraperitoneal saline, group 2 (G2, n = 16) received 50 mL intraperitoneal instillation of bupivacaine 0.25%, and group 3 (G3, n = 16) received 50 mL bupivacaine 0.25% plus dexmedetomidine 1 µg/kg. Each patient with a history of allergy to local anesthetics or dexmedetomidine, cardiac disease, renal or hepatic failure, severe pulmonary disease; in addition, pregnant and comorbid obese patients were excluded from the study. Patients’ postoperative pain was assessed in the recovery room after 2, 6, 12, 24, and 48 hours using visual analogue scale (VAS). Total analgesic consumption was also recorded.

Results: The postoperative VAS scores were significantly lower in group 3 than other groups in the recovery room, and 2, 6, 12, 24 and 48 hours after the surgery (P < 0.001). However, there was no significant difference between 1 and 2 groups. Furthermore, total VAS in the first 24 hours in group 3 was significantly lower than the two other groups (P < 0.001).

Conclusions: We conclude 1 µg/kg intraperitoneal DEX administration combined with bupivacaine may prolong postoperative analgesia and decrease rescue analgesia requirement compared with bupivacaine alone.

Keywords: Bupivacaine; Dexmedetomidine; Laparoscopic Surgery; Endometriosis; Intraperitoneal Instillation
Functional Neuroanatomy & Neurophysiology of the Pelvic Floor

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Neurophysiological & Neuroanatomy based integral theory were carried out in 120 patients that joined to our study in Urodynamic clinic with a history of LUTS. Urodynamic study was performed along with neurophysiological measurement. The majority patients were shown significantly abnormal responses on neurophysiological measurement when compared with normal groups. The poorest results related to SUI patients were shown to have markedly poorer results than patients with other urodynamic problems. These results suggest that many patients with lower urinary tract dysfunction may have a neurological component based integral theory.

Survey the Association Between the Amniotic Fluid Index and Perinatal Outcomes in Pregnancy Referred to AL-Zahra Hospital From December 2017 to January 2019

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Background: The outcome and management of low amniotic fluid index in pregnancy are controversial. We aimed to evaluate the perinatal outcomes in pregnancies with low amniotic fluid index (AFI<8).

Methods: Prospective analysis of 420 singletons uncomplicated pregnancies that were under routine antenatal surveillance from December 2018 to January 2019 was performed to assess perinatal outcomes. Normal amniotic fluid index, borderline amniotic fluid, and oligohydramnios were defined as 8<AFI≤25, 5<AFI≤8 and AFI≤5, respectively. Adverse perinatal outcomes and delivery data were collected and statistically analyzed and compared.

Result: A statistically significant difference was seen in Gestational age at delivery, birth weight, respiratory distress and NICU admission in comparison of the borderline AFI group and oligohydramnios with normal AFI. Low birth weight (<2500g), Small for gestational age and APGAR 1 min <7 were significant in comparison of oligohydramnios and normal group. Reduction in birth weight, Low birth weight (<2500g), SGA and APGAR 1 min <7 were adverse perinatal outcomes, in comparison of oligohydramnios with borderline group.

Conclusions: Borderline oligohydramnios is an uncomplicated pregnancy, was not found to be a risk factor for major adverse perinatal outcomes such as fetal and
neonatal death. However, the obstetrician should have enough attention and preparation to deal with conditions such as fetal distress and the need for admission of the neonate to NICU.

**Keywords:** Amniotic fluid index (AFI) _ Oligohydramnios _ Perinatal outcome _ Fetal distress

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**Comparison of the Effect of Simultaneous Administration of Oxytocin with Foley Catheter with co-Administration of Misoprostol and Foley Catheter on Cervical Preparation and Duration of labor in Prolonged Pregnancies**

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**Backgrounds:** One of the most important issues in obstetrics is the induction of labor. Induction is indicated when the benefits to either mother or fetus outweigh those of pregnancy continuation. Post term pregnancy is one of the most common indications. Timely induction of labor can reduce maternal mortality and morbidity and ensure healthy baby delivery. The success of labor induction depends on the condition of the cervix at the time of labor induction. There are several ways to prepare the cervix: such as the mechanical factors and the administration of prostaglandins and oxytocin, but there is no consensus on the best method.

**Material and method:** In a randomized trial, pregnant women with singleton pregnancy and gestational age greater than 40 weeks with no past medical history and less than 5 bishop score at admission time and intact membranes, were randomized into two groups for foley catheter and oxytocin, or Foley catheter and Misoprostol. The primary goal was cervical preparation and delivery in the first 24 hours. The second goal was investigation of type of delivery, Foley catheter expulsion time and maternal and neonatal complications.

**Result:** 74 pregnant women were randomly allocated into two groups of 37. Maternal delivery rate was significantly different in the first 24 hours and was higher in the oxytocin group (oxytocin: 34 vs misoprostol: 25, P-value = 0.009). The time to the active phase was shorter in oxytocin group (misoprostol: 16.32 hours vs oxytocin: 11.04 hours, p-value = 0.01). The incidence of complications in the two groups revealed no significant difference.

**Conclusion:** Oxytocin can be more effective than misoprostol in the preparation of cervix, and increases the amount of delivery in the first 24 hours. Given that oxytocin is cheaper and available, it can be a good option for the preparation of cervix.
Bladder Leiomyomatosis A Case Report

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Backgrounds: Bladder leiomyoma is a rare, benign, mesenchymal tumor of the bladder, with an incidence rate lower than 0.5% among all types of bladder tumors. There have been fewer than 250 reports on bladder leiomyoma. Herein, we report a case of bladder leiomyoma in a 37 years female.

Material and method: A 37-year-old multiparous woman presented with complaints of occasional hematuria and dysuria and irritative symptoms. In the examination and imaging, a mass with size of 8 cm was reported in anterior border of uterus with firm consistency. Surgery was performed and the mass was resected. Postoperative histopathology review confirmed leiomyoma of bladder. Result: Leiomyoma should be keep in mind as a differential diagnosis in a female presenting with dysuria, frequency or hematuria and a firm consistency mass even in unusual site as the bladder. Complete resection leads to very good outcome with almost no recurrence.

Conclusion: Leiomyoma should be keep in mind as a differential diagnosis in a female presenting with dysuria, frequency or hematuria and a firm consistency mass even in unusual site as the bladder. Complete resection leads to very good outcome with almost no recurrence.

Comparison of Entonox and Transcutaneous Electrical Nerve Stimulation TENS in Labor Pain A Randomized Clinical Trial Study

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Backgrounds: Pain is an unpleasant sensation that medical science has always been trying to eliminate it. Labor pain is one of the most severe pains that women experience it during their life. The aim of performing this study was comparison of Entonox and transcutaneous electrical nerve stimulation (TENS) in labor pain in Zanjan city, Iran.

Material and Method: This clinical trial study was conducted on 120 pregnant women in Zanjan-Iran, 2016. The patients were randomly divided (by method of 1:1:1) into three groups (each group 40 patients): First group was TENS group; the second group was Entonox group and control group were choose from the patients that had a physiological delivery. They did not want to use analgesia. All the analyses were done using SPSS (version 23).

Result: Before intervention the pain severity between three group was relatively same (P=0.78). After intervention, pain score was significantly higher in control group compared to other two groups (P=0.005), but the differences between mean apgar
score between three groups was not significant (P=0.59). Also, both Entonox and TENS had significantly lower pain compared control group (P=0.005), but there was no significant difference between Entonox and TENS in regard of pain score (P=0.997).

**Conclusion:** Our findings reported that two groups of Entonox and TENS had similar effect on pain relief and decreased significantly pain scores. Therefore, the Entonox and TENS methods can propose to women for relief of labor pain. Click or tap here to enter text.

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**The Effect of Uterocervical Angle Changes on Prevention of Preterm Birth in Patients with Pessary**

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**Backgrounds:** Background - Preterm birth due to cervical incompetence and short cervix is one of the most important debates in obstetrics. Beside the cerclage, insertion of pessary sometimes may help to continue pregnancy, but pessary sometimes can affect positively and occasionally may not affect positively and delivery was happened preterm.

**Material and Method:** Our study was done on 65 mother with singleton pregnancy and between 22 - 24 weeks of gestations, all of them nulligravide, with short cervical length (by transvaginal ultrasonography controlling), under 25mm, that enrolled and were candidate for pessary (Hodge type), after giving consent form, we measured uterocervical angle (UCA) before and after pessary insertion. All the patient had 100mg progesterone support tranvaginally until 36 weeks. After observing, 40 cases had valuable degrees changes in UCA to narrow acute UCA with anterior attention, toward pubic direction, or to acute narrow angle with posterior attention, toward sacral direction. The other 25 cases had not valuable angular changes after pessary insertion.

**Result:** From patient with acute angle, 35 from 40 (87%) could reach above 34 weeks of gestations. From 25 cases with no high UCA changes, 15(60%) cases could reach above 34 weeks.

**Conclusion:** If pessary can change the direction of forces (pregnant uterus) from vaginal rout to pubis or sacral bone the heavy uterus flexed anteriorly or posteriorly, so this method can help keeping internal os, closed. Thus this is one of the mechanisms of successful pessary.
Prospective Investigation of Dietary Intakes and the Rate of Decline in Anti-Mullerian Hormone among Eumenorrheic Women

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\textbf{Backgrounds:} Dietary factors have been suggested to affect timing of menopause based on some studies, which indirectly underscore the possibility that dietary intakes may influence ovarian aging. We aimed to investigate dietary intakes in relation to the rate of decline in anti-Mullerian hormone (AMH), as a marker of ovarian aging.

\textbf{Material and method:} This prospective investigation with up to 16 year of follow-up was conducted in 227 eumenorrheic women participants from the Tehran Lipid and Glucose study (TLGS). AMH was measured twice, at baseline and the 5th follow-up examination cycle, and yearly rate of decline in AMH was calculated. Fast decline in AMH was defined as the annual percent change AMH> 5.9%/year based on tertile 3 of the variable. Dietary intakes of 37 food groups, macronutrients from different sources of plant, dairy and non-dairy, fiber, lactose and free galactose was estimated using the food frequency questionnaires (FFQs). After adjusting for potential covariates, the association between dietary factors and both annual percent decline of AMH (as a continuous variable) and also risk of fast decline were examined using the Spearman correlation and logistic regression, respectively.

\textbf{Result:} Annual rate of AMH decline was inversely correlated with dairy products, milk, fermented dairy, dairy carbohydrate, dairy fat, dairy protein, total calcium and dairy calcium, lactose and galactose, and positively correlated with organ meats. The odds of fast decline was reduced by 47\% for dairy products (95\% CIs= 0.36, 0.79;\ p=0.002), 38\% for milk (95\% CIs= 0.41, 0.93;\ p= 0.020), and 36\% for fermented dairy (95\%CIs=0.45, 0.93;\ p=0.018) per one standard deviation increase in their dietary intakes. The odds of fast decline in AMH was significantly reduced with higher intakes of fat, carbohydrate, protein, and calcium intakes from dairy sources, and lactose.

\textbf{Conclusion:} Consumption of dairy foods may reduce the rate of AMH decline in regularly menstruating women.
Pregnancy Outcome Among Cirrhotic Patients

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Backgrounds: Pregnancy is not uncommon in cirrhotic patients with current advances in assisted reproduction techniques. Such pregnancy is likely to increase in the coming years and causes the medical challenges for both patients and clinicians.

Material and method: This article was written by reviewed the available original and review literature which has been published in English in websites of Google scholar and Pub Med with keywords cirrhosis, pregnancy outcome, portal hypertension, and hepatic decompensation since 2010.

Result: Maternal mortality and the poor fetal outcome are serious complications. Poor pregnancy outcome is related to a model for end-stage liver disease (MELD) score more than 10. Pregnancy outcome can be improved if the physicians follow extensive counseling before or at the beginning of the pregnancy. The hepatologist has the main role in predicting maternal risks. 30% - 64% of cirrhotic patients will suffer from liver-related complications during or after pregnancy. The patients with a high MELD score are at risk for a poor maternal outcome, increased rate of disease decompensation and 7.8 % mortality. Elective termination of pregnancy on medical grounds and postponing pregnancy after liver transplantation should be considered in this group. But cirrhotic patients with a MELD score of 6 or less have minimum complications. Liver failure, ascites, hepatic encephalopathy, and variceal bleeding are serious complications that may occur during pregnancy. The upper endoscopy must be done both before pregnancy and in the second trimester to assess for the development of varices. Postpartum hemorrhage and delivery complications may occur at the termination period. The successful management of a cirrhotic patient needs a multidisciplinary team. This team discusses the case before pregnancy and follows her during gestation and delivery in a tertiary care center. The aim of this article was to review the approach and outcome of pregnancy among cirrhotic patients in recent years.

Conclusion: The approach and treatment protocols seemed to be relatively diverse and highly dependent upon the conditions of cirrhotic patient. Majority of the recent experiences showed that pregnancy outcome was better than old reports in cirrhotic patients.

Feasibility and Outcome of Advanced Laparoscopic Surgery in About 350 Patients from 2016 Till 2019

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Backgrounds: Endometriosis disease is defined as the presence of endometrial-like tissue outside of the uterine cavity, with possible myometrial (adenomyosis), ovarian,
superficial, or deep peritoneal involvement. Multiple extragenital and extrabdominal locations have been described as well. Deep infiltrating endometriosis (DIE) is diagnosed on detection of an infiltration R5 mm beneath the peritoneal surface. Endometriosis is commonly associated with chronic pelvic pain and infertility. Superficial or deep lesions can involve virtually any pelvic or extrapelvic organ, with the location of pain often reflecting the extent of the disease. The aim of this study is the preliminary report of endometriosis laparoscopic surgery by one surgeon during 2.5 years.

Material and Method: This cross-sectional study was conducted during 2/5 years laparoscopic surgery of myself in Jam hospital and Avicenna endometriosis center. We retrospectically include all patients with confirmed diagnosis of endometriosis and laparoscopic surgery performed by one surgeon. All the medical charts were reviewed and the demographic information, the preoperative diagnostic evaluations, surgical approach, intraoperative, and postoperative findings were recorded.

Result: There was 350 stage 4 endometriosis patients. Mean age = 35.14. The main chief complaint of these patients 49% infertility and 55% pain. 47% of the patients adenomyosis. 40% endometrioma and adhesion. 0.8% (2) ureteroneocystostomy. Bowel involvement was 49%. 66 segmental, 39 shave, 34 disc. 7 patients had Total laparoscopic hysterectomy and segmental bowel resection. 2 intraoperative ileostomy (0/6%). 2 intraoperative complication (one bladder one ureteral injury). 1 rectovaginal fistula in Tlh and bowel resection patient. Return to OR 0.1%. Transfusion 0.6%.

Conclusion: Laparoscopic endometriosis surgeries is safe and effective in severe endometriosis patients if it is done in referral centers and with multidisciplinary approach.

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The Effect of Combined Oxytocin and Sublingual Misoprostol in Reducing Blood loss During and After Cesarean Delivery: A Randomized Clinical Trial

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Background: Postpartum hemorrhage is one of the main causes of maternal morbidity and mortality in developing countries. Cesarean section is one of the most common surgery in all around the world. In comparison with normal vaginal delivery, cesarean section is a greater risk factor for post partum hemorrhage and need for blood transfusion. The risk of post partum hemorrhage increase when other risk factors such as; multiple pregnancy, polyhydramnios, severe preeclampsia, peripartum hemorrhage, protracted labor, labor induction and obesity are present. Oxytocin is conventionally used for prevention of uterine atony during cesarean
section. This study was performed with aim to evaluate the effect of combination of oxytocin and sublingual misoprostol in reducing blood loss during and after cesarean delivery.

**Methods**: This randomized clinical trial was performed in Ommolbanin hospital which is an academic hospital and affiliated to Mashad university of medical sciences, on 90 pregnant women with term pregnancy who were candidate for emergent cesarean delivery with spinal anesthesia and were high risk for post partum hemorrhage from September 2016 to January 2018. All participants received 40 IU oxytocin in 1 liter of normal saline after delivery, then Participants were randomly assigned to intervention group who received 400 μg sub lingual misoprostol in combination with oxytocin infusion and control group who received only oxytocin infusion without adding misoprostol.

**Results**: Adding sublingual misoprostol in combination with oxytocin infusion during cesarean section was led to significantly decrease the postoperative blood loss during six hours after surgery (P<0.001). Decline in the hemoglobin and hematocrit levels and the amount of intra operative hemorrhage were the same in both groups. Less additional uterotonic agents were needed in misoprostol group. The frequency of fever and other side effects were similar in both groups.

**Conclusion**: It seems that; among high risk women for postpartum hemorrhage, adding of sublingual misoprostol to oxytocin infusion is more effective to reduce blood loss during and after cesarean section.

**Keywords**: Misoprostol, Oxytocin, Cesarean, Spinal anesthesia, Postpartum hemorrhage

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**OHSS -Infertile PCOS Patients Treatment with Optimal Results and Decrease the Rate of OHSS**

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**Backgrounds**: Polycystic ovary syndrome(PCOS) is one of the most common endocrinopathies affecting women in the reproductive age group, and is one of the most common causes of ovarian hyperstimulation syndrome(OHSS) in infertile patients. The aim of this study was decreased OHSS due to induction of ovulation with clomiphene citrate and then letrozole in comparison of letrozole and cabergolin and an optimal pregnancy rate.

**Material and Method**: this is prospective clinical research from Dr.Rasekh infertility clinic,jahrom city, Iran. 64 infertile polycystic ovarian syndrome women were selected with 47 months infertility. The average age of them is 27.3 years (STD=5). The patients were divided into two groups: Group A: 36 patients (40%); initially tablet clomiphene citrate (from day 3 of menstrual cycle), then the second drug letrozole...
was started from day 8 to 11 menstrual cycle. Group B; 28 patients (31.1%); initially tablet Letrozole (from day 3 of menstrual cycle), then the second drug cabergolin started from day 8 to 11 menstrual cycle. Pregnancy rate in group A, 8 (22%) and in group B; 6(21%). The patients were monitored for ovulation by transvaginal ultrasonographic folliculometry, with measurement of number and size of the follicles, as well as endometrial thickness. Human chorionic gonadotrophin (HCG) was injected intramuscularly when at least one mature follicle 18-22 mm diameter. Data was analyzed with SPSS version 21.

Result: The rate of OHSS was similar in both groups nearly zero (p<0.05). This means that both methods of treatment can be prevented the creation of OHSS. Pregnancy rate in both groups was almost the same (p<0.05).

Conclusion: Conclusion: We recommend for the prevention of OHSS that is a serious complication of PCOS infertile women treatment which one of the two mentioned methods is to be used. Whilst in both methods has been favorite fertility rate. The goal of treatment is minimal side effects with optimal result.

Keywords: OHSS, PCOS, clomiphene, letrozole, cabergolin  Main source of funding; private funding by Dr. Athar Rasekhjahromi

The Effects of Vitamin E Supplementation on Lipid Profile in Menopausal Women a Randomized Double-Blind Controlled Trial

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Backgrounds: Menopause is associated with changes in lipid profile and is known as an oxidative stress risk factor. Different therapeutically strategies have been used in the case of controlling the menopause complications. Vitamin E as a great anti-oxidant possibly can be effective on lipid per-oxidation in menopausal women. We aimed to evaluate the effect of vitamin E supplementation on lipid profile of menopausal women.

Material and Method: This double-blind, placebo-controlled, randomized, crossover, Phase I/II trial study was designed with two 4-week intervention periods and a 8-day washout period between treatments. Eighty-three natural menopause women were participated in the study. The randomized block allocation were used and enrolled women divided in group A (n=41) and group B (n=42). In phase I, one group was given 400 IU/day vitamin E capsule and another group was given placebo capsule for 4 weeks. Then they entered an 8-day wash-out period, subsequently the phase II for a period of 4-week started in which the group that received vitamin E capsule was given placebo (E-P) and the group received placebo was given Vitamin E (P-E). The plasma lipid profile (LDL-C, HDL-C, TC and TG) were assessed before and after of the intervention in each phase and in general by gathering vitamin E and placebo groups
in the two phases, separately. The measurement of lipid panel performed by enzymatic colorimetric method. The study results presented as mean ± SD and median (quartile).

**Result:** The levels of LDL-C, HDL-C, TC and TG before the intervention between P-E and E-P groups by Mann-Whitney U tests no remarkable difference were seen (P>0.05). Also lipid profile measurement before and after intervention in Phase I and II of placebo-vitamin E group did not show significant differences (P>0.05). However, in Vitamin E-Placebo group it was revealed that the TG factor before (141.74 ± 53.52 mg/dl) and after (167.47 ± 71.32 mg/dl) intervention within phase II had a considerable difference (P=0.010). No significant differences were seen in the lipid profile mean and changes before and after intervention between vitamin E and placebo receivers in both phases (P>0.05).

**Conclusion:** The study results revealed that vitamin E supplementation had no remarkable effects on lipid profile levels in menopausal women. Widespread use of vitamin E supplementation for protection and control the impact of menopause does not appear warranted. Thus further study with larger sample size, different duration and doses are necessary.

**Keywords:** Antioxidant, Lipids, Menopause, Vitamin E

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**Comparison the Effect of Different Doses of Isosorbide Dinitrate Vaginal pre-Induction Cervical Ripening in Term Pregnancy**

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**Backgrounds:** Labor induction by prostaglandins is the use of medications or other methods to bring on (induce) labor. Isosorbide D-nitrate can be a good alternative to cervical preparation, but there are disagreements about prescribing doses. The aim of this study is Comparison the effect of different doses of isosorbide dinitrate vaginal pre-induction cervical ripening in term pregnancy.

**Material and Method:** This study is randomized clinical trial was conducted on pregnant women in the maternity ward of Imam Reza Teaching Hospital in kermanshah. The women were randomly assigned into one of 4 groups of 40 mg, 20 mg, 10 mg vials of Isosorbide Dinitrate And the placebo group, the data were entered into the spss-16 statistical software and analyzed.

**Result:** The mean age was 27.27 ± 5.28 years, the gestational age was 39.11 ± 2.45 weeks, weight was 30.9 ± 10.04 kg, height 163.26 ± 23.23 cm, body mass index 26.36 ± 2.33 kg / m², The mean of Bishop score at the beginning of study was 3.20 ± 1.14 and the Bishop score at first four hours was 6.8 ± 2.89. Age, gestational age, mean BMI, mean of Bishop score at the beginning of study, average time from active phase to delivery and Apgar Scores Were similar between the groups. 106 cases were vaginal delivery (88.3%) and 13 cases cesarean section (10.8%) was observed. A specific
complication in women after intervention (95% 79.2%) was not observed. Significantly, the mean Bishop score in second 4 hours was higher in 40 mg group than in other groups (P = 0.004), and the mean duration of induction to active phase of labor in the 40 mg Isosorbide group was lower than other groups (P = 0.009).

**Conclusion:** 40 mg vaginal Isosorbide Dinitrate, in cervical pre-induction cavity preparation, was better than vaginal isosorbide Dinitrate 20 and 10 mg in term Pregnancy.

* * *

**Comparison of the Effects of Vaginal Royal Jelly and Vaginal Estrogen on Quality of life Sexual and Urinary Function in Postmenopausal Women**

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**Backgrounds:** Several causes can disturb the quality of life in postmenopausal women. Stress, urinary incontinence is one of factors that can influence the quality of life of women, since they evade social activities and limit their behavior. Vulvovaginal disorders adversely impacts sexual action, psychosocial health, and partner relationships. The aim of this study was to examine the therapeutic properties of vaginal cream of royal jelly and estrogen on quality of life, sexual and urinary problems in postmenopausal women.

**Material and method:** This study was a randomized controlled clinical trial that was done on 90 married postmenopausal women 50 to 65-yers-old. A total of 90 women were randomly distributed to three groups and were treated with vaginal cream of royal jelly 15%, lubricant, and conjugated estrogens for three months. Before and after intervention, quality of life and vaginal cytology were evaluated. Data was analyzed by SPSS 16 using ANOVA and tukey tests.

**Result:** The results expressed that vaginal royal jelly is considerably more effective than conjugated estrogens and lubricant in the improvement of quality of life. Sexual and urinary function in postmenopausal women (p<0.05). Results of pap smear showed that improvement of vaginal atrophy in conjugated estrogens group was better than other groups (p<0.001), and there was no significant difference between lubricant and royal jelly groups (p=0.98).

**Conclusion:** The effectiveness of vaginal royal jelly in treatment of sexual and urinary problems of postmenopausal women is related to its estrogenic properties and could be promotion of life quality in postmenopausal women.
A Case Report of Large Subserosal Myoma

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Backgrounds: Introduction leiomyomas are benign tumours of smooth muscle, taking origin in the myometrium. It is possible for these tumors to be inside the uterus in subserosal, intramuscosal, or submucosal forms as well as in the cervix, broad ligament, or on a base. They are usually multiple, and can range in size from a few millimetres to massive growths of 20cm diameter and more. They may be detected by physical examination or hip imaging. Asymptomatic masses may be present in 40-50 percent of women over 35.

Material and Method: Patient was a 40-year-old woman with knee and hip damage, and the right leg femur fracture caused by falling to the ground a month before coming to the hospital. During the diagnostic investigation, in the patient’s graph, a large mass was detected in the abdomen and hip areas. The patient also stated that during the last few months she had constipation and menstrual disorder in the form of oligomenorrhea, but generally there was no discomforting symptoms making her come to the doctor. Physical examination revealed a large palpable, relatively mobile, non-tender mass in stiff and almost constant mass was felt in the hipogastric region and the area below the navel. Laboratory test values were within normal limits.

Result: Ultrasonography showed a large, rounded, homogeneous, relatively hypoechoic mass, measuring around 25 cm. Color Doppler US detected minimal vascular flow within the mass. Contrast-enhanced helical CT of the abdomen demonstrated a well-circumscribed, heterogeneously but vividly enhancing mass in the left lower abdominal quadrant. The mass was in close relationship – but with intact interface – with the left psoas muscle and contrast-filled bowel loops. The uterus was enlarged with a deformed uterine contour consistent with leiomyomatous uterus. The patient’s vital signs and tests were normal and the patient was posted for exploratory laparotomy. Investigating the inside of the abdomen, a large mass with a base was observed which originated in the uterus, occupied all the hip space, and was extended to the bottom of the liver. Investigating the other organs including the liver, no lesion was found. There was no paraaortic, mesenteric, and hip lymphadenopathy. The mentioned mass was resected from the base.

Conclusion: Asymptomatic leiomyomas an be present in 40-50 percent of women over 35 and can lead to a range of symptoms from unnatural hemorrhage to feeling of pressure in the hip.
Dual Trigger With 250 Mcg Recombinant Human Chorionic Gonadotropin And 1 Mg Leuprolide Acetate Compared With 250 Mcg Recombinant Human Chorionic Gonadotropin Alone For Final Oocyte Maturation And Effects On Clinical Outcome

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Backgrounds: Human chorionic gonadotropin (hCG) is the traditional agent used to trigger oocyte maturation. Similarity between the beta subunits of LH and hCG molecules enable the latter to stimulate LH receptors on granulosa cells. However, hCG has a longer half-life than LH and provides extended stimulation to multiple corpora lutea following ER. This is associated with an increased risk of ovarian hyperstimulation syndrome (OHSS), a major risk of ovarian stimulation. A single bolus of a gonadotropin releasing hormone agonist (GnRH-a) also induces an endogenous LH surge. The short duration of the GnRH-a induced LH surge leads to luteolysis and significantly decreases risk of OHSS. However, luteolysis is associated with decreased pregnancy and increased miscarriage rates following fresh embryo transfer in GnRH-a triggered cycles. The addition of a small dose of hCG for luteal phase support restores clinical outcome to some extent, at the cost of a small risk of OHSS, precluding the use of hCG at all in women under high risk of OHSS. This retrospective study compared outcomes of the standard 6,000 IU hCG trigger with a dual trigger comprised of 6,000 IU hCG and 0.1 mg leuprolide acetate for oocyte maturation in intracytoplasmic sperm injection (ICSI) cycle.

Material and Method: All women undergoing egg retrieval were given dual trigger including 0.1 mg leuprolide acetate and 6000 IU recombinant hCG for oocyte maturation between January and September 2018. These women comprised the Dual Trigger group. Women who received 6000 IU rhCG as the ovulation trigger between September 2017 and January 2018 (the three month period immediately before dual trigger) and September 2018 and January 2019 (the three month period immediately after the dual trigger) comprised the hCG trigger group. Women deemed to be at risk of ovarian hyperstimulation syndrome was not given any hCG at all and excluded. Gonadotropins were started on the 2nd or 3rd day of the menstrual cycle after ruling out ovarian or endometrial pathology. Ovarian response to gonadotropin was evaluated by ultrasound the 5th or 6th day of stimulation and every one to three days afterwards, based on clinical judgement. Daily 25 mcg GnRH antagonist injections were started when the leading follicle diameter was 14 mm or serum estradiol level exceeded 200 ng/ml. Final oocyte maturation was triggered when two follicles were >17 mm. Transvaginal oocyte collection was done 36 hours after the trigger.
Fertilization was by ICSI, all embryos were cultured to the blastocyst stage, regardless of oocyte number.

**Result:** Total number of patients in each group was 50. There were no statistically significant difference between two groups in the median number of oocytes (8 in dual trigger and 7 in hCG only group), Metaphase two oocytes (6 in dual trigger and 5.5 in hCG only group) and the median number of blastocyst was 1 in both groups. Women only underwent embryo transfer if they had at least one blastocyst. Fresh embryo transfer was done for 30 out of 50 patients in dual trigger and 25 out of 50 patients in hCG only group. Similar number of embryos were transferred in both groups, the vast majority was single blastocyst transfers. Clinical pregnancy rate per patient was 28% and 22% in dual trigger and control groups, respectively. Pregnancy rate per transfer was: 53.3% in dual trigger and 53.8% in hCG only group, respectively. Ongoing pregnancy rate was 22% for patients in dual trigger and 20% in hCG only group. Differences were short of statistical significance. Miscarriage rate was 8% in both groups. There were no case of severe OHSS in any of two groups.

**Conclusion:** In a non selected group of women representing general ART patient population, the addition of a GnRH agonist to the standard dose of hCG, as dual trigger for oocyte maturation stimulation in normal responders and poor responder patients failed to improve outcomes of ICSI. Most studies published to date are retrospective and publication bias favoring positive findings. Proper randomized trials are still needed.

**Keywords:** Dual Trigger, Infertility, GnRG agonist, hCG, IVF outcome, oocyte maturation

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**Does Chorionic Villus Sampling Increase the Risk of Preeclampsia or Gestational Hypertension?**

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**Background:** Chorionic villus sampling (CVS) and amniocentesis are two methods for prenatal diagnosis. The goal of this study was to compare amniocentesis and CVS-related complications in a large sample of Iranian women.

**Methods:** Medical records of 1624 women who underwent amniocentesis or CVS due to medical indications between 2008 and 2016 were reviewed. Data regarding age, gravidity, parity, gestational age, type of procedure, neonatal weight (and percentile), trisomy, abortion, intrauterine growth restriction (IUGR), severe IUGR, preeclampsia, and gestational hypertension were recorded.

**Results:** Finally, 1215 cases were evaluated. Mean maternal age, gravidity, and gestational age were significantly different between two groups. Preeclampsia, gestational hypertension, IUGR, severe IUGR, and intrauterine fetal death were not significantly different between two groups. Trisomy 18 and 21 were common in cases underwent amniocentesis.
Conclusions: Women who underwent CVS are not at higher risk for developing hypertensive disorders than women underwent amniocentesis.

Keywords: Amniocentesis, chorionic villus sampling, intrauterine growth restriction, preeclampsia.

The Carcinogenic Roles of MicroRNA-613 and MicroRNA-223 in the Epithelial Ovarian Cancer: A Pilot Study

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Introduction: It is generally accepted that ovarian cancer is the leading cause of death among women worldwide as the most deadly cancer in the female reproductive system, and is often diagnosed at developed stages. MicroRNAs play critical roles in the initiation and progression of cancer, metastasis and resistance to different therapies as biological molecules that regulate the gene expression. Studies have found that KRAS protein of miR-31 targets is significantly important in the carcinogenesis of ovarian cancer. The present study also aimed to compare microRNA-613 and microRNA-223 levels in sample patients with ovarian cancer.

Method: In this study, 25 samples of malignant ovarian cancer, 25 samples of benign ovarian cysts and 5 samples of healthy ovaries were collected and stored in -70°C. RNA was extracted and complementary DNA (cDNA) was prepared by Cdna synthesis kit. The gene expression level of MicroRNA-613 and MicroRNA-223 was evaluated by Real Time PCR method. Results were analysed by SPSS 21 software and one way ANOVA statistical method.

Results: According to an analysis of obtained results of Real-time PCR technique by a relative method in two groups of patients with ovarian cancer and benign and malignant tumors, and a healthy group, the relative expression of miRNA-223 in samples of malignant tumors, benign tumors and healthy ovaries was 1.94, 0.64, and 1.26 respectively (p=0.01). These results indicated that the relative expression of miRNA-613 in samples of malignant tumor, benign tumor and healthy ovaries was 0.65, 2.13, and 1.78, respectively. (p=0.05).

Conclusion: We can conclude that miRNA-613 and miRNA-223 have potential for introduction as research targets in biomarker discovery studies for early diagnosis of metastasis in patients with ovarian cancer. They can also be effective in anticipating the response to treatment, and play potential roles in developing therapeutic approaches and predict treatment outcomes in ovarian cancer patients.

Keywords: Ovarian Cancer; miRNA-613 and miRNA-223.
**Effect Gabapentin on Pain Reduction After Cesarean in Women with Elective Cesarean Section and Spinal Anesthesia**

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Post cesarean pain is the most common postoperative complaint and has been shown with little evidence that gabapentin reduces acute pain after reduction section. The aim of this study was to evaluate the effect of gabapentin on pain reduction after cesarean section this is a double blind randomized clinical trial. Women referring to the shahidan mobini hospital who are planning to perform elective cesarean section with spinal anesthesia are included in the study after obtaining satisfaction from patients and controlling entry and exit criteria, they are selected as research units. The goals and methods of works are described to patients. Patients are divided into two randomized groups that consist of the control group (one capsule of placebo) and the intervention group (one capsule of gabapentin 300mg). Both group receive medication after cesarean. After cesarean the pain intensity of the patient was recovered at hours 2, 4, 6, 12, and 24 after cesarean based on VAS (visual analog scale). Statistical analysis was performed using SPSS 20 software and chi_square test with a significant level of P<0.05.

In the intervention group, more pain relieving was observed during the first 24 hours than the control group (P: 0.043). Also, the difference in the level of satisfaction with pain relieving drug were different in two groups (P: 0.00). Patient in the two group did not differ significantly in terms of lactation, frequency of drug use, visual acuity of pain, side effect such as itching, blurred vision, abnormal eye movement and duration of the first dose of opiate.

This study has shown that gabapentin can be used effectively to relieve of pain after cesarean section.

**Keywords:** Gabapentin, Pain, Cesarean section.

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**Comparison Between Misoprostol and Extra Amniotic Salin Infusion (EASI) for Cervical Ripening**

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**Introduction:** Cervical ripening is very important in successful labor induction. There are several mechanical and medical methods for cervical ripening. This study aimed to compare the efficacy of Misoprostol and EASI for a successful labor induction.
**Materials and Methods:** In this double-blind clinical trial, 130 singleton term parturients (age 18-45) with unripe cervix were randomly allocated into two groups: Misoprostol and EASI. First group received Misoprostol (25 μg/vaginal) and the second group had foly catheter. All groups were compared for induction time to the active phase of labor, induction time to the delivery, dilatation changes during the first 6 hours after intervention, Type of delivery, Duration of hospitalization, meconium passage and adverse effects of these methods.

**Findings:** Findings show that two groups were matched in terms of age, parity, gestational age, BMI, and initial dilatation and Bishop Score. There was a significant difference between two groups in Bishop Score and cervical dilatation 6 hours after induction which was more in EASI group. (P <0.0001). The interval time between onset of induction and active phase of labor and delivery were significantly, shorter in EASI group. (P <0.0001). Cesarean rate in Misoprostol group was significantly higher than EASI groups. (P<0.026). The rate of fetal distress, placental abruption, and amniotic fluid meconium was significantly higher in misoprostol group (P<0.0001). Hospital length of stay was shorter in EASI group (P<0.0001).

**Conclusion:** EASI seems to be more effective and safer than Misoprostol for cervical ripening. Considering to its availability and lower cost, it is recommended to use for cervical ripening.

**Keyword:** Misoprostol, EASI, Labor, Induction.

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**A Case Report of Rapidly Progressing Mucinous Cystadenoma in Early Pregnancy**

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**Backgrounds:** Introduction  The incidence of ovarian cysts during pregnancy is less than 5%, and most of them are benign in nature. Adnexal masses are usually asymptomatic during pregnancy unless they reach large sizes. Diagnosis may be done incidentally during routine obstetric ultrasound examination. Mucinous cystadenoma is a multilocular and unilateral cystic benign epithelial tumor of the ovary and reaches huge sizes during pregnancy due to their hormone responsiveness. They are most common in the third to fifth decades of life and may be 20-30 cm in size. Ovarian torsion, cyst rupture, aortocaval compression, preterm labor and intrauterine growth restriction are the most common complications of the huge ovarian masses during pregnancy.

**Material and method :** Case presentation  A 18-year-old pregnant woman (gravida 1) presented to the outpatient clinic with rapidly progressing abdominal distension and sonography report for a huge multilocular abdominal mass during the 14th weeks of gestational age. The mass measures 25* 23 Cm in diameter with the left ovary origin with multiple internal septa. She underwent laparotomy for cyst resection at 16th
weeks of gestational age. There was a huge ovarian cyst with smooth surface and really thin wall made us to evacuate the cyst fluid before its resection. There was 6500 ml mucinous fluid for evacuation and multiple cyst wall projections led to unilateral salpingo-oophorectomy instead of cystectomy. The appendectomy was down due to its nodularity. The pathology report was in favor of benign mucinous cystadenoma with normal appendix. She was discharged the day after surgery without any complication. The progesterone was prescribed for pregnancy support and now she is at the 22th weeks of gestational age with normal fetus growth. Result: In conclusion rapidly increasing the size of the cyst can be a sign of malignancy and an indication of surgery as took place in this case.

**Conclusion:** There are different approaches to the adnexal masses during pregnancy. Usually; watchful waiting should be adopted unless an unexpected event such as torsion, rupture, infarction, fetal intrauterine growth impairment emerges requiring surgical intervention. We also believe that the high intra-abdominal pressure provided by the ovarian mass may lead to the preterm delivery. An elective operation during the second trimester versus conservative treatment is related to the risk of malignancy. Indeed, an emergency procedure undertaken after an expectant management did not show worse obstetric outcomes when compared with elective surgery. However, some researchers still advocate elective surgery. In conclusion rapidly increasing the size of the cyst can be a sign of malignancy and an indication of surgery as took place in this case.

**Key words:** pregnancy- mucinous cystadenoma- ovarian cyst.

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**B-Lynch Plus: A Technique in Uterine Conservative Surgery in Asymmetric Uteri with Atony**

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Postpartum massive uncontrolled hemorrhage is a main cause of maternal mortality and morbidity, accounting for 25-30% of all maternal deaths. Uterine atony is the most common cause of this serious problem (75-90%). Early diagnosis and teamwork are very important. Intravenous fluid resuscitation and use of blood products, uterine massage, uterotonics, uterine tamponade procedures and selective radiological embolization of the bleeding vessel all play potentially successfully roles during management of uterine atony.

With failure of conservative managements, surgical intervention is necessary. The choice of surgical intervention technique to be used depends on the experience of the surgeon, parity of the patient and the desire for preservation capacity, the amount of the hemorrhage, and the general condition of the patient. The B-Lynch suturing
technique is a conservative surgical treatment to this problem. It was developed by Christopher B-Lynch and first described in 1997 and has been widely adopted where postpartum hemorrhage is due to uterine atony. Often the classical B-Lynch suturing technique can stop postpartum hemorrhage without the need for additional surgery and allows preserving fertility. However, when the uterus is asymmetrical in shape, such as in the presence of uterine fibroids or congenital uterine anomalies such as unicornuate uterus, proper placement of vertical brace sutures may not be possible and one of the vertical brace sutures tends to slip laterally toward the broad ligament. In this situation, if the two ends of the suture below the cesarean incision are pulled too tight to try and maintain their position around the asymmetric uterus, the suture may tear, or can unduly damage the uterus e.g. the sutures can cut through the uterine wall and embed in the myometrium or cause ischemic necrosis.

In order to solve this problem, we describe an additional step in association with classic B-Lynch suturing technique. After caesarian section, in an atonic uterus, the classical B-Lynch suturing procedure starts. After completing all steps of the original B-Lynch suturing technique and before manually compressing the uterus, another free thread is passed under the pair of vertical brace sutures at the level of the fundus and its two ends are held by an assistant. While the uterus is being compressed, the two lengths of suture below the cesarean incision are pulled tight, the principal surgeon placing surgeon knots to secure tension.

Two ends of the horizontal loop at the fundus are then tied with mild tension, bringing the vertical braces suture closer together. The lower transverse uterine incision is now closed in the routine manner. This additional step described above is simple, does not lead to further puncturing of the uterus, and adds minimal time to the procedure. It allows achievement of the primary goal of the procedure to compress the uterus without occluding the uterine arteries or uterine cavity.

**Keywords:** Postpartum hemorrhage, B-Lynch suture, uterine atony

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**Evaluation of the Effectiveness of Using Intraperitoneal Lidocaine in PostCesarean Pain Decrease**

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**Objective:** Women usually suffer from postcesarean pain. The objective of this study is to evaluate the effects of intraperitoneal instillation of lidocaine on postcesarean pain in patients with parietal peritoneal closure.

**Methods & Materials:** After getting informed consent, we enrolled 18-45 years old women with term singleton pregnancies and BMI < 40 (kg/m2) scheduled for elective cesarean delivery under spinal anesthesia. Spinal anesthesia was performed with 0.75% hyperbaric bupivacaine, fentanyl, and morphine. In all cases, surgery was performed through a Pfannenstiel incision. After delivery of the neonate and placenta, uterine closure was completed, with or without exteriorization of the uterus, and blood accumulating into the pelvis was carefully wiped with surgical towels to leave a relatively dry pelvis. At the end of the cesarean delivery, immediately before parietal
peritoneum or fascia closure, patients were randomized to receive either lidocaine (20 mL 2% lidocaine with epinephrine) or placebo (20 mL normal saline) instilled into the peritoneal cavity.

Effective factors in VAS score such as duration of surgery, adhesion, previous surgery history, level of anxiety were attended.

In the postoperative period, pain assessment was carried out by VAS and duration of analgesia was calculated as the time taken from the onset of sensory block to the first request for supplemental analgesia. Haemodynamics and side effects were also recorded in all patients.

The primary outcome was pain score on at 24 hours. Secondary outcomes were pain score at 6, 12, and 24 hours; maternal satisfaction score; analgesic consumption; incidence of nausea, vomiting, and itching; and return of bowel function.

**Results:** 185 women were recruited. The average age was 29.13y, BMI 29.39, timespan of previous cesarean 4.7 y, total duration of surgery 42 minutes. The average pain experienced by patients in 6, 12 and 24 hours was 5.3, 4.7 and 3.1. There was no significant difference between two groups in terms of age, education, BMI, disease, drug usage, previous cesarean etiology, drug and alcohol abuse, smoking, anxiety and depression, duration of surgery, bleeding rate during surgery, hematocrit decay, nausea & vomiting and itching.

Pain at 6, 12, 24 hours postcesarean delivery was significantly different between both study groups. The average of pain at 6 hours postcesarean was 6.96 in group A and 3.7 in group B (P<0.001). The average of pain at 12 hours postcesarean was 5.41 in group A and 4.04 in group B (P<0.001). The average of pain at 24 hours postcesarean was 3.5 in group A and 2.7 in group B (P=0.007).

Petedin and acetaminophen usages for breakthrough pain were significantly different between the lidocaine and placebo groups (P=0.035 and P=0.005 respectively). Also the total amount of required diclofenac was significantly lower in lidocaine in compared with placebo group (P<0.001).

The total amount of diclofenac was equal in both groups, but the time of first request of diclofenac in placebo group (4.7 hours) was earlier in compared with lidocaine group (7.1 hours) (P<0.007).

**Conclusion:** The use of intraperitoneal instillation of lidocaine improves early postoperative pain management after cesarean delivery. Furthermore, it reduces the number of women requesting systemic opioids in the immediate postpartum period. Also no considerable side effect was observed.

**Keywords:** Lidocaine- postcesarean- pain
Comparing Recurrence rate of Endometrioma After Laparoscopy in Bilateral Cystectomy and Unilateral Cystectomy with Drainage in Opposite side

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Backgrounds: Cysts of endometriosis of the ovary (endometrioma) is the most common form of endometriosis. Bilateral cystectomy can be associated with post-operative reduction in fertility, and risk of menopause due to unwanted removal or inactivation of ovarian follicles. However, unilateral cystectomy with aspiration of opposite side could lessen these negative outcomes but it might be associated with increased recurrence rate. This study aimed to compare recurrence rate between these two methods of laparoscopy.

Material and method: This retrospective cohort study was conducted on a sample of women with bilateral endometrioma undergoing bilateral cystectomy (group A) and unilateral cystectomy with drainage of opposite side (group B) between 2013 and 2015 in a teaching hospital affiliated to Tehran University of Medical Sciences. They were compared in sonographic recurrence one year following surgery. Also patients’ information and surgical reports were extracted from case records. Data were explored using chi-square and logistic regression analyses.

Result: In all data for 75 patients were available for analysis (50 patients in group A and 25 patients in group B). Recurrence of the disease after 1 year was 31 (41.4%) in all patients, 17 (34%) patients in group A and 11 (44%) patients in group B. Although recurrence rate in group B was higher, there was not significant difference in two groups (p = 0.58). However, after controlling for age, and additional treatment by drug, the odds ratio for recurrence for group B compared to group A was 2.62 (95% CI: ).

Conclusion: In general the findings indicated that recurrence rate was lower in bilateral cystectomy compared to unilateral cystectomy with drainage of opposite side, although the difference was not significant. Studies with bigger sample size is suggested to confirm the findings.
Omental Metastasis in Endometrial Carcinoma

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Backgrounds: The greater omentum represents an important site of metastases in ovarian cancer and peritoneal carcinomatosis. But it is unusual in endometrial carcinoma. The current study was to determine the prevalence of omental metastasis in endometrial carcinoma and to correlate risk variable with this spread.

Material and method: A retrospective analysis of patients with endometrial carcinoma who underwent omentectomy in additional to staging laparotomy was performed in the Tehran Valiasr teaching hospital from 1995 – 2015.

Result: Omental metastasis were noted in 27 of the 500 patients with endometrial cancer (5.4%). Tumor histology in 17 cases (62.9%) were papillary serous carcinoma or clear cell carcinoma or malignant mixed mullerian tumor. 21 (77.7%) had histopathology confirmed grade 2 – 3. 16 patients (59.2%) were identified with ovarian metastasis and 13 cases (48.1%) with deep myometrial invasion. Parametrial invasion were positive in 6 patient (22.2%) and peritoneal cytology were positive in 5 (18.5%) patient. Median follow up in our study were 20 months.

Conclusion: Omentectomy is one of the important surgical procedures in the high grade endometrial cancer specially serous carcinoma, clear cell carcinoma and malignant mixed mullerian tumor.

* * *

Outcome Assessment of Women with Postcoital Bleeding who Were Referred to the Colposcopy Clinic of Naghavi Hospital Between September of 2013 and March of 2016

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Introduction: bleeding during intercourse or right after it which is not related to menstrual bleeding is called postcoital bleeding (PCB). The most important reason of PCB in women under 35 is Clamidia infection whereas in those over 35 years old cervix cancer is the most important reason. The prevalence of PCB is 0.7% - 0.9%. PCB can be the first manifestation of cervical cancer as in women with cervix cancer the prevalence is reported between 0.7% to 39%. To evaluate women with with colposcopy and determine the risk factors with dysplasia and cervical gigh grade dysplasia.
Method & material: this study is a retrospective Cohort study on women with the chief complaint of PCB from September of 2013 to March of 2016 refered to colposcopy clinic of Kashan,Naghavi,Hospital.

Result: among 259 women with PCB , 8% with CIN I, 10.4% high grade dysplasia that 7.5% CIN II , 2.7% CIN III and 0.4% SCC of cervix is reported. 61% of samples had cervicitis , 11.2% were healthy and 6% with benign reason like polyps. Among evaluated the risk factors, age and cervical dysplasia meaningful statistical relation ( P=0.028 , OR=1.07) . So did the lower age of the first sexual relationship high grade cervical dysplasia (P=0.12 , OR=0.82).

Conclusion: this study showed the almost equal prevalence of cervical dysplasia and high grade cervical dysplasia in studied cases and other studies. It was also determined that there is a relationship between high grade cervical dysplasia and the age of first intercourse as age and cervical dysplasia.

Key words: post coital bleeding, Colposcopy , Cervical dysplasia

Accuracy of Transvaginal Ultrasound- Guided Biopsy in Ovarian Cancer

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Background: Cytoreductive surgery is the standard treatment of ovarian cancer in advanced stages, however sometimes, because the patient is inoperable, only a biopsy is carry out and the surgery will be terminated. Therefore, in such cases, transvaginal core needle biopsy of tumor is suggested to confirm the diagnoses of ovarian cancer; and then neo-adjuvant chemotherapy is performed based on pathology result and then the patient undergoes the main surgery. Trans-abdominal ultrasound-guided core needle biopsy from ascites or ovarian mass is also possible; nevertheless, the tumor might spread at the site of needle and cause abdominal wall metastasis. The aim of this study is to assess the accuracy of using trans-vaginal ultrasound-guided biopsy of ovarian cancers in stages 3 and 4, and to compare it with the pathology of abdominal biopsy and finally to follow-up the probable metastasis to vaginal cuff in a six-12 month patient-related follow-up.

Methods: This study was a diagnostic trial carried out from August 2016 to 2017 in the Department of Oncology of academic Hospital, Mashhad University of Medical Sciences. After initial assessment of clinical findings ( abdominal pain, abdominal enlargement, palpable mass in vaginal examination and lymph node evaluation, etc.), radiological evidence (CT scan based on the probability of stages 3 and 4 ovarian cancer) and laboratory results (high level CA-125) we have chosen 12 patients suspected of having stage 3 or 4 ovarian cancer. Palpable mass was detected during vaginal examination in all the patients who were also laparotomy candidates.
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Results: The pathological results of vaginal biopsy in 8 patients (66.7%) was epithelial serous tumor and in 4 patients (33.4%) was epithelial mucinous tumor. The pathology of abdominal biopsy in final surgery also was in agreement in 100% of the cases. No evidence of metastasis to vaginal cuff was observed during vaginal examinations and Pap smear in 12 month follow-up period.

Conclusion: Trans-vaginal ultrasound-guided biopsy is an accurate method in diagnosing the pathology of ovarian cancer in stage 3 or in patients with no possibility of optimal surgery.

Key words: ovarian cancer-core needle biopsy-pathology

Preoperative Preparation in Cancer Disease

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Backgrounds: Patients may be healthy or desperately ill with nutritional, neurologic, metabolic, endocrinologic, electrolyte, cardiac, pulmonary, renal, hepatic, hematologic, or pharmacologic disabilities, requires correction. Thus, requires evaluation of all systems. Hypercalcemia, uric acid nephropathy, hyponatremia, nausea, vomiting, anorexia and cachexia, fever, tumor-induced hypoglycemia, intracranial metastases, peripheral nerve or spinal cord disorders, meningeal carcinomatosis, toxic neuropathies, and paraneoplastic neurologic syndromes may seen.

Material and Method: Nausea and vomiting are the most common side effects of chemotherapy and radiation. Ondansetron, droperidol, and metoclopramide control nausea. TCA potentiate the analgesic effects of opioids.

Result: Hepatic or renal dysfunction influence the choice of anesthetic drugs. Prolonged response to Sch is seen in patients being treated with alkylating chemotherapeutic drugs. Aseptic technique is important because immunosuppression occurs with most chemotherapeutic agents. Immunosuppression produced by anesthesia, surgical stimulation, or blood transfusion could exert effects on the patient’s subsequent response to cancer. Because of suppression of the immune response, some anesthetic drugs may assist in tumor growth or enhance aggregation of some cancer proteins.

Conclusion: Patients may have life-threatening airway difficulties and upper airway obstruction with head, neck, and chest tumors. Required to assess potential difficulties that may arise in securing the airway. Awake fiberoptic intubation is the gold standard. In some patients, tracheostomy may be indicated. Preoperative evaluation includes a review of potential side effects related to chemotherapy. Placement of intravenous catheters in the arm at risk of lymphedema is avoided because exacerbation of lymphedema and susceptibility to infection. It is necessary to protect that arm from compression and heat exposure. Bone pain and pathologic fractures is noted in regional anesthesia and when positioning patients. Selection of anesthetic drugs, techniques, and special monitoring is influenced more by the planned surgical procedure than by the presence of cancer. Isosulfan blue dye is injected during the surgery, can transient decrease in SpO2.
Poster Presentations

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A Survey on the Status of Breast Cancer Biomarkers Referring to Shohada Tajrish Hospital from 1999 to 2014

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Cellular and Molecular Biology

Backgrounds: Breast cancer is the most common cancer in women worldwide. It categorized into at least five main groups based on the antibody markers such as ER, PR and HER2 that differ in terms of risk factors, distribution, prognosis, treatment and clinical outcome. Thus we evaluate the breast cancer survival and therapeutic outcomes based on immunohistochemical biomarkers to highlight the results for better prognosis for eliminating worries among women.

Material and Method: Subjected were 1772 women with new cases of breast cancer diagnosed from January 1999 to January 2014 at Shohada educational hospital, Tehran. In this study, we selected a simple classification based on the expressions of estrogen, progesterone receptors and human epidermal growth factor receptor 2 (Her2). We therefore classified breast cancer cases into four subgroups: luminal A (ER+ and/or PR+, HER2-); luminal B (ER+ and/or PR+, HER2+); BCL (ER-, PR-, HER2-) and Her2/neu (ER-, PR-, HER2+).

Result: The majority of cases were luminal A (37/16%), followed by the luminal B (15/14%) and (13/12%) BCL whereas only 6/82% of tumors were classified as Her2/neu and other are missing values. There were significant differences between IHC subgroups with respect to grad (p-value ≤0.001). The hazard ratio (HR) for each group compare to luminal A significantly was higher in Her2/neu (HR=3.5, P<0.001) and luminal B was about 2. It means that Her2/neu risk is 3.5 times than luminal A.

Conclusion: These findings indicate that the risk of mortality in each sub-group could be modified by adjusting grade and stage.

A Case Report of A Larg Rectus Muscle Size Endometriosis

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Background: Given the impact of endometriosis on patients' social lives, marital relationships, and fertility and on reducing these people's quality of life, its proper diagnosis and treatment seem vital. This study aimed to report a case of rectus muscle endometriosis and the way it was managed.

Case Report: The patient was a 30-year-old woman who had a history of dysmenorrhea and chronic pain for 2 years after her first delivery performed by cesarean section. During ultrasonography conducted on the anterior abdominal wall
of the midline, a mass indicating endometriosis was observed in the abdominal wall at
the site of the cesarean section incision scar and in the thickness of the rectus muscle.
After the termination of pregnancy and during the cesarean section, the mass was
removed and the patient’s symptoms subsided.
**Conclusion:** Considering a patient's complete records and getting aid from imaging
techniques are effective in managing endometriosis.
**Keywords:** Endometriosis, Rectus Muscle, Case Report.

**Effect of Herbal Capsule of Teucrium Polium on Menstrual Bleeding Duration Using Random Effects Model**

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Teucrium polium is a herbal remedy with many therapeutic properties and has anti-
diabetes effects and has anti-inflammatory and anti-inflammatory effects. It is also
used traditionally to treat menstrual pain, headache, seizure and digestive disorders.
For this purpose, a study was conducted to compare the efficacy of Teucrium polium
in reducing bleeding in menstruation. This clinical trial was performed on 70 single
girl students living in student dormitories of Shahid Beheshti University of Medical
Sciences. They were randomly divided into two groups. Samples were divided into
intervention and control groups. The 250 mg capsule containing 250 mg capsule
powder containing 250 mg capsule powder containing starch powder for the first 3
days of menstruation, received four times daily for two consecutive menstrual cycles.
The duration of menstrual bleeding was assessed by Higma chart. Data were analyzed
using SPSS software version 20 and ASA 9.2 software and independent t-test, Mann-
Whitney and random effects models were analyzed. There was no significant
difference between the two groups before intervention, but in the two post-
intervention period, it was found that the participants in the polupour group had a
shorter duration and amount of menstrual bleeding Therefore, it seems that the
colposcopy can reduce the duration and amount of menstrual bleeding when taken at
the first 3 days of menstruation.
**Keywords:** Length of menstrual bleeding, Teucrium polium, Placebo
The Effect of Aromatherapy Massage with Geranium Essence on Pain Severity of Primary Dysmenorrhea

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Introduction: Primary dysmenorrhea is one of the most common gynecologic problems in women. The pain occurs alternately from mild to debilitating. Aromatherapy is one of the non-pharmacological methods in the treatment of primary dysmenorrhea. This research was performed to study the effects of aromatherapy massage with scented geranium oil on the pain intensity in primary dysmenorrhea.

Methodology: This randomized clinical trial was conducted on 90 students of Neyshabour University of Medical Sciences in 2017. Samples were selected using purposive sampling method and randomly allocated to three groups. In intervention group were massaged with scented geranium oil (5%) and in placebo group, the same procedure was performed using sweet almond oil. The intervention and placebo groups received the treatment on the first day of menstruation in two consecutive cycles. The control group received no intervention. Only the severity of their pain was recorded in each cycle. The data were collected by demographic information and visual analogue scale. The pain intensity was measured before, immediately after and 24 hours after the treatment. SPSS software (version 19) was used for data analysis and ANOVA, repeated measures ANOVA and Chi-square test were performed at a significant level of less than 0.05.

Findings: There was no statistically significant difference in pain intensity between the patients in zero cycle before the treatment (P=0/087). Also, there was no significant difference in pain intensity in the first cycle before the treatment (P=0/112). Research samples There was no significant difference in pain severity in second cycle in before the treatment (P=0.007) but there was a significant difference in pain intensity between the patients in the first and second cycle immediately after and 24 hours after the treatment (P<0/001). As a result both Sweet almond and geranium group had less pain compare to the control group. While both massage and aromatherapy are effective in increasing the pain intensity, aromatherapy massage is more effective (P<0/001).

Conclusion: Aromatherapy massage with geranium essence can be used as a non-pharmacological method to reduce the pain of primary dysmenorrhea.

Key words: primary dysmenorrhea, Aromatherapy massage, pain, scented Geranium, Complementary medicine
ThinPrep Pap Test for Diagnosis of Cervical Cancer in Early Stages

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Background: Cervical cancer is one of the world’s deadliest – but easily preventable – forms of cancer and Pap smear is the most popular screening test for diagnosis in early stages. The aim of our study was to assess potential screening rule of ThinPrep Pap test.

Study design: Cross sectional study

Methods: Cervical samples were collected from all women who referred to a pathology center for Papanicolaou test and all samples were prepared with ThinPrep process. To assess validity, biopsy was selected as gold standard. 131 women who had ThinPrep Pap test and biopsy were considered for the analysis. The participants were selected purposeful. Three thresholds were used to define test positivity: 1) Atypical squamous cells of undetermined significance (Asc-us) 2) Low grade squamous intraepithelial lesion (LSIL) 3) High grade squamous intraepithelial lesion (HSIL) and worse. Inter and intra observer reliability were evaluated using kappa (simple and weighted) as well as Fleiss kappa and validity were assessed by the well-known validity estimates for qualitative variables.

Results: Intra observer reliability was moderate for pathologists with low and moderate experience (kappa was 0.44 and 0.46 respectively) and was good for experienced pathologist [kappa (WK) = 0.64]; however, inter observer reliability was poor (Fleiss kappa=0.12). For diagnosis of ASCUS and worse, the sensitivity was 96.3% and for diagnosis of HSIL and worse the sensitivity and specificity were 86.6% and 95.1%, respectively.

Conclusion: ThinPrep pap is an acceptable screening test for diagnosis of cervical cancer in early stages. However, experience and specialty have effect on reliability’s results.

Key words: ThinPrep; Papanicolaou; Validity; Inter and intra observer reliability.
Comparison of the Effects of Peppermint Creams on Treatment of Traumatic Nipples in Breastfeeding Mothers

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Backgrounds: Traumatic nipple is among the most common problems of the breastfeeding period which leads to early cessation of breastfeeding. The study aimed to compare the effects of the peppermint creams on the treatment of traumatic nipples.

Material and method: This double blind randomized controlled trial was carried out on 84 breastfeeding mothers, had visited at the health centers and children’s hospitals in Sanandaj City (2014-2015). The selected participants were randomly divided into the following [M1] two groups of peppermint cream and placebo group, liquid-based moisturizing cream (placebo). After receiving written consent both groups received proper breastfeeding and drug use training. Nipple pain was measured using the Store scale while trauma was measured with the Champion scale. Analyses were carried out through the Chi-square, Fisher exact test, Independent t-test, Mann-Whitney and Wilcoxon.

Results: The result showed that the mean score of nipple pain and nipple trauma was significantly lower in peppermint cream group. This safe cream can be used to solve the big problem with breastfeeding. But the mean score of nipple pain and nipple trauma at third (p<0.001), seventh (p<0.001), and fourteenth (p<0.001) days of intervention was significantly different between two groups. The mean score of nipple pain and nipple trauma showed a significant difference in comparison of the four time periods of intervention in peppermint cream group (p<0.05).

Conclusion: The result of Mann-Whitney test showed that the mean score of nipple pain and nipple trauma was not significantly different between two groups at the prior to intervention.
The Effect of Cinnamon on Cyclical Breast Pain

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Backgrounds: Cyclic mastalgia (breast pain) is one of the most common reasons for referral of women of childbearing age to physicians. Due to the increasing popularity of herbal medicines among women, this study investigates the effect of cinnamon on cyclical breast pain.

Objectives: The aim of this study is to determine the effect of cinnamon on cyclical breast pain.

Material and method: This was a randomized clinical trial in which 74 women with cyclical breast pain and who met the eligibility criteria were randomly divided into intervention and control groups, based on the four and six random block sampling method. Cinnamon was given to the intervention group and a placebo was given to the control group. The collected data was analyzed by SPSS (statistical package for social science) statistical software (version 14). Chi-square, repeated measures ANOVA (analysis of variance), and independent and paired t-tests were performed.

Result: The mean (SD) values of the patients in the intervention group and the control group were 9.08(3.56) and 9.45(2.55), respectively. There was a statistically significant difference between the two groups in the mean scores of pain at the end of the first and second months (P < 0.001 and P = 0.02), meaning the pain intensity at the end of the first and second months were significantly lower in the intervention group than in the control group. The end result of this study showed improvement in both the intervention and control groups: 54.1% and 2.7%, respectively. Also, an intra-group comparison with ANOVA with repeated measures, the pain mean at the three time periods showed a statistically significant difference between the two groups (P < 0.001 and P = 0.02).

Conclusion: Cinnamon can be effective in reducing the intensity of cyclical breast pain in women.
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**Comparison Between Laminaria and Extra Amniotic Salin Infusion (EASI) for Cervical Ripening**

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**Introduction:** Labor induction for terminating pregnancy in term parturient with unripe cervix has been concerned for many years. Laminaria and Extra Amniotic Saline Infusion (EASI) have been used for labor induction. This study aimed to compare the efficacy of laminaria and EASI for a successful labor induction.

**Materials and Methods:** In this double-blind clinical trial, 130 singleton term parturient (age 18-45) with unripe cervix were randomly allocated into two equal groups of intra cervically laminaria or EASI. Two groups were compared for induction time to the active phase of labor, induction time to the delivery, dilatation changes during the first 6 hours after intervention, type of delivery, Duration of hospitalization and adverse effects of two methods.

**Findings:** Findings show that two groups were matched in terms of age, parity, gestational age, BMI, and initial dilatation and Bishop Score. There was a significant difference between two groups in Bishop Score and cervical dilatation 6 hours after induction which was higher in the EASI group. (P<0.0001). There was a significant difference between the two groups in terms of the interval between the onset of induction and the active phase of labor and the initiation of induction until delivery, which times were less in the EASI group (P<0.0001). The rate of cesarean section, placental abruption, and amniotic fluid meconium and fetal distress were not different in two groups. Hospital length of stay was shorter in EASI group (P<0.0001).

**Conclusion:** The EASI method seems to be more effective than laminaria for cervical ripening. Given its feasibility and lower cost, it is suggested to be used for cervical ripening.

**Keyword:** Laminaria, Extra Amniotic Saline Infusion, Labor, induction
Evaluation of peripheral blood NK cell subsets and cytokines in unexplained recurrent miscarriage

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Background: Recurrent miscarriage is considered as one of the main problems in women's reproductive health. The aim of the present study was to evaluate the NK cell subsets and cytokines in unexplained recurrent miscarriage and fertile women.

Material and Method: In this case-control study, 40 women with unexplained recurrent miscarriage were assigned to the case group and 40 nonpregnant women were assigned to the control group. NK cell subsets (CD56+ CD16+/ CD56+ CD16−) and cytokines (IL-2 / IL-12) levels in the peripheral blood (PB) were used for assessing immunologic problems. The percentage of peripheral blood NK cells (CD56dim/bright) was identified by flow cytometry.

Results: The obtained results showed a significant difference in CD56+ CD16+ and CD56+ CD16− between the two groups. Also, IL-2 and IL-12 values were higher in the group with recurrent miscarriage. A cut-off value of ≥ 5.25% (P < 0.001) and ≥ 3.4% (P < 0.015) for the increased percentage of CD56+ CD16+ and CD56+ CD16-cells in the PB become to be Predictive of recurrent miscarriage.

Conclusion: Increased NK cells and cytokines in the PB of women with recurrent miscarriage strongly establish prospective researches to recognize the predictive value of these parameters in the evaluation of patients with recurrent miscarriage.

Keywords: Natural killer cells; Cytokines; Peripheral blood; Recurrent miscarriage.

The Effectiveness of Childbirth Preparation Classes on Pregnant Mothers Worries Mazandaran 2018

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Backgrounds: Pregnancy is a different experience with multiple changes which may lead to mother’s worry. Worry is associated with physical and psych-social disorders for mother and undesirable consequences for baby too. In a lot of
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Material and method: This descriptive-analytic study was done on prim gravid mothers in Mazandaran (Iran). By simple random sampling, 83 mothers who had participated in childbirth preparation classes and 98 mothers who just received routine prenatal education were recruited. Instruments were demographic questionnaire and Cambridge worry scale. Data were analyzed with descriptive statistics, chi-square and t-test.

Result: Worry of mothers was not significantly different between participants in the classes and those who received routine education (23.24±22.04 vs. 28.93±18.46, p=0.06). Only the medical-social dimension of worry was significantly different between them (13.12±11.95 vs. 17.17±9.19, respectively, p=0.01). The highest scores of worry were about childbirth process (2.04±1.82) and baby's health problems (1.98±1.96) in women who attended in the classes. While in those who received routine education, the highest scores were about childbirth process (3.26±1.64) and vaginal exam (2.59±1.73) and baby's health problems was in third place (2.39±1.97). However the difference between two groups was only significant for worries about financial problems (p=0.04), vaginal exam (p=0.001), childbirth process (p&lt;0.001), baby's gender (p=0.02) and hospital bustle (p=0.01).

Conclusion: Although worry was lower in mother who had participated in childbirth preparation classes, the difference was not significant with routine education. So for effective decrease in various dimensions of mothers' worries, it seems planning to strength the content of childbirth classes is necessary.

Association Between Vitamin D Level in Pregnant Women and Level of TSH in Their Neonates

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Background: prevention of hypovitaminosis D IN pregnancy and related fetal and maternal adverse effects would help to improve the outcomes. However in this study, the association between vitamin D level in pregnant women and level of TSH in their neonates was determined.

Material and Methods: In this observational study as comparative cross-sectional, 100 consecutive pregnant women from firoozabadi hospital were enrolled and the serum vitamin D was assessed in them and the association with neonatal TSH was determined.

Results: in this study the mean maternal serum vitamin D level was 24.9 ±13.3 and the mean neonatal serum TSH level was 2.8 ±1. There was no statistically significant
association between vitamin D level in pregnant women and TSH level in their neonates (p>0.05).

**Conclusion:** It may be concluded that Vitamin D level in pregnant women and level of TSH in their neonates are not interrelated.

**Keyword:** vitamin D, Thyroid, neonates

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**Breast Cancer Risk Based on the Gail Model and its Predictors in Iranian Women**

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**Backgrounds:** This study was carried out to examine breast cancer risk and its fertility predictors in women aged ≥35.

**Material and method:** This cross-sectional study was conducted on 560 healthy women referred to health centers of Tabriz-Iran, 2013-2014. Five-year and lifetime risk of developing breast cancer were determined using the Gail model. General linear modeling was applied to determine breast cancer predictors.

**Result:** The mean age of the subjects was 42.7 (SD: 7.7) years. Mean 5-year and lifetime risks of developing breast cancer were determined to be 0.6% (SD: 0.2%) and 8.9% (SD: 2.5%), respectively. Variables of family history of breast cancer, age, age at menarche, parity, age at first childbirth, breastfeeding history, frequency of breastfeeding, method of contraception, marital status and education were all found to be predictors of breast cancer risk.

**Conclusion:** According to the results of this study, screening programs based on the Gail model should be implemented for Iranian people who have a high risk for breast cancer in order to facilitate early detection and better planning for possible malignancies.

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**Treatment of Complication of Vaginal Delivery Hysteroscopy and DC by Laparoscopy**

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**Backgrounds:** Treatment of Complication of Vaginal Delivery, Hysteroscopy and D&C by Laparoscopy.

**Material and Method:** As you know, nowadays vaginal delivery is the main route of delivery and its complications are increasing. We can approach abnormal vaginal bleeding by bilateral UAL by emergent laparoscopy, by an advance laparoscopic team. This will reduce Blood loss and Blood transfusion. We use hysteroscopy more than previous times and uterine perforation is the most common complication. We can
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repair the uterus by emergency laparoscopy. One of complications of D&C is perforation of uterus, colon, rectum and small intestine. In this situations we can repair the ruptured area by laparoscopy. In this lecture we speak about these complications and you see film of this procedures.

**Result:** We can use laparoscopy in many situations.

**Conclusion:** We can treat complication of vaginal delivery, hysteroscopy and D&C by laparoscopy.

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**Knowledge, Awareness and Attitude on HPV and Cervical Cancer in Iranian Medical Students**

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**Background:** Cervical cancer is the third most commonly diagnosed cancer worldwide and the fourth leading cause of cancer death in women. Infection of specific high risk Human papillomaviruses (HPVs) is known to cause cervical cancer. Aim: the aim of this study to determine knowledge, awareness and attitude of Iranian Medical students on HPV, HPV vaccine and cervical cancer.

**Methods:** A questionnaire-based survey was conducted in a total of 640 first year medical students between the age group 18–20 years in Tehran medical sciences school affiliated by Islamic Azad University between Oct 2018 and January 2019. Sampling method was census sampling. For statistical analysis used by SPSS version 21.

**Results:** girls had more knowledge about cervical cancer (35.6%, p<0.001), HPV (28.1%, p<0.001) and HPV vaccines (37.4%, p<0.001) when compared to those in boys. However, knowledge about the types of HPV and vaccines was poor. Also girls had higher awareness compared to boys but no significant differences. About 35% of students agreed that girls should get vaccinated against HPV (p<0.05) and 3% of students agreed that boys should get vaccinated against HPV (p>0.05).

**Conclusions:** It is suggested that there is a need for educational intervention and awareness campaigns to augment HPV immunization program for control of cervical cancer in Iran.

**Keywords:** Cervical cancer, HPV, knowledge, awareness
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Cervical Carcinoma and Sentinel lymph Node Mapping

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Backgrounds: Cervical carcinoma is the second most common type of cancer among women. Effective screening programs can help cancer detection in early stage. Metastasis to lymph nodes is one of the most prognostic factors in patients with early stages. Sentinel lymph node mapping has been widely studied and clinically used for many types of cancer such as breast cancer and melanoma.

Material and Method: Two techniques exist for detecting sentinel node in cervical cancer, which are Blue dye and gamma probe with radioactive isotope (99mTc) .although lymphoscintigraphy has many advantages over the stain method. Detecting the sentinel node is performed via laparoscopy or laparotomy. Laparoscopy is better and more accurate.

Result: Various researchers have focused on this method and its positive results; its superiority against full lymphadenectomy has been declared in previous studies. Moreover, the role of sentinel lymph nodes biopsy in cervical cancer is still being extensively studied. Sentinel lymph nodes biopsy has a higher accuracy to detect metastasis.

Conclusion: So, it can be considered as a more appropriate alternative for pelvic lymph node dissection (PLND), which is a standard technique. Altering the method to a standard clinical method needs in-depth researches and studies.

Comparison the Effects of Topical Application of Olive and Calendula Ointments on Children’s Diaper Dermatitis a Triple-Blind Randomized Clinical Trial

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Introduction: Since diaper, dermatitis is the most common type of skin inflammation in children, safe and appropriate interventions are necessary. Therefore, this study aimed to compare the effects of olive ointment 1.5% and calendula ointment 1.5% on diaper dermatitis in children.

Material and method: This triple-blind clinical trial with a control group was conducted on 73 healthy children under the age of 2 years referred to a pediatric healthcare center in an urban area of Iran. The children were assigned to olive ointment 1.5% (n = 37) and calendula ointment 1.5% (n = 39) using a random block
method with the ratio of 2:2. The intensity of diaper dermatitis was measured on a 6-point scale on days 0, 3, 5 and 7. Complete healing was assigned to zero scores in the 6-point scale and the severity of diaper dermatitis was calculated and compared between the groups and within each group.

**Result:** The degree of diaper dermatitis before and after the intervention as well as in the 3rd, 5th and 7th days after the intervention was not significantly different between the groups. Comparing the degrees of diaper dermatitis within the groups before and in the 3rd, 5th and 7th days after the intervention showed that the intervention had statistically significant differences (p<0.05).

**Conclusion:** Olive ointment has the same effect as calendula ointment on the improvement of diaper dermatitis in children. According to the results of this study, the use of olive ointment is recommended as an herbal treatment with no side effects.

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**Background and Purpose:** The midwife’s self-efficacy in supporting the mother during labor affects the onset of midwifery support in labor and childbirth. To date, there is no appropriate national instrument for measuring midwives self-efficacy of labor support in Iran. The present study aimed to investigate the factorial structure, validity, and reliability of the Persian version of the self-efficacy for labor support scale.

**Materials and Methods:** A methodological study was carried out in which 213 midwives from selected hospitals affiliated to Tehran University of Medical Sciences enrolled between January 2017 and September 2017. The participants completed a demographic questionnaire and the self-efficacy for labor support scale. The first step, for the validity of the instrument, qualitative face and content validity of the scale was performed. The second step, construct validity was evaluated using confirmatory factor analysis. Finally, the reliability of the instrument was studied by Spearman correlation coefficient and internal consistency.

**Result:** The qualitative face and content validity of the Persian version of labor support self-efficacy scale was confirmed, and confirmatory factor analysis showed that it was well structured. The reliability of the scale using Cronbach’s alpha coefficient was 0.93 and the Spearman’s coefficient correlation was 0.72 indicating good reliability of the Persian version of the scale.
Conclusion: The findings showed that the Persian version of the self-efficacy for labor support scale has good validity and reliability and could be used as an appropriate instrument for assessing self-efficacy for labor support by midwives in Iran.

Current Status of Diagnosis of Congenital Anomalies by Ultrasonography in Tabriz

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Background: So far, over 2700 neonatal anomalies have been registered in the United States, and about 5% of births have been associated with these abnormalities that are most recognizable by ultrasound. The aim of this study was to determine the current status of diagnosis of congenital anomalies by performing ultrasonography in Tabriz.

Material And Method: In this cross-sectional study, sonography results of 30 children aged 1 to 59 years old born with congenital malformations were evaluated and a complete documentation of 8 were available.

Results: Based on the results, 3 children with Down syndrome were reported in 12, 19, 30, 36 normal ultrasonography. One case of no hand and feet and a normal ultrasound report in the weeks 17 and 34, one case of lower limb anomalies, spina bifida with CSF and normal sonography report in 13 weeks, one case of encephalocoele with normal sonography at weeks 14, 16 Diagnosis at week 19 of pregnancy, a case of abnormalities of the face and neck and a report of normal ultrasonography in the 12th and 29th gestational age, one case of atresia, absence of radius ulnar, and possibly TAR syndrome with a normal ultrasound report at week 27 and excessive fluid report in ultrasounds of weeks 32 and 40 Was pregnant.

Conclusion: The diagnosis of congenital anomalies is important for the issuance of legal abortion until the 19th week of pregnancy. Therefore, the use of ultrasound equipment and its calibration according to the instructions and standards, and the supervision of the ultrasound centers by the relevant experts in the treatment department, the holding of workshops for sonographers and precision In ultrasonography to detect anomalies at a given time, free ultrasound examination in the 16th to 16th week may require the establishment of a referral center at universities for pregnant mothers to identify high-risk subjects.

key words: Congenital anomaly, Pregnancy ultrasound, Tabriz
Comparison of the Present Situation of Childbirth Delivery in the Country's Hospitals with the Hospitals of East Azarbaijan Province 2018-2019

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Background: Maternity delivery is one of the most sensitive and important services of the healthcare system of all societies and each service should be appropriate, low cost and accompanied with minimum physical and psychological complications. This study aimed to compare the present state of birth in hospitals in East Azarbaijan Province It was done in 2018-2019.

Material and Method: This study is a descriptive cross-sectional study. The data have been extracted and analyzed based on the information recorded in the Iman system (Maternal Baby System).

Results: According to the results, the delivery of cesarean delivery in the country was 50.67% - 62.59%, cesarean section in the first pregnancy was 47.71% - 60.64%, mothers under 18 years of age, 1.69% - 2.52%,% Mothers over 35 years old in the country 19.67%, 19.76%, mothers with at least one risk in the country 92.91 - 92.79, mothers with at least one complication of childbirth in the country 99.92, 62.69, Interventions during delivery in the country 85.73 - Prevalent 75.73, Episiotomy during normal delivery in the country 18.14 - Province 19/18, Induction of labor in the whole of the mothers in the country 14.44- Province 11.50, Normal delivery by the midwife In the country 67.05, the Province is 60/88.

Discussion and conclusion: The status of birth indices in Tabriz hospitals is inferior to the average of an average country. Except for having at least one risk factor, induction of labor, which can be related to high delivery rates by cesarean section. Therefore, increasing family awareness of complications of delivery by cesarean section, involvement of midwives in the delivery of normal labor and the findings of women's specialists about non-performing cesarean section, except for indicating cases and adopting rules for dealing with people who work contrary to the guidelines, will be more beneficial.

key words: giving birth, Hospitals of the country, Hospitals in the East Azarbaijan
Investigating Factors Influencing After Cesarean Section

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Backgrounds: Endometritis is the most common complication of cesarean section and the frequency of infection after cesarean section is estimated to be 3 to 75%. The incidence of infection depends on socioeconomic factors and has dramatically changed with the use of antimicrobial drugs before surgery.

Material and Method: The study was conducted as a review of several articles between 2010 and 2019. A review of the journal and the databases pubmed, scincedirect, elsiver, proqust, willy, spinger, google scular with key words such as risk factors, infection, pregnancy, cesarean section. The results were analyzed and graded as a schematic.

Result: The results showed that complications such as prolonged hospitalization, imposing additional costs, prolonged use of antibiotics, lead to adhesion and infection. There was a significant relationship between postpartum infection and the type of cesarean section (elective or emergency), education level, and maternal age, number of pregnancies, prenatal care, type of anesthesia, overweight and obesity.

Conclusion: Infection after cesarean section has adverse effects on maternal and neonatal outcomes. Therefore, by controlling the preventable factors, the consequences for the mother and the baby as well as the health system can be reduced.

Caesarean Sectional Repair with Low Level Laser Treatment (LLLT)

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Background and Aim: The cesarean section, which is usually used for unintended birth and hysterectomy, almost always has a specific scar. Many women with cesarean section are disturbed by cesarean section. The following study was conducted to evaluate cesarean sectional lesions by low level laser treatment.

Methodology: The study was conducted as a review of several articles between 2010 and 2019. The review was conducted in the journal and databases pubmed, scincedirect, elsiver, proqust, willy, spinger, google scular with key words such as
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cure, cesarean section, low level laser treatment. The results were analyzed and graded as a schematic.

**Results:** The results have shown that the use of different oils, cleansing chemicals, and massage also has no significant effect on the improvement of this cesarean section. Laser technology today is a highly successful method for treating these ulcers. Today, the latest and most powerful lasers are used to treat wounds, even very deep wounds due to hysterectomy and cesarean section. The success of this method depends on several factors, such as the severity of the wound, the duration of the scar and the type of skin. Treatment for cesarean section with laser is one of the least dangerous and effective treatments available. This method of treatment for old scars is also a good solution.

**Conclusion:** Due to the complications of cesarean section and its discomfort, today it is important to pay attention to this. Therefore, the use of modern wound healing methods is an important step in improving the health of women.

**Key words:** cure, cesarean section, low level laser treatment

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**The Importance of Screening in Prevention of Postpartum Depression**

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Dear Editor-in-Chief: Postpartum Depression (PPD) is a major public health problem and a common clinical disorder that occurs after childbirth (1). This disorder is characterized by symptoms such as depressed mood, disappointment, irritability, anxiety, lack of enjoyment of life, excessive fatigue, sleep and appetite disorders, mental and motor disturbances, disruption of family and social communication, self-harming and feeling of guilty or inadequacy particularly regarding the infant care (2-4). In addition to the problems for the mother, the baby and other family members are also affected by this problem.

Psychological and social factors are considered as main factors of PPD (5). As a result, these two factors should be focused in order to resolve the consequent problems. Screening is one of methods through which some of the causing factors can be identified and by preventing their occurrence, the incidence of this type of depression can be reduced and more patients can be found and treated as well. In other words, a wide range of the health system, from primary health centers to providers and therapists, plays an important role in this regard.

Generally, there are tools for PPD screening, and many countries use screening, however these screenings are usually not mandatory (6). Given that depression is increasing in recent years and the World Health Organization has ranked the major
depression as the fourth leading cause of disease burden among all diseases, which can lead to life with disability (7), different countries should more seriously seek the prevention and implement screening. Especially in low and middle-income countries that in which less services are usually provided to people and those with a poor economic status are less looking for programs such as screening. Furthermore, in most countries, poor economic status, for various reasons, leads to a low level of people’s awareness of health-related programs. Culture and traditions are also other important factors. In some countries, especially in the less developed regions, there is no regular referral culture for prenatal care and referral to a physician.

In screening, risk factors of PPD should be noted. The risk factors include previous history of PPD, neurological disorders before childbirth, stressful signs of depression during pregnancy and childbirth, low socioeconomic status, poor social support, problems such as pre-eclampsia, chronic diseases of the mother and embryonic issues (8). Given that screening and treatment of postpartum depression are cost-effective interventions and should be considered as part of routine postpartum care (9), solutions can be utilized to use screening and more impact of it; for example: compulsory use of valid tools for screening such as the Edinburgh Postnatal Depression Scale (EPDS) at primary health centers by midwife and gynaecologist, charge-free screening, providing incentives to expand the use of screening, the implementation of programs such as family physician focusing on screening, documenting and examining effects of screening, correct training of healthcare providers, the use of evidence of successful countries, the development of national and regional guidelines in accordance with cultural and socio-economic conditions, complete follow-up of patients and finally, promoting the culture of referral of people for screening.

Finally, from a health policy point of view, it can be said that the development of correct upstream policies, along with the coordination between pillars providing services and timely delivery of services, based on need and with proper access can ensure the appropriate implementation of the screening program and eventually reduce PPD.

**Contributor Statement:** The authors contributed equally to this work.

**Conflict of interest:** The authors declare that there is no conflict of interests.

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**The Effects of Omega-3 Fatty Acids from Flaxseed Oil on Genetic and Metabolic Profiles in Patients with Gestational Diabetes Mellitus a Randomized Double-Blind Placebo-Controlled Trial**

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**Backgrounds:** This study was performed to evaluate the effects of omega-3 fatty acids from flaxseed oil on genetic and metabolic profiles in patients with gestational
diabetes mellitus (GDM).

**Material and Method**: This randomized, double-blind, placebo-controlled clinical trial was performed in 51 women with GDM. Participants were randomly divided into two groups to intake either 2 x 1,000 mg/day omega-3 fatty acids from flaxseed oil containing 400 mg α-Linolenic acid in each capsule (n=26) or placebo (n=25) for 6 weeks.

**Result**: Omega-3 fatty acids intake upregulated peroxisome proliferator-activated receptor gamma (P<0.001) and low-density lipoprotein receptor (P=0.004), and downregulated gene expression of interleukin-1 (P=0.002) and tumor necrosis factor alpha (P=0.001) in peripheral blood mononuclear cells of subjects with GDM. In addition, omega-3 fatty acids supplementation reduced fasting plasma glucose (β -5.32 mg/dL; 95% CI, -8.14, -2.50; P<0.001), insulin levels (β -2.37 µIU/mL; 95% CI, -3.68, -1.06; P=0.001) and insulin resistance (β -0.68; 95% CI, -0.98, -0.37; P<0.001), and increased insulin sensitivity (β 0.01; 95% CI, 0.004, 0.01; P=0.003) when compared with the placebo. Additionally, omega-3 fatty acids supplementation was associated with a decrease in triglycerides (P=0.001), VLDL-cholesterol (P=0.001), total cholesterol (P=0.03) and total-/HDL-cholesterol ratio (P=0.03) when compared with placebo. Omega-3 fatty acids administration led also to a significant reduction in high sensitivity C-reactive protein (P=0.005) and malondialdehyde (P<0.001), and an increase in total nitrite (P<0.001) and total glutathione levels (P=0.009) when compared with the placebo.

**Conclusion**: Omega-3 fatty acids supplementation for 6 weeks to women with GDM had beneficial effects on gene expression related to insulin, lipid and inflammation, glycemic control, lipids, inflammatory markers and oxidative stress.

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**The Effects of Epinephrine, as a Supplement for Epidural and Spinal Anesthesia, on the Duration of Analgesia During Childbirth and Apgar Score: a Systematic Review and Meta-Analysis**

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**Background**: Labor pain is one of the most severe pains women may experience during their lives.

**Objectives**: This study aimed to systematically review and meta-analyze studies into the effects of epinephrine on the duration of analgesia during childbirth and Apgar score.

**Methods**: This systematic review was conducted in 2018.

**Data collection**: Data were collected through searching online databases, namely the PubMed, Scopus, Google scholar, SID, Medlib, Magiran, and Iranmedex. Inclusion
criteria were an interventional design, comparison of the effects of epinephrine with other modalities on the duration of analgesia and Apgar score, and publication from January 1990 to October 2018 in English or Persian in peer-reviewed journals. Retrieved studies were managed using the EndNote X5, where duplicates were removed.

**Quality appraisal:** Two reviewers independently appraised the retrieved studies using the Consolidated Standards of Reporting Trials (CONSORT 2010) checklist.

**Data extraction:** A data extraction table was designed with the following main items: author name, publication year, country, sample size, study design, duration of analgesia (minutes), Apgar score, and author conclusion.

**Data analysis:** The Comprehensive Meta-Analysis software was used to estimate the duration of analgesia and Apgar score in the epinephrine and the comparison groups. Meta-analysis was performed using the fixed and the random effects models with a 95% confidence interval. The Q and the $I^2$ statistics were used to assess heterogeneity, while the funnel plot and the Egger’s test were used to evaluate the possibility of publication bias.

**Results:** The standardized mean difference between the epinephrine and the comparison groups respecting the duration of analgesia was 0.65 (95% CI: 0.32 to 0.98). This difference was statistically significant ($P < 0.05$). The between-group standardized mean differences respecting the total, one-minute, and five-minute Apgar scores were $-0.33$ (95% CI: $-0.97$ to 0.30), $-0.26$ (95% CI: $-1$ to 0.47), and $-0.54$ (95% CI: $-1.79$ to 0.70), respectively. None of these differences was statistically significant ($P > 0.05$).

**Conclusion:** Epinephrine increases the duration of analgesia without causing serious side effects.

**Keywords:** Epinephrine, Labor, Obstetric, Childbirth, Pain, Systematic review

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**Effect of Kangaroo Mother Care on Hospital Management Indicators: A Systematic Review and Meta-Analysis of Randomized Controlled Trials**

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**Background:** Results of previous studies about the effect of Kangaroo Mother Care (KMC) on Hospital Management Indicators (HMI) (Length of Stay (LOS), readmission to hospital, parent satisfaction and parent’s preference for same post-delivery care) had high confusions. Aim of this study was to conduct a systematic review and meta-analysis of randomized controlled trials on the effect of KMC on HMI in comparison with the Conventional Neonatal Care (CNC).
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**Methods:** In this systematic review and meta-analysis study, required data were collected by searching the following key words: “Length of Stay”, “Readmission to hospital”, satisfaction,” same post-delivery”, “hospital management”, indicators, “skin-to-skin”, “Kangaroo Mother Care”, randomized trial. The following databases were searched: Google Scholar, PubMed, EMBASE, Scopus, and Cochrane. To estimate the hospital management indicators, computer software CMA: 2 was used.

**Results:** finally eighteen articles were included to analysis. The overall LOS standard different between-groups (KMC vs CNC) was -0.91 days (95% CI, -2.14—0.32, Q=25.6 df=10 P-value=0.004 I²= 60.98). The overall readmission to hospital standard different between-groups was -1.78 % (95% CI, -1.21% — 0.86% Q=0.024 df=1 P-value=0.87 I²= 0.00). The overall Parent satisfaction standard different between-groups was 5.3 % (95% CI, -32.4% — 43% Q=0.052 df=2 P-value=0.97 I²= 0.00). The overall standard different between-groups was 16.2 % (95% CI, -24.7% — 57.1% Q=0.040 df=1 P-value=0.84 I²= 0.00).

**Conclusion:** KMC improve the HMI, but not significantly. According to current study result and other studies that report positive effect of KMC on health status of the newborns and parents, implemented of KMC in low and middle income countries recommended.

**Keywords:** Hospital Management, Indicators, Kangaroo Mother Care, skin-to-skin, Conventional Neonatal Care.

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**Vaginal Delivery Postpartum Hemorrhage Incidence Risk Factors and Causes**

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**Backgrounds:** Postpartum hemorrhage is considered as one of the major causes of maternal mortality in the world. Identification of women at risk of postpartum hemorrhage prepares the medical team for faster therapeutic decisions which can reduce maternal complications. This study was performed with aim to identify the risk factors of vaginal delivery postpartum hemorrhage.

**Material and Method:** This cross-sectional analytic study was performed on 600 women referred to Omol-Banin Hospital of Mashhad in 2017. After delivery, the researcher measured and recorded lost blood volume in mothers via plastic blood collection bags and pads within 4 hours after delivery. Data were analyzed by SPSS software (version 25) and Mann-Whitney, independent t, Chi-square, and Fisher Exact tests. P&lt;0.05 was considered statistically significant. Result: PPH occurred in 33.3%
of deliveries in this study. The results of the logistic regression test showed significant relationship between PPH and nulliparity (OR:5.987, CI:1.870-8.821), hemoglobin level (OR:1.849, CI:1.677-2.890), platelet levels (OR:2.955, CI:1.989-3.001), Afghan race (OR:3.645, CI:1.141-8.644), Barbarian race (OR:5.958, CI:3.452-6.645), history of PPH (OR:4.562, CI:1.570-6.597), duration of the second stage (OR:4.452, CI:2.265-5.674) and third stage (OR:3.620, CI:1.857-6.325) of labor, consumption of Magnesium sulfate (OR:67.107, CI:60.471-69.101), uterine fundal pressure (OR:4.941, CI:3.305-5.903), use of vacuum (OR:14.123, CI:10.003-18.831), episiotomy (OR:2.143, CI:2.136-3.349), genital tract tears (OR:17.889, CI:14.152-18.950), neonatal birth weight (OR:4.025, CI:3.641-6.850), placenta weight (OR:3.988, CI:2.980-3.997), and courage (OR:15.005, CI:13.520-15.224) were each associated with an increased odds of PPH.

**Conclusion:** The most important cause of postpartum hemorrhage is uterine atony and the most important risk factors are nulliparity, Afghan and Barbarian race, history of PPH, preeclampsia, increased duration of the second and third stage of labor, consumption of Magnesium sulfate, uterine fundal pressure use of vacuum, genital tract tears, placenta weight, neonatal birth weight and courage.

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**Diagnostic Value of Risk Nomogram for the Prediction of Postpartum Hemorrhage Following Vaginal Delivery**

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**Backgrounds:** Postpartum hemorrhage is considered as one of the major causes of maternal mortality across the World. Thus, evaluation of underlying risk factors in this domain is assumed as one of the important strategies for prevention of postpartum hemorrhage. Considering that the most effective risk factors have been suggested in various studies on risk nomogram for prediction of postpartum hemorrhage, this study was conducted to determine sensitivity, specificity, and predictive value of this nomogram in prediction of postpartum hemorrhage.

**Material and Method:** The present research with a validity study design using diagnostic methods was performed prospectively on 600 women admitted to Omolbanin Hospital in the city of Mashhad (Iran) from May to October 2017. To this end; individual characteristics information, midwifery and labor stages form and Bigguzi’s risk nomogram were used for data collection. The researcher measured and
recorded lost blood volume in mothers via plastic blood collection bags and pads within 4 hours after delivery. Subsequently, Bigguzi’s risk nomogram was completed for each study sample and then probability score for postpartum hemorrhage was calculated by researcher’s assistants. The data obtained from study samples were entered into SPSS Statistics (Version 25) software and analyzed. Ultimately, receiver operating characteristic (ROC) curve of risk nomogram was plotted.

Result: Postpartum hemorrhage occurred in 33.3% (n=200) of deliveries in this study. The area under the receiver operating characteristic (ROC) curve was calculated by 81.2%. The point of 0.1 with 85.5% sensitivity and 51.5% specificity was also selected as the proposed cut-off point. Moreover, positive and negative predictive values were reported by 63.8% and 78.0%; respectively.

Conclusion: According to the results of this study, the risk nomogram was considered as an appropriate method for prediction of postpartum hemorrhage. Therefore, it was recommended as a simple and low-cost approach for prediction of postpartum hemorrhage in childbirth.

Maternal and Neonatal Outcomes Following Peripartum Hysterectomy in Teaching Hospitals of Mashhad University of Medical Sciences

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Objective: The aim of this study was to determine the frequency, indications, risk factors and complication of Emergency Peripartum Hysterectomy (EPH) in our tertiary level teaching hospital, Qaem and Imam Reza.

Methods & Materials: A cohort analysis was conducted of 103 cases of EPH performed at the Qaem and Imam Reza Hospital from March of 2014 to June of 2017 inclusive. EPH was defined as one performed after 20 weeks gestation for uncontrollable uterine bleeding not responsive to conservative measures occurring at the first 24 hours of delivery. Maternal characteristics of the age, education, gravidity, parity, previous cesarean section, the index pregnancy and delivery, indications for EPH, operative and postoperative complications, maternal and neonatal outcome were acquired by the hospital records. Then data was analyzed by Spss 16.

Results: There were 103 EPH out of 17457 deliveries, for a frequency of 5.9 per 1,000 deliveries during the study period. 102 EPHs were performed after caesarean delivery (CS) and one after vaginal delivery. The mean of gravidity of patients was 3.7 ±1.3 times. 91.3% of patients who underwent EPH with abnormal placentation had at least one previous CS. 30.1% had previous history of uterine curettage and only one patient (1%) underwent myomectomy before. The most common indications were abnormal placentation (86.4%), followed by uterine atony (5.9%), and uterine rupture (1%) and
uterine vessels abnormality (1%). The most common morbidity after EPH was anemia (80.6%) followed by bladder laceration (24.3%), ureter damage (1.9%), fever (12.6%), infection (5.8%), disseminated intravascular coagulopathy (1%), pulmonary thromboembolism (1%). 12.6% of patients underwent re-laparotomy and 5.8% of patients were readmitted into the hospital after discharge. The mean number of hospitalization was 6.6± 5.2 days and 40.8% of patients admitted to Intensive care unit. There was no maternal mortality among our patients and perinatal mortality was 8.7%. 28.2% of the newborns were admitted to NICU. 19.4% of the mothers were not successful to breastfeed their children.

**Conclusion:** In our study, abnormal placentation especially placenta acereta causing severe hemorrhage was the most common indication for EPH. Previous CS was a risk factor for EPH and in particular for pathological adherence of the placenta. The morbidity associated with EPH is considerable.

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**The Effects of Different Types of Domestic Violence on Pregnant Women and Its Relationship to Maternal and Neonatal Outcomes**

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**Background:** Domestic violence against pregnant women is a major health problem in the world, as it not only endangers the health of the mother but also affects some of her fetal and infant health criteria. According to WHO estimates, the rate of physical violence during pregnancy in developing countries is 32%. The prevalence of violence includes psychological, physical and sexual violence, respectively. This review study aimed to investigate the effects of different types of domestic violence on maternal and neonatal outcomes of pregnant women.

**Methods:** This article is a review article with search on sites such as PubMed, SID, EMBASE, Scopus, Google scholar and Magiran. Articles coordinated with the specified criteria collected from 2012 to 2019 and reported in a paper.

**Results:** The results show that the occurrence of domestic violence during pregnancy increases the risk of miscarriage, low birth weight, preterm birth, vaginal bleeding during pregnancy, cesarean delivery, preeclampsia, dystocia and postpartum depression. Domestic violence during pregnancy has a significant correlation with the developmental status of children and most of the infants’ damage is in cognitive and behavioral domains. Research shows that there is a relationship between social support and the occurrence of domestic violence in pregnancy, and the greater the family and social support, the less domestic violence against pregnant women decreases. Studies show that domestic violence during pregnancy is associated with adverse economic status, duration of marriage less than 5 years, first pregnancy, unwanted pregnancy, dissatisfied marriage, and history of depression, addiction of
wife and spouse, and inadequate prenatal care. There is an inverse relationship with the education of the spouse, the employment of the spouse, the satisfaction of living together and social support. There is a relationship between physical and psychological violence associated with being unemployed, smoking, alcohol, narcotic drugs, and multiple marriages.

**Conclusion:** Due to the negative effects of domestic violence on the outcomes and complications of pregnancy and the evidence of the effectiveness of preventive, screening and intervention programs on domestic violence, it is recommended to routinely screen all unwanted pregnancies in violence screening in all health centers and prevention through education and counseling can be effective in improving pregnancy, delivery and newborn status.

**Keywords:** Domestic violence, pregnant women, Family violence, Pregnancy

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**Pure Non-Gestational Choriocarcinoma**

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**Objective:** Non-gestational choriocarcinoma is a rare entity, we describe a case of pure non-gestational choriocarcinoma.

**Case presentation:** A 35 year old woman with pathology -gestational choriocarcinoma of right ovarian cystectomy was referred to our academic hospital. Due to the fact that the diagnosis did not coordinate with the patient’s symptoms, the PCR amplifying and genomic DNA was performed. Finally the diagnoses of pure nongestational choriocarcinomawas confirmed. In her follow-up lung and brainmetastasis was determined.Brain radiotherapy and BEP regimen chemotherapy were prescribed to the patient. However, response was not appropriate and this regimen and second line chemotherapy so she is currently undergoing palliative chemotherapy.

**Keywords:** Choriocarcinoma; Non-gestational Choriocarcinoma; Chemotherapy

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**Study of the Role of Selenium in Preventing Breast Cancer**

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**Backgrounds:** Breast cancer is the second most common cancer in women. Selenium is an antioxidant, a micronutrient, which may have a protective role against breast cancer, possibly due to transcriptional effects and cellular proliferation. Considering the prevalence of breast cancer in our country and the anti-cancer effect of selenium, we decided to examine the relationship between these two components.
Material and method: This systematic review examines and summarizes numerous articles from databases and authored scientific sites pubmed, sid, scopus, magiran and the search engine googlescholar and science net with the keywords of breast cancer, selenium, prevention. Over the past five years. In this study, descriptive, analytical and interventional articles have been used.

Result: Studies have shown that selenium can play a role in preventing breast cancer and can reduce mortality in people with this cancer. By increasing the serum level of selenium by 1 unit, the risk of breast cancer is reduced by 7%. Selenium oxide can inhibit the growth of cancer cells through cell death.

Conclusion: according to studies, Selenium is a preventative and therapeutic agent in breast cancer. Selenium, according to its functional characteristics, can prevent the progression of the disease and the growth of more cancer cells. As a result, the inclusion of this natural substance in the diet of individuals is recommended.

Investigating the Effect of Acupressure, LV3 Point on Fetal Non Stress- Test Parameters: A Randomized Clinical Trial

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Objectives: The fetal heart rate monitoring is actually the first test to evaluate the health of fetus. Mother's mental condition impacts the heart rate pattern. Acupressure acts on the basis of acupuncture points and, according to hormonal neurotransmitter theory, acupressure secretes encephalin and reduces the level of stress and anxiety of the mother. Therefore the aim of this study was to determine the effect of acupressure, point (LV3) on the parameters of Fetal non stress- test.

Method: This clinical trial was performed on 84 primarous women in Bentolhoda hospital in Bojnurd using purpose-sampling method. Samples were randomly divided into experimental and control groups. In the intervention group pressure was applied on the LV3 point in each leg for 2.5mins while in the control group, around the point was touched. Fetal non-stress test was performed for 20 minutes in two steps and interpreted by the hospital specialist and skilled person, unaware to the aims of the study. Collected data was analyzed by the Spss software.

Findings: In the intervention group, the mean difference of the baseline heart rate variables, the number of increase in the basal heart rate of the fetus, the increase in basal heart rate, the number of fetal movements were statistically significant and more in the second 10 minutes after the intervention, than the first 10 minutes (p<0.05). The difference in mean of the increase in basal heart rate and the number of fetal movements in the intervention group was more than the control group during the first and second stages and was statistically significant (p<0.05).
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**Result:** The parameters of Non stress test are improved by acupressure, the false non-reactive test and unnecessary interventions are reduced.

**Key words:** Clinical trial, acupressure, LV3 point, fetal Non stress test

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**Comparison of Sanyinjiao Point (Sp6) Acupressure with Combined Sp6 and LI4 Acupressure on Labor Pain Intensity in Primiparous Women: A Randomized Controlled Trial**

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**Backgrounds:** Childbirth is an important event and special experience in women's life. Labor pain is the most severe pain that women undergo during their own lives. Pain relief management is an important part in labor.

**Material and method:** A total of 105 primiparous women participated in the study and randomized into three groups, combined LI4 and SP6 acupressure, SP6 acupressure and control group. Pain intensity was evaluated before, immediately, 1 and 2 hour after the intervention and in second stage of labor by Visual Analog Scale (VAS).

**Result:** The pain intensity was lower immediately, 1 hour, 2 hour after intervention, and in second stage of labor in Combined Sp6 & LI4 acupressure group compared to control group (P=0.00, P=0.00, P=0.001, P=0.001). Although the pain intensity was lower in Combined Sp6 & LI4 acupressure group compared to Sp6 acupressure group but no significant difference was seen.

**Conclusion:** Acupressure on Sp6 point or combined LI4 and SP6 point can be an effective non-invasive nursing intervention for alleviating labor pain.

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**Interrupted Time Series Analysis About Impact of Presence of Midwives and Physicians on Maternal – Child Health Indicators in Iran**

**Fariba Bakhshian**

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**Objectives** The establishment of the Family Physician (FP) program in the rural areas of Iran in 2005 has made Health services accessible and affordable. This paper aims to assess the overall trends of maternal and child health (MCH) indicators in a 20-year
period and possible effects of the FP program (intervention) on these indicators in Iran.

**Material and Method**: Methods; An interrupted time series analysis was conducted on 20 annual MCH-related data points from 1994 to 2013. The intervention time was at the 12th data point in 2005. MCH indicators were grouped into three categories: structure (mother’s age, education, occupation and gravidity), process (number of antenatal care visits (ACVs), laboratory tests, ultrasounds and natural vaginal deliveries (NVDs)) and outcomes (maternal mortality ratio (MMR), neonatal mortality rate (NMR), birth weight (BW), history of abortion and/or stillbirth, and hemoglobin level (Hb)).

**Result**: The adjusted slope of the ACV trend decreased sharply after the intervention ($b=-0.36, p<0.01$), whereas it increased for the frequency of ultrasounds ($b=0.2, p<0.01$) and did not change for number of laboratory tests ($b=-0.09, p=0.95$). The intensification of the descending slope observed for NVD ($b=-1.91, p=0.03$) disappeared after the adjustment for structural confounders ($b=1.33, p=0.26$). There was no significant slope change for MMR ($b=1.12, p=0.28$) and NMR ($b=0.67, p=0.07$) after the intervention. The slope for the history of abortion trend was constant before and after the intervention, but it considerably intensified for the history of stillbirths after the intervention ($b=1.72, p<0.01$). The decreasing trend of BW turned into a constant mode after the intervention ($b=33.2, p<0.01$), but no change was observed for Hb ($b=-0.02, p=0.78$).

**Conclusion**: Although the FP program had a positive effect on the process and proximal outcome indicators (BW), no dramatic effect on mortality outcome indicators was distinguished. It shows that there should be determinants or mediators of mortality outcomes in this setting, other than accessibility and affordability of MCH services.

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**Health System Reform and Changes in Delivery Method, Height and Weight of the Past 25 Years in the Villages of East Azarbaijan Province at Birth, Six and Twelve Months Old**

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**Introduction**: Improving maternal and child health and reducing cesarean delivery are expectations of Iranian health system reform initiatives. In addition, the relationship between excessive cesarean delivery and maternal and neonatal health is one of the hot matters in scientific documents. The aim of this study was to evaluate the trend of changes in cesarean section, height, and birth weight at birth, six and twelve months of age at recent 25 years.
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**Methods:** Data on delivery method, height and weight of about 5000 mothers and children in the last 25 years were selected as a sample with Multi-stage random sampling method from the contents of the household health files. Finally data were analyzed and compared in three reform periods in Iran health system.

**Result and Discussion:** The findings show that the percentage of natural childbirth declined from 84.6% in 1994 to 48.6% in 2017. However the birth weight of infants at birth, 12 months of gestation in normal delivery group is slightly higher than cesarean section group. This change does not show any definite trends in the study years. Neonatal weight is the lowest in the family physician reform period. But weight and height at 6 and 12 months showed an increase in all three periods of reform. There was no significant relationship between labor method and birth weight, high changes and birth weight. These findings are consistent with the results of other studies.

**Conclusion:** Reforms had no significant effect on the variables of study and cesarean section seems to be associated with weight loss at birth, which needs further investigation.

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**Stress Urinary Incontinence After Childbirth and Some Related Factors**

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**Background:** Urinary stress incontinence (USI) has multiple physical, mental and social effects on women's lives. The problem arises in 40% women as a major problem in daily life. The prevalence of the disease has been reported between 6-29% in various parts of the world with multiple risk factors. The aim of this study was to evaluate the frequency of postpartum urinary USI and factors related to it.

**Materials and Methods:** This cross-sectional study was conducted on 450 women two months after delivery. All subjects were examined by a gynecologist to determine the volume and severity of USI. Then the questionnaire consisted of demographic and fertility variables as well as questions about USI were completed. The data was analyzed by SPSS version 14.

**Results:** The mean age of the subjects was 24.5±5.6 years, with a mean 1.9±1 pregnancy. The results showed that the frequency of USI after childbirth was 18% (81 women). 81.4% of women suffer from this problem 1-2 times/day and its severity were mostly mild or moderate. Women with USI had significantly higher age and also more parity than women without USI (p<0.001). The occurrence of USI was also less in women with episiotomy (p<0.001). Delivery type, birth weight, head circumference, maternal body mass index had no effect on stress incontinence.
**Conclusion:** Given the relatively high prevalence of USI after childbirth, it is needed for further research on the identification of its risk factors to prevent this problem. Women should also be justified that cesarean section may not reduce the risk of USI.

**Key words:** Urinary stress incontinence, childbirth, risk factors.

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**Evaluation of Nutritional Knowledge and Pattern of Food Consumption in Pregnant Women Referred to Babol Health Centers**

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**Background:** Choosing a well-balanced diet is one of the most important points in nutrition for pregnant women. Therefore, the diet of a pregnant woman should be varied, using 4 to 5 main food groups and avoiding overeating and undereating. The purpose of present study was to determine the nutritional knowledge of pregnant women and their food consumption patterns in health centers of Babol.

**Material and method:** A cross-sectional study was performed on 480 pregnant women. For each participant, three questionnaires including nutritional awareness, food frequency and general characteristics were completed by trained and experienced interviewers. Nutritional awareness and food consumption patterns were categorized according to the number of correct responses to good, moderate, and poor.

**Result:** Overall, 65.6% of the samples had moderate nutritional awareness. The most important source of information was through health personnel (32%) and through radio and television (29.6%). There was a significant relationship between nutritional awareness and women’s education (p = 0.002). The pattern of food intake was also moderate in 76.7% of pregnant women. There was a statistically significant relationship between dietary pattern and age of pregnant woman (p = 0.01). Also, there was a significant relationship between the consumption of stewed vegetables in different ways (fresh, dry, etc.) and the consumption of beverages with food and the education level of pregnant women (p = 0.03, 0.001). The most consumed foods of all food groups included yogurt, citrus, solid vegetable oil, tomato, onion, potato, vegetable, barley bread and egg.

**Conclusion:** Overall, the majority of pregnant women had a relatively good level of food consumption. They were favorable. But their nutritional information level was average. Therefore, the need for proper nutritional education for pregnant mothers in order to increase nutritional awareness and identify different nutritional groups with emphasis on 4-5 main nutritional groups is necessary to change their eating habits.

**Keywords:** Nutritional Awareness, Nutrition Habits, Food Consumption Pattern, Pregnancy
Effectiveness of the Distance Education Program on the Mothers’ Empowerment in Breastfeeding

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Introduction: Mothers need the necessary skills with regard to empowerment in the successful breastfeeding. Distance education is a learning process that learning and teaching take place in the separate environments. This study aimed to investigate the effectiveness of the distance education program on the mothers’ empowerment in breastfeeding.

Methods: A clinical trial study was done on 72 nulliparous pregnant women 28-32 weeks with normal pregnancy referring to the midwifery clinics of the educational hospitals of Babol University of Medical Sciences in 1397. The qualified women were randomly assigned to the intervention and control groups based on the random-number table. The breastfeeding training packages were sent to women in the intervention group via Telegram every week until 37 weeks of gestation. Mothers’ empowerment in breastfeeding (primary outcome) was assessed using the breastfeeding empowerment questionnaire (via 7 domains) pre intervention, 4 and 8 weeks postpartum, and the exclusive breastfeeding rate (secondary outcome) after childbirth. Data were analyzed using SPSS software, Version 16. The level of significance was less than 0.05.

Results: Based on the repeated measured tests, scores for all domains and also the total score of the mothers’ empowerment in breastfeeding between two groups had increased during the study period, while there was a significant difference between the increaseal trends of the maternal empowerment’ domains in two groups (Intraction P-value <0.001). Also, the prevalence of the exclusive breastfeeding rate (secondary outcome) at 6 months was significantly higher in the intervention group (81.8% and 57.1% in the intervention and control groups) (P-value = 0.028).

Conclusion: The distance education program led to increase mothers’ empowerment in breastfeeding and the exclusive breastfeeding rate at 6 months of age after childbirth. Applying this educational method without the need of sharing place and time for communication, is recommended to the planners to promote breastfeeding.

Keywords: Education, Distance; Power (psychology); Breastfeeding

The Impact of Women Employment on Their Sexual Life

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Aim & Background: Today, the sexual satisfaction of married couples and women’s Employment are two important areas of life, Because sexual satisfaction is the
foundation of the family. Couples’ sexual satisfaction is essential to maintaining the family’s foundations and employment is an important part of their social identity. Therefore, considering the different factors of cultural, religious, economic, social, and other, affecting couples’ sexual relationships, the present project aims to investigate the impact of different aspects of women’s employment on their sexual life.

**Material & Methods:** The present study was a field qualitative study among employed and housewives in 2019. To obtain the samples, we were used the official social networking site Instagram “mamasite” due to the high number of followers (277 k) and the diversity of its members. The research question was posted on this page as a separate post for two weeks. Finally, after reading the comments for the purpose of the research, important sentences were selected in the form of basic code, followed by similar concepts in the form of subcategories and categories. The project also has ethical considerations and refrains from mentioning the name or username.

**Result:** After two weeks, 761 comments were extracted, of which 543 were based on the objectives of the present study. According to the results, 76% of the employed and 23.20% were housewives. According to the opinions of the employed sample (417 people), the impact of female employment on sex was classified into three categories: positive affect, negative affect and no affect. The positive effects of female employment include: Improving the quality and quantity of sex, gaining peace of mind during employment, living a better life following female employment, and more motivation to have sex, and the negative effects of female employment include: having sex despite one's desire, Interference with maternal role, decreased female happiness and vitality, and the effect of job fatigue on the quality and quantity of sex.

**Conclusion:** Employment can have many positive and negative consequences for women, but given their importance role in the family, women’s employment must be such that it does not harm the family’s hot focus and even the consequences Which threatens the family.

**Keyword:** Employment, Sexual Life, Sexual Function, Sexual activity

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**Neonatal Subclavian Artery Thrombosis at Birth A Case Report**

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**Backgrounds:** Vascular thrombosis is rare in neonatal period with prevalence of 0.5 per 10000 live births and has severe morbidity and mortality based on site of thrombosis. The most common cause of neonatal vascular thrombosis is iatrogenic including arterial or venous catheterization. Other risk factors include maternal lupus and diabetes and neonatal sepsis, poor cardiac output and congenital thrombotic disorder. We present a case of neonatal subclavian artery thrombosis which appeared at birth.

**Material and Method:** Case Presentation: A 39-week male neonate was born via cesarean section due to late deceleration and meconium aspiration with apgar score
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of 8 and umbilical artery pH of 7.00. At birth, right arm was swollen and in examination paralysis was observed and it was painful in movement. Both upper extremities had same temperature and radial artery pulse was weak. Maternal prenatal care was normal without any history of diabetes, hypertension or lupus erythematosus.

Result: Color Doppler ultrasonography revealed an obstruction in middle to distal end of subclavian artery and proximal part of axillary artery. Laboratory findings were unremarkable. Unfractionated heparin infusion was started. Two days later swelling progressed and radial pulse disappeared and fingers became cyanotic, but there was no critical sign of ischemia. Neonatal echocardiography revealed no abnormality and no cardiac source for thrombosis. Brain, abdominal and kidney evaluation with sonography showed no thrombosis. Evaluation for hypercoagulability was negative. The infant was admitted in NICU and heparin infusion was continued. After 30 days of treatment swelling and paralysis of arm and cyanosis of fingers gradually improved and disappeared and arm color and movement restored with no residual damage.

Conclusion: Thromboembolic events are rare in neonatal period and early diagnosis and treatment can prevent mortality and reduce morbidity. We found a spontaneous subclavian artery thrombosis in a neonate without any risk factor except for a subtle asphyxia.

Choriocarcinoma in Cesarean Scar: A Case Report

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Objective: Nowadays, with an increase in the number of cesarean section, the complications of this procedure will certainly be higher. Pregnancy at the site of cesarean scars is one of the rare complications of this surgery. The occurrence of choriocarcinemia caused by this pregnancy is a very rare phenomenon. The aim of this study is describe a case of choriocarcinoma developed in the cesarean scar.

Case presentation: A 41-years old multi gravid woman with a history of one cesarean section and three subsequent abortions was admitted. The patient was treated with two doses of weekly methotrexate with diagnosed of ectopic pregnancy in the cesarean scar. But due no response to treatment was referred to our clinic. She underwent hysterectomy and the pathology reported choriocarcinoma in the cesarean scar of pregnancy.

Conclusion: The probability of a gestational trophoblastic disease should be considered in any woman in reproductive period. Early detection and appropriate management of complications of cesarean scar leads decrease of morbidity and mortality.

Key words: choriocarcinoma, cesarean scar, ectopic pregnancy
Fatigue in Pregnancy – The Validity and Reliability of the Farsi Multidimensional Assessment of Fatigue MAF Scale

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**Backgrounds:** Fatigue is a common discomfort during pregnancy and may contribute to experiencing severe labor pain and postpartum depression. The aim of this study was to translate and validate the Multidimensional Assessment of Fatigue (MAF) Scale in a sample of Iranian pregnant women.

**Material and Method:** We translated the scale into Farsi and assessed the content validity of the scale. About 582 women visiting health centers completed the Farsi MAF and WHO-5 well-being index (WHO-5). We examined the construct validity by exploratory factor analysis (EFA). The internal consistency and stability of the scale were assessed by calculating alpha-Cronbach coefficient and Intraclass correlation coefficient (ICC). Concurrent validity was examined by the correlation between the scores of the Farsi MAF and the WHO-5.

**Result:** The mean of Global Fatigue Index (GFI) was 20.33±12.7. The EFA on 15 items confirmed the one-factor structure proposed by Belza. Alpha Cronbach coefficient for the Farsi MAF was 0.957. Stability was confirmed by the ICC value for the GFI of 0.702. Concurrent validity was confirmed by the moderate correlation ($r = .395$) between the scores of the Farsi MAF and the WHO-5. Homemakers, women with a well-being score $> 50$, women who were happy with their pregnancies, those with a wanted pregnancy, women with night sleep $\geq 6$ hour, women with a hemoglobin level $> 12$mg, and women with good self-perceived health had a lower level of fatigue than the other groups did.

**Conclusion:** The Farsi MAF is a reliable and valid instrument to assess fatigue in pregnant women.

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The Effects of Aromatherapy on Fatigue Severity in Women with Breast Cancer Patients Undergoing Chemotherapy

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**Backgrounds:** Cancer-related fatigue is one of the most common side effects of breast cancer treatments. Aromatherapy has a special role in alternative and complementary medicine. The aim of this study was to determine the effects of Aromatherapy on fatigue severity and quality of life in breast cancer patients undergoing chemotherapy.
Material and Method: This study was a clinical trial on 68 patients with cancer receiving chemotherapy in 4 weeks in two groups of experimental and control group. Patients were asked in the aroma group, inhale 3 drops of rose extract (standardized at least 0.2 mg of nerol per ml) which covered on an absorbent cotton cloth (gas 10 * 10) and pin at 20 cm from the tip of the nose for 8 hours at bedtime from 23 to 7 days. The questionnaire of fatigue was completed before the intervention and at the end of the first to fourth weeks.

Results: The repeated measures of variance analysis showed a significant difference (p = 0.001), in fatigue severity between two groups of aroma and control in the 1-4 weeks.

Conclusion: The results of this study propose aroma can be effective to reduce cancer-related fatigue in breast cancer patients undergoing chemotherapy. Providing the implementation for using aroma is recommended to nursing managers, in order to improve the quality of life of cancer patients.

The Abortifacient Effect of Petroselinum Crispum Seed Extract and Its Correlation with ENAC gen Expression and Progesterone in Balb/c mice

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Background & Aim: The herb, Petroselinum crispum, is a perennial fragrant plant which cultivates widely in the Iran as eating vegetables. Petroselinum crispum is an Iranian medicinal plant which is used for various diseases. The leaves of the plant are taken in folk medicine by certain women of Iran for abortion induction. However, there is no scientific evidence to prove its side effects in pregnancy. The aim of this study was to assess the seed extract of the plant on placenta implantation and abortion, in Balb/c mice.

Materials and Methods: The present experimental study was conducted on 30 adult female Balb/c mice. The animals were divided into 6 groups of 5 specimens, including non-pregnant control, pregnant control, and three sets of empirical receiving doses 5 mg/kg body weight extract of parsley seeds after mating and vagina platelets observation respectively. First group of treatment animals received 5 mg/kg body weight extract of parsley seeds in the first week, the second group received the extract in the second week and the third group received the extract in the third week. One group received 5 mg/kg body weight extract of parsley seeds for 21 days continually. At the end of the experiment, caesarean surgery was done and pregnancy factors including number of placenta, number of embryos, abortion rat, and progesterone concentration of serum were measured. The level gene expression of ENAC was also measured by real time PCR method to evaluate the mechanism. Uterus tissue were removed and fixed in 10 % neutral formalin and embedded in paraffin. 5-μm-thick
sections were prepared and stained with hematoxylin and eosin by standard procedures. The Data were analyzed with one way ANOVA and Tukey’s post-hoc test and significant differences of data was considered at p = 0.05.

**Results:** There was only a significant difference in progesterone level in case group that received extract continually for three weeks vs. pregnant control group (p<0.05). The abortifacient effect of the plant was supported by the changes in number of placenta and number of embryos in treatment group that received extract continually for three weeks vs. pregnant control group (p<0.05). The percentage of abortifacient increased in all treatment groups compared with pregnant control group. Meanwhile, the administration of 5mg/kg of the extract in all groups of gestation exhibited dramatic abortion. For evaluate the mechanism action of parsley, the level gene expression of ENAC was measured by real time PCR. There was no significant difference in studied groups regarding the level gene expression of ENAC. Histopathological analysis showed that some areas of placenta were necrosis and also decidua degeneration in all groups that treatment with parsley was seen. Since, parsley caused a drastic harm of the all pregnancy factors of mic, as shown in this study; therefore, taking the seed extract of the plant by pregnant women is not advisable.

**Conclusion:** Considering parsley seed extract effect on hormone changes in pregnancy and abortifacient effect of parsley in experimental group, its consumption should be with cautious during pregnancy. These results showed that mechanism action of parsley seed extract is not done via change in gene expression of ENAC channels and these effects may be related to change in hypothalamus-hypophysis-gonad pathway.

Further studies can also be conducted to determine the active constituent of parsley seed extract that gives abortifacient property to this plant.

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**Postpartum Maternal Mortality and Pulmonary Embolism a Case Report**

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**Introduction:** Pregnancy and postpartum are very high-risk periods for venous thromboembolism events (VTE), which seems to extend far beyond the classical 6-8 weeks after childbirth.

**Case Presentation:** The patient was a 33-year-old, 158 cm, and 70.5 kg 2gravida on the sixth day of the 40th week of pregnancy, and she was hospitalized on the 7 day before vaginal delivery for GDM. vital signs were normal at the time of hospitalization. The results of the blood test and urinalysis during hospitalization were all normal. Only sign of the patient during the hospitalization was pale. Unfortunately, the patient 3days after discharge referred to the health facility with dyspnea and died.
Conclusion: The diagnosis of PE was confirmed by autopsy. The maternal mortality of PE during pregnancy and postpartum period is quite high. Whenever there is any doubt, objective examinations for PE should be started early in order to strive for the chances of the anticoagulant therapy.

Essentials: The evidence on how to manage life-threatening pregnancy-related pulmonary embolism (PE) is scarce. Pregnancy and postpartum are very high-risk periods for venous thromboembolism events (VTE), which seems to extend far beyond the classical 6-8 weeks after childbirth.

Keywords: Maternal Mortality, Pulmonary Embolism

Association Between Vitamin Intake During Pregnancy and Risk of Dystocia

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Backgrounds: Association between Vitamin Intake during Pregnancy and Risk of dystocia Elham Ebrahimi, samira noorzaie[1] introduction The fields of obstetrics and nutrition have changed over the last few decades, greatly affecting recommendations for prenatal nutrition. The importance of nutrition in pregnancy cannot be overstated. It maintains maternal energy requirements, provides substrate for the development of new fetal tissues, and builds energy reserves for postpartum lactation. Recommendations for prenatal nutrition typically focus on weight gain and dietary intake in pregnancy. But these days because of lifestyle is toward immobility, the same version may not be suitable for patients. In this article we evaluate the effect of routine multivitamin therapy on the occurrence the dystocia. [1] School of nursing and midwifery, tehran university of medical sciences, tehran, iran.

Material and Method: Method It was a systematic review based on a standard protocol. We searched the PubMed, Scopus, and ISI web of science from 1990 to Feb 2019. In addition, electronic literature searches supplemented by searching the gray literature (e.g., conference abstracts thesis and the result of technical reports) and scanning the reference lists of included studies and relevant systematic reviews. We explored statistical heterogeneity using the, I2 and tau-squared (Tau2) statistical tests.

Result: Finings: This article discussed about: - the cons and prons of multivitamin therapy on dystocia - confounding factor - some food modifiers that can prevent the mother from dystocia [1] School of nursing.

Conclusion: these days according to some changes that occurred in the lifestyle may be the unique advice not only can not help the pregnant women but it can also lead to some complication such as dystonia it may be overlooked.
Hepatitis b Stigma and Pregnant Women

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Introduction: Asia is famous for hepatitis B endemicity. So that, Millions of chronic hepatitis B virus (HBV) affected people live in Asia. It is right that, the progress in vaccination and treatment has been changed the picture of hepatitis B. However, according to the study results, hepatitis b health-related stigma as a barrier for health service use, still show its important role. The current study aimed to understand the social knowledge and stigma of HBV in pregnant women in Tehran.

Method: Based on a well-defined protocol and Through the cross-sectional hospital-based study, our research was started. In an expert panel that was held before data gardening, we reached a consensus to use a multistage stratified sampling method. After informing about the purpose of the research, every pregnant women that referred to these hospitals and were satisfied could enter the study. Interviews were carried out with individuals’ informed consent. Stigma and knowledge questionnaire need to be finished independently within a 20-minutes.

Result: The 860 participants red in the final analysis. (response rate 96.4%). Their mean age and standard deviation was 32.43 ± 8.1 years (18–65 years). Total mean score of stigma in this study was 3.86 that was greater than 2, and indicates that there is strong stigma perception in our participants. Also in some domains such as shame or embarrassment, worthless considering, believe in adverse effect on others, community avoidance and refuse to get patients home, disclosure and marriage, the score of stigma was apparently heavier than the other domains.

Conclusion: A lot of health care promotions have been occurred in the area where the hepatitis b is endemic but stigma still a remaind concerns in this area. This study showed that there is a relationship between stigma and knowledge of people. This study related to Iranian population so that the knowledge deficits domain and area of stigma might be valuable.

Keywords: Hepatitis B, Stigma, pregnancy

Denied Pregnancy: Case Report

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Introduction: Denied pregnancy is when a woman is unaware of, or unable to accept her pregnancy until birth the baby. This may be linked to mental health difficulties or
learning difficulties, and more broadly reflect ambivalence to the pregnancy. Denied pregnancy may be associated with significant risks for both the mother and baby. **Case Presentation:** A 27-year-old obese married woman referred to the hospital's emergency department for severe back pain. In her medical history, she experienced low back pain for years and pain became worse in recent month. The woman had no psychiatric illness and had never been pregnant before. A sonography by doctor showed that she was pregnant, a gestational age of 38 weeks. She had no aware of her pregnancy because she had no physical symptoms of pregnancy except abdominal striae and hyperpigmentation. The full term baby boy was born in the emergency department after half an hour. The mother and baby were transferred to the maternity ward for further evaluation and follow-up. **Discussion and Conclusion:** This case presented a non-psychotic type of denied pregnancy. Due to the potentially tragic outcome, it is important to increase awareness of possibility of denial of pregnancy on the part of health care professionals. Furthermore, assessment of mental health and education of women about physiological changes during pregnancy by midwives and health care providers is needed.

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**Successful Packing of Hepatic Hematoma Rupture Following Preeclampsia: A Case Report**

*Running Title: Hepatic Hematoma and Preeclampsia*

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**Introduction:** Hepatic hematoma rupture following preeclampsia is a rare finding in the postpartum. Diagnosis of this critical condition requires a high index of suspicion. Many other clinical conditions may also complicate the diagnosis and mask the hemorrhage. **Case Report:** We presented a case of hepatic hematoma rupture in the postpartum period in a patient with preeclampsia. After a successful cesarean section, the patient experienced gradual hypotension and underwent bedside ultrasonography due to the rapid decrease of fetal heart rate in the setting of preeclampsia. Free fluid was prominent, and due to gallbladder stones, dilated bile duct, and high body mass index, only a small, suspicious mass was visualized in the liver. In the operating room, hysterectomy was performed due to free blood within the abdominal cavity, uterine inertia, and hematoma in the broad ligament and bladder. However, hemorrhage started again from the abdominal drains one hour after hysterectomy. After
examining the entire abdomen, a bleeding hematoma was observed on the inner site of the liver and packed successfully. Two days after packing, gauzes were removed from the abdomen, and the patient was discharged in good condition four days later without any complications in the follow-up visits.

**Conclusion:** Ruptured hepatic hematoma requires immediate management and close follow-up. Gynecologists and surgeons should consider that simple surgical techniques, such as packing, could be applicable in hepatic bleeding hematomas if further hemodynamic monitoring and experienced surgeons are available.

**Keywords:** Preeclampsia, Pregnancy, Hematoma, Hysterectomy

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**Comparison of the Effect of Obesity on Sexual Function of Women and Men**

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**Backgrounds:** Obesity has profound effects on the health, psychological and emotional outcomes, as well as obese people with sexual problems. Studies have shown a relationship between body weight and common mental illnesses, such as depression, anxiety, stress, and sexual problems. Research results have shown that weight loss can significantly improve the quality of life and reduce psychological disorders associated with obesity.

**Material and method:** The present study is an overview reviewing articles related to the subject in PubMed SID, Cochran, google scholar, google, Science Direct, Scopus, Magiran databases during the period 1979-2018, and finally, 24 articles were reviewed.

**Result:** findings: Research has shown that there is a relationship between obesity, mental health and sexual functioning, but the effect of obesity on these problems is not well-established. Identifying such pathways is necessary to provide clinical and therapeutic guidelines. The results of studies on the relationship between obesity and overweight with sexual dysfunction in men show a direct relationship between obesity and sexual dysfunction. However, in most studies, the relationship between obesity and erectile dysfunction has been studied, and in other cases, Very few studies have been done. Results about female sexual dysfunction have been different and sometimes contradictory. Some studies have confirmed the association between obesity and sexual dysfunction, but some studies have found no relationship between obesity and overweight with female sexual dysfunction. Some studies also state that only some part of sexual activity is impaired due to obesity .In contrast, some studies have concluded that obesity affects all aspects of sexual function.

**Conclusion:** Discussion and conclusion The results of the literature review indicate insufficient studies or contradictions in the results of studies on the relationship between obesity and sexual dysfunction in women. Therefore, more studies are needed based on more stringent standards, Specifically, about the relationship...
between obesity and sexual dysfunction in women. It is also necessary to perform studies on the relationship between obesity and other sexual dysfunction in men except erectile dysfunction.

Prevalence and Risk Factors of Hypertension Among Women in a Rural Population

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Background: There are very few epidemiological studies on the prevalence of hypertension and its risk factors among women in the rural population. The aim of this study was to determine prevalence and risk factors of hypertension among women in Iranian rural population.

Methods: This cross-sectional study performed on 143 women of 30 years and above were selected from a rural area of Ilam province (Dare Shahr). Random sampling was sampling method by using lottery method. SPSS version 21 used for analysis.

Results: Mean ±SD of age among study participants was 43.5 ± 10.6 years. About 41 (28.7%) of women used tobacco and 71.3% (n=102) of the women never used tobacco in the lifetime. About 64.9% of women consumed >5 g (World Health Organization recommended level) of salt per day. 5.8% of women were in Grade I obesity and (2.5%) was in morbid obesity category and in total about 35% of participants hasn’t normal BMI. 49% of women gave a positive family history of hypertension among first-degree relatives. 38.3% of participants had systolic blood pressure above140 mmHg (isolated systolic hypertension). The mean systolic BP calculated was 133± 24.6 mmHg. The overall prevalence of hypertension among the study participants was calculated to be 34.3% (CI=95%).

Conclusion: Significant associations were found between the presence of hypertension and various sociodemographic variables using Chi-square test. Furthermore, there was a significant association between hypertension and consumption of smokeless tobacco, low physical activity level.

Keywords: Hypertension, prevalence, rural population
Comparison of the Effectiveness of Midwifery Counseling with Cognitive-Behavioral Approach and Counseling Based on the EXPLISSIT Model on Women's Sexual Function During Lactation

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**Backgrounds:** Birth and delivery is the most important occurrence of a woman’s life. Postpartum period is recognized as a vulnerable and stressful period for women with different cultures. Many factors contribute to postpartum sexual dysfunction. Such as the type of childbirth, episiotomy, fatigue and physical and psychological problems ... Abnormal postpartum sexual activity can cause distress of the husband and wife and disunity in their marital sexual relations. The consultation can provide the information needed to create the desired sexual life It is important for couples to take advantage of this information to improve their marital qualities. Considering the importance of sexual relations in marital life and its effect on family and community health and reproductive health, this study was conducted with the aim of "reviewing and comparing the effectiveness of cognitive-behavioral counseling and counseling based on the EX-PLISSIT model on female sexual function during lactation"

**Material and Method:** This clinical trial study was a pretest-posttest with two groups of intervention and one control group in the year 1395. The statistical population of the nursing mothers referring to the health centers of Neyshabur city that was nulliparous and started sex after delivery and at most one year. They had had a maternity leave, had no physical health and had not already been treated for sexual problems. Out of 102 women who entered the study were randomly assigned to two groups of behavioral cognitive behavioral and EX-PLISSIT and one control group (34 groups each). The sexual function variable was evaluated using the standard FSFI questionnaire. Independent cognitive-behavioral group counseling variables in 4 sessions of 90 minutes and individual counseling with EX-PLISSIT model were performed at a maximum of three sessions on intervention groups. Before, immediately and one month after intervention, sexual function was evaluated. Data were analyzed by SPSS-20 software. The significance level (P<0.05) was considered.

**Result:** According to ANOVA and Chi-square tests, the participants did not have a significant difference in terms of demographic characteristics (age, spouse’s age, gender, type of delivery, prevention method). Regarding the fact that the three groups in the baseline had a significant difference in the score of sexual function, the changes in the sexual function score after the start of the intervention in general and in the
different groups under study were adjusted based on the amount of basic sexual performance score and then they were compared together. Based on this, the impact of the basic sexual function score varied among different groups of study, so we used the change method to control and neutralize this effect. The results showed that changes in female sexual function scores were not significant after one month after the intervention before intervention between the behavioral cognitive behavioral group and EX-PLISSIT (P = 0.619) Between cognitive behavioral group. The control group was significant (P <0.001). And between EX-PLISSIT and control groups (P = 0.012).

**Conclusion:** Based on the results of this study, the effectiveness of cognitive behavioral counseling and the EX-PLISSIT model on the sexual function of lactating women was determined. Therefore, considering the capacity of health care providers, it can be used to prevent and improve livelihood sexual problems at health centers, counseling centers and the treatment of these counseling methods in postpartum care.

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**Effect of Synbiotic Pomegranate Juice on Glycemic, Sex Hormone Profile and Anthropometric Indices in PCOS Patients: A Randomized, Triple Blind, Controlled Trial**

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**Objective:** Polycystic Ovarian Syndrome is a common reproductive, endocrine, and metabolic disease in women. Pomegranate juice, known as a rich source of phytochemicals with high antioxidant activity, enriched with probiotic may improve PCOS. We aimed to evaluate the effect of synbiotic pomegranate juice glycemic, sex hormone profile and anthropometric indices in PCOS patients.

**Methods:** A randomized, controlled, triple-blinded, parallel trial study was performed in PCOS patients (n=92). Three treatment groups (23 patients each) received 2 L of synbiotic pomegranate juice (SPJ), pomegranate juice (PJ), and synbiotic beverage (SB) weekly. The control group (23 patients) received 2 L of placebo beverage weekly. Primary outcome was any change in insulin resistance and secondary outcomes were fasting blood sugar (FBS), insulin sensitivity, testosterone, luteinizing hormone (LH), follicle stimulating hormone (FSH), body mass index (BMI), waist and hip circumference, from baseline to the end of the trial.
**Result:** At the end of the study, 86 patients were analyzed. There was significant change in insulin resistance in the SPJ and SB groups. Insulin sensitivity increased significantly in the SPJ and SB groups. Insulin also changed significantly in the SPJ and SB groups. BMI, weight and waist circumference decreased significantly in the SPJ and SB groups. Testosterone level also decreased significantly in the SPJ and SB groups. There was no significant change in FPG, LH and FSH in any of the groups.

**Conclusion:** SPJ in the form of a new beverage can improve insulin resistance, insulin, testosterone level, BMI, weight and waist circumference in PCOS. This trial was registered in Iranian Registry of Clinical Trials, with number: IRCT2017020732439N1.

**Index words:** Synbiotic; Insulin Resistance; Polycystic Ovarian Syndrome; Punicaceae; Gut microbiota.

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**Effect of Counselling on Stress and Gender Role Attitude in Infertile Women**

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**Background:** Diagnosis of infertility is accompanied by physical and psychological complications for couples, numerous factors can predict stress in infertile women including gender-role attitude which is concerned with views and opinions by individuals about their gender-related behaviors.

The present study was a randomized clinical trial conducted on 80 infertile women referred to Rooyesh Infertility Treatment Center in the city of Karaj, Iran. The convenience sampling method was used and the samples were divided into intervention and control groups through four-block random allocation. Accordingly, the intervention group attended a five-session counseling program in accordance with the latest guideline of the British Infertility Counseling Association and gender-role attitudes, and the control group only received routine care. To collect data before, immediately after, and one month after the intervention; demographic characteristics information form, Newton's Fertility Problem Inventory (FPI), and Gender Role Questionnaire (GRQ) were used.

**Result:** The findings of this study revealed that the demographic characteristics and mean scores of infertility stress and gender-role attitudes were not significantly different in both study groups before the intervention. Moreover, the results of repeated measures test showed that time had effect in the total score of fertility stress and all its domains in the intervention group (p<0.000) and there was significant difference between two group(p<0.000). Likewise, the results of repeated measures test indicated that time had impact on the mean scores of marital and sexual
relationships and general roles illustrated in Gender Role Questionnaire in the intervention group (p<0.001) and this difference was significant between both study groups (p<0.001).

**Discussion:** Considering the effects of the group counseling program designed based on the guideline of the British Infertility Counseling Association and gender-role attitudes, it was recommended to utilize this counseling method in infertility treatment centers to moderate levels of stress in infertile women.

**Keywords:** Infertility, Stress disorder, Gender role

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**Can we Predict the Risk of Gestational Diabetes Mellitus in Pregnant Women by Past Obstetrical History Fasting Blood Sugar and Other Factors**

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**Backgrounds:** Gestational diabetes mellitus (GDM) deserves proper prevention, diagnosis and management, due to health care implications from both maternal and fetal concerns. This study was designed to evaluate rate and investigate the predicting risk factors for developing GDM.

**Material and Method:** In this cross-sectional survey, universal screening for GDM was performed in 613 pregnant women. Pregnant women attended prenatal clinic in Tehran, screened for gestational diabetes mellitus using IADPSG criteria and followed up delivery from march 2016 to march 2017. At the first prenatal visit women underwent the fasting blood sugar test. A 75-g oral glucose tolerance test (OGTT) was performed for 613 mothers between 24 and 32 weeks of gestation. Logistic regression test for calculating the odds ratios and 95% confidence intervals was used.

**Result:** Impaired GTT was detected in 143 (23.3%) patients. Prevalence was highest in the first trimester FBS> 92mg/dl group (p < 0.001). Comparison of the GDM and the NGT groups demonstrated significant differences in maternal age, first trimester FBS, third trimester vitamin D level, maternal platelet count, maternal BMI (before 12 week of gestation), weight gain during pregnancy, and the history of gestational complications in previous pregnancy (P < 0.05). In logistic regression GDM was independently associated with maternal older age, higher first trimester FBS, lower third trimester vitamin D level, and lower maternal platelet count (P &lt; 0.01).

**Conclusion:** It was concluded that patients with higher initial FBS or patients with the history of gestational complications in previous pregnancy should be considered high risk for GDM and screened earlier. Key-words: GDM, FBS, past obstetrical history.
**Infertility Treatments in Women with Polycystic Ovary Syndrome**

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**Background:** Polycystic ovary syndrome is one of the most common causes of female infertility, affecting 5-10% of the population. Women with PCOS manifest hyperandrogenism, hyperinsulinemia, low-grade systemic inflammation, and polycystic ovaries.

**Material and Method:** The aim of this review is to discuss the medical approach to the management of PCO that led to infertility. This study was performed of a systematic literature by using the electronic databases PubMed, Cochrane, Embase, ProQuest and Science direct from 2010 to present.

**Result:** In clomiphene-citrate-resistant anovulatory women with polycystic ovary syndrome (PCOS) and no other infertility factors, either metformin combined with clomiphene citrate or gonadotrophins could be used as a second-line pharmacological therapy, although gonadotrophins are more effective. Gonadotrophins could also be used as a second-line pharmacological therapy in anovulatory women with PCOS and clomiphene-citrate-failure. Laparoscopic ovarian surgery can also be used as a second-line therapy for ovulation induction in anovulatory women with clomiphene-citrate-resistant PCOS and no other infertility factors. The usefulness of letrozole as a second-line pharmacological treatment for ovulation induction in clomiphene-citrate-resistant women with PCOS requires further research. In terms of improving fertility, both pharmacological anti-obesity agents and bariatric surgery should be considered an experimental therapy in anovulatory women with PCOS and no other infertility factors. Where first- or second-line ovulation induction therapies have failed, in vitro fertilization (IVF)/intracytoplasmic sperm injection (ICSI) could be offered as a third-line therapy in women with PCOS in the absence of an absolute indication for IVF/ICSI. For women with PCOS undergoing IVF/ICSI treatment, the gonadotropin-releasing hormone (GnRH) antagonist protocol is preferred and an elective frozen embryo transfer strategy could be considered. In assisted conception units with sufficient expertise, in-vitro maturation (IVM) of oocytes could be offered to women with PCOS.

**Conclusion:** treatment according to the patient's condition and stage of the disease should be done.

**Keywords:** IVF; infertility; polycystic ovary syndrome; surgery

**Reference:** Electronic.

**databases:** PubMed, Cochrane, Embase, ProQuest and Science direct from 2010 to
The Impact of Iron Overload on pregnancy outcome: Implications for Preeclampsia

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Introduction: Iron is an essential element for the survival of most organisms, including humans. Demand for iron increases significantly during pregnancy to support growth and development of the fetus. Paradoxically, epidemiologic studies have shown that excessive iron intake and/or high iron status can be detrimental to pregnancy and is associated with reproductive disorders ranging from endometriosis to preeclampsia.

Material and Method: The aim of this review is to discuss about the Impact of Iron Overload on Reproductive Disorders in Humans by using electronic databases PubMed, Cochrane, Embase, ProQuest and Science Direct from 2011 to present.

Result: Many epidemiologic studies have shown that excessive iron intake and/or high iron status can be detrimental to pregnancy and is associated with the development of a number of reproductive disorders. This is due to an underlying ferroptopathy characterized by intracellular iron excess leading to ferroptosis, a process of programmed cell death mediated by iron-dependent lipid peroxidation of cell membranes. Ferroptosis has been shown to play an important role in sterile inflammatory conditions such as hypoxia/reperfusion injury. By way of illustration, some pregnancies generate an exaggerated response to the acute surge in oxygen and iron caused by the physiologic hypoxia/reperfusion event that occurs in all pregnancies at 8–10 weeks of gestation. This surge of oxygen and iron results in excessive membrane lipid peroxidation and ferroptosis at the maternal-fetal interface, primarily in trophoblast cells, leading to shallow endovascular invasion of EVCTs and suboptimal remodeling of the maternal spiral arteries, the pathologic hallmarks of PE.

Conclusion: For clinical care providers, oral iron supplementation for the treatment of iron-deficiency anemia is considered effective, inexpensive, and safe in pregnancy. In non-anemic pregnant patients, however, routine iron supplementation is likely unnecessary and, if recommended, should probably be limited to less than 60 mg daily or every other day.

Keywords: Ferroptosis; maternal-fetal interface; preeclampsia.
**Is age at Menarche Associated with the Risk of Diabetes in Non-Menopausal Women**

Maryam Farahmand¹, Fahimeh Ramezani Tehrani², Fereidoun Azizi³

**Backgrounds:** It has been supposed that early menarche is related to a higher risk of type 2 diabetes. We purposed to investigate this association among reproductive age women.

**Material and Method:** For the aim of our study, non-menopausal participants of the Tehran Lipid and Glucose Study, were selected and their diabetes and pre-diabetes status were evaluated. Diabetes and pre-diabetes was described according to the American Diabetes Association 2013.

**Result:** Mean age at menarche was 13.3 ±1.5 years. Logistic regression analysis showed that there was a statistically significant difference in the risk of diabetes and pre-diabetes between women with age at menarche <11 years and women with the reference group, 13≤menarcheal age≤14 years, (OR=3.55, 95% CI: 1.6-7.8 and OR=2.55, 95% CI: 1.4-4.8, respectively). This association remained statistically significant after adjustment for confounders.

**Conclusion:** Age at menarche could be considered as a potential risk factor for type 2 diabetes and pre-diabetes.

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**Comparison of Cardiovascular Complications in Surgical Versus Natural Postmenopausal Women A Longitudinal Study**

Maryam Farahmand¹, Fahimeh Ramezani Tehrani², Fereidoun Azizi³

**Backgrounds:** Metabolic changes subsequently surgical and natural menopause differ and are associated with the risk factors for cardiovascular disease. The purpose of this study was to compare metabolic changes between 2 groups of postmenopausal women. Women who had go through bilateral oophorectomy + hysterectomy and women who reached natural menopause during follow-up.

**Material and Method:** This study was done on participants of the Tehran Lipid and Glucose Study who experienced surgical menopause (bilateral oophorectomy +...
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hysterectomy) or natural menopause almost one decade period. Metabolic changes and biochemical profiles were compared between the naturally postmenopausal group compared to the surgical menopause women. **Result:** Incidence of metabolic syndrome was 41.7% and 63.2% in the natural menopausal, and bilateral oophorectomy + hysterectomy groups, respectively. **Conclusion:** The incidence of metabolic syndrome in the bilateral oophorectomy + hysterectomy group was higher than natural menopausal women.

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**Effect of Kangaroo Mother Care on Successful Breastfeeding: A Systematic Review and Meta-Analysis of Randomised Controlled Trials**

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This study intended to conduct a systematic review and meta-analysis of randomised controlled trials on the effect of Kangaroo Mother Care (KMC) on success breastfeeding. Required data were collected by searching databases. Twenty articles were included. Breastfeeding success rate was higher in the KMC than Conventional Neonatal Care (CNC). The between-groups difference in the mean Infant Breast-Feeding Assessment Tool (IBFAT) scores was 1.50 (95% CI, 1.23-1.77). Breastfeeding was initiated very sooner in the KMC group. **Conclusion:** Findings indicate a superiority of KMC over CNC in terms of success breastfeeding. Assessing the complications and costs of KMC implementation recommended. **Key words:** breastfeeding, Kangaroo Mother Care, skin-to-skin contact, Conventional Neonatal Care

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**Gestational Trophoblastic Neoplasm; Case Series and Literature Review**

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**Objective:** Appropriated management of patients with advanced Gestational Trophoblastic Neoplasm (GTN) appear to be a great deal. This study was conducted to evaluate the value of the imaging method of fluorine-18-fluorodeoxyglucose positron
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**Vulvar Leiomyomatosis: A Diagnostic Challenge Case Report**

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**Introduction:** Vulvar leiomyomas are rare and usually misdiagnosed as Bartholin's cyst on initial presentation. Leiomyoma of vulva accounts for only 0.03% of all gynecological neoplasm. Definite diagnosis is based on surgical excision of the tumor. The aim of this report is to introduce a case of leiomyoma of the vulva which was initially misdiagnosed as Bartholin’s cyst.

**Case presentation:** We present a case of 36-year old virgin female (BMI>30) who was referred to the clinic with 5-year history of left labial mass which was initially diagnosed as Bartholin’s cyst. The mass was removed and the pathologist confirmed that the final diagnosis was vulvar leiomyoma.

**Conclusion:** Vulvar leiomyoma is usually misdiagnosed with Bartholin cyst and distinguishing between benign and malignant forms is confusing, so it is a diagnostic challenge. Surgical excision is the treatment of choice in all smooth muscle tumors of vulva. Continuing follow-up after treatment is highly recommended.

**Keywords:** Vulva, Leiomyoma, Bartholin’s cyst, Diagnosis, Women, Case report

**Methods:** A retrospective study on four patients with persistent GTN who had been studied with whole body PET/CT to detected the extension of tumor. Based on these data all our patients underwent surgery, therefor clinical impact strength of PET/CT had been analysis.

**Results:** In 3 of 4 cases the PET/CT had positive accordance with other anatomical and clinical impact. In one case the PET/CT not enable detected the source of viable neoplasm.

**Conclusion:** The additional value of the PET/CT with respect to other imaging modality; mainly is in differentiating between residual viable tumor tissue and necrosis, in discloser of chemo resistant lesion in GTN. Due to the expensive equipment despite of its value, unfortunately PET/CT, its use is limited in certain cases to detected the source of viable neoplasm.

**Keywords:** Chemo resistance, Gestational trophoblastic tumor, FDG PET/CT Scan.
Outcome’s Comparison of DMPA and IUD Among Users 12-18 Month After Starting Methods

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Backgrounds: DMPA and IUD are among the most effective reversible contraception in the world and also in Iran. Although, in Iran both methods are available and present to the woman in free, in the last decade we encountered to significant increase in trend of DMPA users. Therefore, the aim of this study was to compare some of the side effects of these two methods.

Material and Method: This retrospective cohort study was conducted on 300 healthy married women aged 19-50 during June- December 2018 in Tehran. Samples were selected from 31 centers and 57 sub-center. We contacted to 1200 women and finally 300 women had the study criteria and accepted to participate in the research. 150 women with DMPA and 150 women using IUD who started their Method for 12-18 month invited to the study. Menstrual bleeding and menstrual pattern by Higham chart and questionnaire; dysmenorrhea by visual analogue diagram of VAS has been measured by women during 2 months of self-reporting. In addition, weight changes and consumer’s method satisfaction have been assessed.

Result: The mean age of participated women was 33.7 ± 5.5 years. Although, menstrual bleeding in IUD users was significantly higher than DMPA users (P<0.001), no meaningful difference reported between dysmenorrhea and spotting between two groups. Weigh changes during this 12-18 month, in DMPA group was 2 kilograms more than IUD groups that show significant difference (P<0.001). Despite the amount of bleeding increased in IUD users, method satisfaction and method recommendation to other was significantly higher in IUD users in comparison of DMPA users (P<0.001).

Conclusion: The results of this study showed that IUD is preferable method on those who have the indication of using both methods and we cannot assume that the change in trend of using DMPA and IUD is simply due to their side effects.

Evaluation of Promotion of Care in High-Risk Pregnancies and Identifying Underlying Diseases and Its Role in Preventing Maternal Mortality in the Adygea Abadian East 97 -95

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Backgrounds: Reducing maternal mortality rate is one of the most important indicators that shows the development of countries. According to a recent World
Health Organization statement, the global goal of a fair reduction in maternal mortality after 2015 is to “put an end to preventable deaths.” Pregnancy is known as “high-risk” if the health of both mother and child is at risk. By identifying vulnerable pregnant mothers, identifying underlying illnesses and providing care when needed can prevent avoidable deaths. Therefore, this study aimed at risk factors for pregnancy and the provision of special care to high risk pregnant mothers and their role in preventing maternal mortality.

**Materials and Methods:** This is a descriptive-analytic study. Data from the Excel software program was summarized and analyzed. The maternal death rate was evaluated in 95-97 years in East Azarbaijan province.

**Results:** The percentage of pregnant mothers in the province of East Azerbaijan is 1.7%. The death rate of the mother in the province of East Azerbaijan in 1995 was 21.5 per 100,000 live births, reaching 10.6 per 100,000 births in 1997. Maternal deaths declined from 95% in 2010 to 14% in 1998, due to underlying illnesses.

**Conclusion:** In cases where the life or health of the mother and the fetus is at risk, it is referred to as “risk or problem” pregnancy. Diagnosis and isolation of high-risk pregnancies is the only way to ensure the health of the mother and the child. In order to achieve this, it is necessary to receive all the special care during pregnancy, by identifying these factors in the identification of high risk mothers and prevention. The mothers’ death rate, which is one of the most important indicators of development in the country, has been very effective.

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**Effect of Guided Imagery of Maternal Role on Depression Anxiety and Stress in Nulliparous Women with Unplanned Pregnancy**

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**Research funding source:** Mashhad University of Medical Sciences

**Background:** Nulliparous women with unplanned pregnancies experience more anxiety than women with planned pregnancies and may jeopardize positive mother-infant interaction and maternal role attainment. So the aim of this study was to determine the effect of guided imagery of maternal role on depression, anxiety and stress in nulliparous women with unplanned pregnancy.

**Methods:** In this clinical trial, 67 nulliparous women with unplanned pregnancy were randomly divided into intervention(n=35) and control(n=32) groups. The research tools included: demographic questionnaire, London, DASS 21, Canley’s maternal-fetal attachment. In the intervention group, one session of guided imagery on maternal role was performed in 34th week of pregnancy in groups of 4-7, afterwards guided...
imagery CDs were given to the mothers to be performed at home twice a week for two weeks; the control group only received the routine care. Depression - anxiety and stress were measured before the intervention and 2 weeks after the intervention. To analyze the data, independent t-test, paired t-test, chi-squared, Fisher’s exact test and Mann-Whitney U tests were run using SPSS version 21.

**Results:** There was no significant difference in mean scores of depression, anxiety and stress in the two groups before intervention (p=0.275) But after intervention there was a significant difference in mean scores of depression, anxiety and stress (p <0.001).

**Conclusion:** Guided imagery can control depression, anxiety and stress in pregnant women. It is recommended to use this method in prenatal care.

**Key word:** Depression, Anxiety, Stress, guided imagery, unplanned Pregnancy

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**Value of microRNAs in Endometriosis**

**Fatemeh Fateh**

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**Backgrounds:** This review will focus on miRNAs in endometriosis, a common chronic disease that affecting nearly 10% of fertility age in women[1]. Endometriosis is exemplified as overgrowth of endometrial tissue outside. MicroRNAs (miRNAs) are impressive regulators of gene expression that regulate gene expression at the levels of the post translation in some biological processes [2]. miRNAs and their target mRNAs are differentially expressed in endometriosis and other disorders of the female reproductive system. MicroRNAs are set up several biological processes [3, 4] and they contribute as biomarker[5]. Dysregulated miRNA expression has been analyzed in diseases of the female reproductive system, including gynecologic cancers (ovarian, cervical, and endometrial)[6]. many study has showed, miRNAs as potentially robust biomarkers for endometriosis[45]. A study in Iran has shown that Of 441 infertile women, 82 (18.6%) had endometriosis. [7] The presence of distinct miRNA profiles between endometriotic and nonendometriotic tissues indirectly indicates that miRNA may have a function in the pathophysiology of endometriosis. Types of microRNAs role in endometriosis is contain of microRNAs function in inflammation, cell survival, angiogenesis and cell invasion and proliferation and apoptosis[8].

**Material and Method:** in this review, the related articles for this subject were collected from international databases such as PubMed, Scopus and ISI.

**Result:** MicroRNAs are noncoding RNA fragments that regulate gene expression at the levels of the post translation in aspects of biology[9, 10] and abnormal expression of miRNAs has been associated with various disorders[11]. MiRNAs may play an important role in endometriotic lesion development[9]. Detail profiling of miRNAs and/or siRNAs may serve as an important tool for endometriosis diagnosis.
**Conclusion:** However, as a non-invasive method, expression of microRNAs could be used as biomarkers distinguishing endometriosis patients and may prove to be instrumental to tracking how a patient responds to a particular drug also they could perhaps help to explain the pathogenesis of disease. Clinical implementation of a miRNA-based endometriosis diagnostic is essential.

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**Importance of Micro RNAs in Polycystic Ovary Syndrome**

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**Backgrounds:** Polycystic ovary syndrome (PCOS) is the commonest hormonal disorder affecting 5-10% of female reproductive age in the world, accounting for the majority cases of anovulatory infertility [1, 2] However, PCOS carries the potential to disrupt endometrial intactness and prevent implantation[3].MicroRNAs (miRNAs) are impressive regulators of gene expression that regulate gene expression at the levels of the post translation in some biological processes [4].This molecular RNAs are set up several biological processes [5, 6] and they contribute as biomarker[7].

**Material and Method:** In this study, the related articles for this subject were collected from international databases such as ISI, PubMed and Scopus.

**Result:** Polycystic ovarian syndrome (PCOS) is the most common endocrine pathology in the childbearing age female around the world. Stein and Leventhal described it in 1935[8]MicroRNAs are noncoding RNA fragments that regulate gene expression at the levels of the post translation in aspects of biology[9, 10]and abnormal expression of miRNAs has been associated with various disorders[3].

**Conclusion:** However, expression of microRNAs could be used as biomarkers distinguishing PCOS patients and they could perhaps help to explain the pathogenesis of disease MiRNA might prove promising as biomarker candidates for PCOS patients. Although further research is required in this area.

* * *

**Evaluation of the Role of Pregnant Mothers in the First Half of Pregnancy and Their Role in Preventing Maternal Mortality East Azarbaijan Province 2015-2018**

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**Backgrounds:** Complications during pregnancy and postpartum are the main cause of the death of women of reproductive age, which can be identified by identifying
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pregnant mothers in the first half of pregnancy and providing regular and continuous care during pregnancy and postpartum of maternal mortality, which is one of the Millennium goals in the country of prevention. And achieved a global index. Therefore, this study aimed to investigate the effect of identification of pregnant mothers in the first half of pregnancy in the prevention of maternal mortality.

**Material and Method:** This is a descriptive-analytic study. The data in the Excel software program have been analyzed and analyzed. The post-traumatic status of post-traumatic services in the rural health centers of East Azarbaijan province has been investigated during 2015-2018.

**Result:** Approximately 1.7% of the population of the East Azarbaijan province has become pregnant women, of which about 70% of mothers refer to health centers for care. The maternal death rate in 2018 amounted to 21.5% of the 1000 live births in the East Azarbaijan province. By identifying the pregnant mothers in the first half of the pregnancy at the beginning of pregnancy and receiving all necessary care during pregnancy, the mother's death rate has been 10.5 per 100,000 live births.

**Conclusion:** Since many maternal deaths occur during pregnancy, the identification of pregnant mothers in the first half of pregnancy and the receipt of eight prenatal care is very important in accordance with the country's protocol, because if the mother needs special care in both cases, Pregnancy may be prevented in the early stages of diagnosis.

**The Effect of Preparing Preparations for Delivery in the Delivery Process by Natural Method of East Azarbaijan 2015-2018**

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**Backgrounds:** Pre-natal education is essential for maternal and family health, which can be done through various procedures using special methods, one of which can be effective in attending birth-preparation classes. Mother's knowledge of her body's abilities for normal delivery, she can help her deliver maternity and overcome her pain and fear. The classroom tutorials enable them to prepare for this era and provide the right solution to solve common problems and complications. Pregnancy and the choice of delivery. Therefore, this study was conducted with the aim of effecting the delivery of preparedness classes for delivery in the natural way of delivery.
Material and Method: This is a descriptive-analytic study. The data from the Excel software program were summarized and analyzed. Delivery of delivery method in women referred to the health center was studied.

Result: Approximately 19.5% of the population of the province of East Azarbaijan are women in the age group of 10 to 49 years old. 1.7% of this population are pregnant mothers during the year. In 2015, 94% of normal delivery in mothers participating in childbirth preparation classes increased by 33.5%, from 96 to 46.2, and in 2018 by 53.5%.

Conclusion: Pregnancy and childbirth is a natural and physiological process, but should be protected with regard to changes that occur in the physical and mental structure of the mother. By presenting trainings, maternal delivery readiness classes are empowered to choose safe delivery and can provide maternal, neonatal, maternal, and maternal maternal complications lower than delivery by cesarean delivery.

The First Menstruation Experience Among Female Students Fariman Township

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Background: The perceived meaning of the first menstruation and the passage from the childhood to adulthood in different individuals is different, which is what affects how people deal with this event. The aim of this study was to determine the emotional experience of the first menstruation in females in Fariman Township.

Methods: In this cross-sectional study, 300 high school students in Fariman city were selected through multistage stratified sampling. Data were collected using a questionnaire and analyzed by SPSS software using descriptive and analytical statistics including one way Pearson correlation coefficient and one way analysis of variance.

Results: The mean age of menarche in children 12 years and 6 months. 40.9% of students feel the maturity bad and a challenge. and 31.37% feel it natural and physiological and 27.73% have no special feeling. 89.1% of girls period have information before menarche and 10.9% of students did not have any information about it. also, 56% of students have mentioned their mother's was the best source of information.

Conclusion: At this time girls felt different and contradictory experience. although most of them have information about it but their knowledge is not enough to be able to accept and deal with the problems of this period. in addition, the key role of "mother" as the most important source of support and information are expressed.

Keywords: maturity, menarche, Fariman
Survey of Hypothyroidism’ prevalence in Pregnant Women in Fariman Health Centers in 1397

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Introduction: Many of women with thyroid abnormalities are unaware of their illness. Mothers with severe thyroid dysfunction have had infertility or frequent abortions, so diagnosis and treatment of this disease is very important in pregnancy.

Method: In this cross-sectional study, information was extracted from the results of pregnant mothers’ forms from electronic health files (SINA) the year 1397 and TSH greater than 3.9 was considered as hypothyroidism. Data were analyzed using Chi-Square and Fisher’s exact test with SPSS statistical software.

Result: From 2261 pregnant women, 206 of them had TSH greater than 3.9 (9.11%), which 36% were rural and 64% were urban. The mean age is 28 years old and 28-year-old mothers had the highest incidence. The lowest and the highest age were 13 and 47, respectively. 74.6% were housewives. 92% had no previous history of the disease. 24.28% had the first pregnancy and 31.8% had one child. 2.6% have a history of stillbirth and 6.3% had a history of abortion (5.1% abortion and 1.1% twice and more). All women consumed iodized salt but the amount of fish consumption was different; 78% less than once and just 9% four to five times a month. The results of the Chi-square test showed a significant difference between the number of abortions in mothers without hypothyroidism with mothers with this problem (p<0.005). Of the 2,055 mother who have no problems with TSH, 3% have abortions, while 23% hypothyroidism’ smothers have abortions. There is also a significant difference between the number of stillbirths with the history of the hypothyroidism of the mother (p=0.04) mothers lacking a history of hypothyroidism, 1% have a history of stillbirth, while 4% of mothers with a history of hypothyroidism have a history of stillbirth.

Conclusion: Tests of thyroid function, especially TSH, should be carefully monitored during pregnancy and considering the relationship between the consumption of fish and hypothyroidism, culture-building on the use of fish and marine products should be one of the priorities of health education.

Keyword: Hypothyroidism, pregnancy, hypothyroid disorders, Fariman
The Effect of Education Via Smartphone Application on the Risk Perception of Type 2 Diabetes Among Women with Gestational Diabetes

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Backgrounds: The risk of catching type 2 diabetes (T2DM) is 2-7 times greater in pregnant women with gestational diabetes (GDM), compared to women with no GDM. Despite these facts, women with GDM may not perceive themselves to be at risk for future diabetes. Low risk perceptions can cause women with GDM to believe that their health condition is temporary and might ignore adherence to their treatment regimen and can be exposed to an increased risk of T2DM. This study aimed to describe the effect of smartphone-education on risk perception of T2DM in women with gestational diabetes.

Material and Method: This quasi-experimental study included 90 pregnant women with gestational diabetes(n = 45 in each group) who were referred to a university hospital in Tehran, Iran. The gestational diabetes application was installed on the smartphones of members of the intervention group. The members of the control group only received routine prenatal education. The type 2 diabetes risk perception questionnaire was completed by both groups before and six weeks after the intervention. The data were analyzed with chisquared, paired-t, independent t, and Fisher exact tests, and a covariance analysis was applied using SPSS-16 software. Statistical significance was determined as a level of less than 0.05 in this study.

Result: Our results shown that the risk perception significantly differed between the two groups (p&lt;0.001), comparing the data that was collected before and six weeks after the intervention. The intervention group members had more score changes. The smartphone-based education also resulted in significantly lower average scores of the optimistic bias category among the intervention group members.

Conclusion: Smartphone-based education provides a complementary or alternative solution for in-person educational and supportive interventions for increasing the risk perception of T2DM and accordingly decrease the rate of catching T2DM. Diabetes type 2; gestational diabetes; risk perception; smartphone application.
The Effect of Honey Saffron Syrup on Labor Progression in Nulliparous Women

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Backgrounds: Childbirth is one of the most important events in women’s lives and one of the important health indicators of any country. Labor duration is one of the factors affecting the pregnancy outcome and maternal and fetal complications. Pharmaceutical and non-pharmaceutical methods are used to accelerate delivery and prevent a complicated one. The objective of the present study is to determine the effect of honey saffron syrup on the labor progression in nulliparous women admitted to childbirth ward of Imam Khomeini Hospital of Divandarreh in 2018.

Material and Method: In this double blind controlled clinical trial, 90 nulliparous women who referred to Imam Khomeini Hospital in Divandarreh (Iran) in 2018 were examined. The nulliparous women with inclusion criteria were randomly divided into three groups using closed packets. In the first intervention group, the saffron syrup prepared with honey and the second intervention group, saffron syrup prepared with sugar and in the control group the placebo were orally administered every two hours to a maximum of three times, each time at 150 cc and the duration of the labor phases was recorded in all three groups. Collected data were entered into STATA software version 12 and data was analyzed using Fisher’s test, ANOVA with Fisher’s post hoc test and Repeated measure statistical method with p<0.05 as significant.

Result: The mean of labor duration in the two intervention groups was significantly shorter than the control group (p=0.000). The duration of the first stage of labor in the honey saffron syrup group was significantly shorter than the sugar saffron syrup group (p=0.016).

Conclusion: Administration of saffron syrup with honey shortened the time of first, second and third stage of labor.

Management of Endometrial Hyperplasia in Reproductive Age Women

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Backgrounds: The endometrium may develop endometrial hyperplasia (EH), which includes non-neoplastic entities (disordered proliferative endometrium, benign hyperplasia, simple and complex hyperplasias without atypia) characterized by a
proliferation of endometrial glands of irregular size and shape, and precancerous neoplasms (endometrial intraepithelial neoplasms [EIN], and all atypical complex hyperplasia) characterized by neoplastic features but without invasion. EH frequently results from chronic estrogen stimulation unopposed by the counterbalancing effects of progesterone. The management of EH is determined by clinical factors and by the diagnostic classification. Classification is based upon histologic features and risk of progression to endometrial carcinoma. Clinical factors to consider in all types of EH are: Risk factors for recurrence or progression (eg, obesity, ovulatory dysfunction, increased genetic risk), Desire for fertility and Contraceptive needs.

**Material and Method:** Management decisions depend on the EH pathologic classification. We encourage standardization using the 2015 World Health Organization classification criteria. Diagnostic categories are based primarily upon two factors: Nuclear atypia and Degree of glandular crowding and complexity. The presence or absence of nuclear atypia is the primary factor in determining risk for concomitant endometrial carcinoma or progression to endometrial carcinoma that further informs initial treatment, maintenance therapy, and long-term surveillance. Options for the management of EH include surveillance, progestin therapy, or hysterectomy. Other treatment approaches include pharmacologic treatments other than progestins or conservative surgical treatment. All management strategies should also be accompanied by removal of the extrinsic or intrinsic source of unopposed estrogen, since excess exposure to estrogen is the main etiology of endometrial neoplasia. Weight loss in obese women has multiple health benefits in addition to reducing high levels of endogenous estrogens due to estradiol and estrone production by adipocytes. Bariatric surgery may be of benefit in reducing this risk. For women with ovulatory dysfunction, the etiology should be treated (eg, prolactinoma), or if the ovulatory dysfunction is likely to be chronic (eg, polycystic ovarian syndrome), women may need maintenance progestin therapy after EH regression.

**Result:** Common progestin treatments for EH include: the levonorgestrel-releasing intrauterine device, 52 mg with a release rate of 20 mcg/day over five years (Mirena; LN52/5), oral medroxyprogesterone acetate, or oral megestrol acetate. Oral estrogen/progestin contraceptives have not been well studied for EH treatment, but are an option for women with EH without atypia. Common progestin treatments for EH include: the levonorgestrel-releasing intrauterine device, 52 mg with a release rate of 20 mcg/day over five years (Mirena; LN52/5), oral medroxyprogesterone acetate, or oral megestrol acetate. Oral estrogen/progestin contraceptives have not been well studied for EH treatment, but are an option for women with EH without atypia. For women with EH without atypia, we recommend the LN52/5 intrauterine device rather than systemic progestins. For women with atypical EH who are postmenopausal or who are premenopausal and have completed childbearing, we recommend hysterectomy rather than progestin therapy. Progestin therapy is an option for premenopausal women with atypical EH who wish to preserve fertility or those of any menopausal status who cannot tolerate surgery. Metformin has
propounded as a new drug for treatment of EH especially as an adjuvant treatment in conservative management of atypical endometrial hyperplasia.

**Conclusion:** For women with atypical EH who are premenopausal and wish to preserve fertility it is reasonable to treat with a progestin rather than hysterectomy. These women must be able to comply with medical therapy and follow-up endometrial sampling.

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**The Effect of Acupressure at the Sanyinjiao SP6 Point on Relief of Primary Dysmenorrhea a Systematic Review of Clinical Trials**

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**Backgrounds:** Primary dysmenorrhea is one of the most common problem in women of reproductive age that negatively affect their quality of life. Since today using of complementary medicine for alleviation of primary dysmenorrhea has been considered, this study was performed with aim to review the clinical trials which evaluated the effect of acupressure at the Sanyinjiao point on relief of primary dysmenorrhea.

**Material and Method:** In this review article, electronic databases of SID, Iranmedex, Magiran, IranDoc, Cochrane Library, MEDLINE/PubMed, Scopus, Google Scholar and IRCT were searched up to December, 2018 to identify all the studies reporting the effect of acupressure at the Sanyinjiao point on relief of primary dysmenorrhea. The search was performed using the keywords of dysmenorrhea, painful menstruation, acupressure, Sanyinjiao Point, SP6 Point, Spleen 6 Point and Clinical trial. The quality of included studies was assessed using the Cochrane “risk of bias” tool. The results were reported qualitatively.

**Result:** Among 475 articles found in the initial search, 16 randomized trials (1436 participants) were selected for this systematic review. The studies were conducted in Iran, China, Korea, Taiwan and Egypt. Most studies showed significant reduction in the severity of dysmenorrhea in acupressure at Sanyinjiao point group compared with the control group. Few studies were investigated the possible side effects of acupressure technique that no serious adverse effects were reported in these studies.

**Conclusion:** Acupressure at the Sanyinjiao point can be an effective method for alleviation of primary dysmenorrhea, but due to the poor methodological quality in the majority of trials, more studies with high-quality are needed to confirm these findings.
The Effect of Spiritual Group Therapy on Mental Health and Life Quality of the Patients with Breast Cancer: a Review Study

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Introduction: Breast cancer is a life-threatening disease. The process of treating cancer is usually associated with physical, psychological and social complications in patients, which in turn can exacerbate the disease by weakening the patient. Thus, one must pay attention to maintaining and improving mental health of the patients. One of the most significant factors creating peace is remembering God that can be taught in the process of spiritual therapy. In recent years, the effectiveness of spiritual therapy has been given so much attention. Thus, the study was conducted to determine the role of spirituality therapy in the mental health and life quality of the patients with breast cancer.

Materials and Methods: This review study was conducted with the keywords of spiritual therapy, life quality, mental health, and breast cancer based on Mesh, through a search in Google scholar, science direct, pubmed, magiran databases during the years 2001-2019. After critical evaluation of the papers based on the CONSORT tool, the papers were classified according quality as poor, medium, and good quality. Seventy two papers were found and after removing repetitious, unrelated, and the ones with full text inaccessible, 34 papers with good to medium quality were selected for final analysis.

Results: Spirituality is an individual-dependent subjective concept that forms the immaterial aspects of human obtained through communication with God, self, others, and the environment, and defined as an individual’s sense of peace, purpose, and connection with others and beliefs in the meaning of life. The results from different studies showed that SGT interventions increase mental health of the patients and increase the life quality and mental health of women with breast cancer. Interventions in the subscales of mental health including life quality, depression, anxiety, insomnia, and social dysfunction were effective as well.

Conclusion: since cancer heavily affects on life quality, and psychosocial and social performance, and various studies have shown that spiritual therapy has managed to incorporate mental health components, such as maintaining self-esteem, giving meaning and purpose, and mental and emotional relaxation, performing psychological interventions focused on spirituality are recommended in the treatment plan for the patients with breast cancer.

Keywords: Spiritual therapy, life quality, Mental health, Breast cancer, Non medical intervention
The Effect of Ginseng on Sexual Dysfunction in Menopausal Women A Double-Blind Randomized Controlled Trial

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Backgrounds: Sexual problems constitute a largely-overlooked problem for women during menopause. The present study was conducted to determine the effect of Ginseng on sexual function (primary outcome), quality of life and menopausal symptoms (secondary outcomes) in postmenopausal women with sexual dysfunction.

Material and Method: Design: This randomized controlled trial was conducted on 62 women who were randomly assigned to the intervention/control groups using block randomization.

Intervention: The intervention group received 500 mg of Panax Ginseng and the control group received placebo twice daily for four weeks.

Main Outcome Measures: Standard questionnaires including the Female Sexual Function Index (FSFI), the Menopause-Specific Quality of Life (MENQOL) and the Greene Menopausal Symptom Scale were completed before and four weeks after the intervention.

Result: There were no statistically significant differences between the two groups in terms of demographic characteristics and the baseline scores of sexual function, quality of life and menopausal symptoms (P > 0.05). After the intervention, the mean total score of FSFI (Adjusted Mean Difference=6.32, 95% CI=3.48 to 9.16, P < 0.001) was significantly higher in the intervention group compared to the control group. The mean total score of quality of life (AMD=-20.79, 95% CI=-25.83 to -15.75, P < 0.001) and menopausal symptoms (AMD=-8.25, 95% CI=-10.55 to -5.95, P < 0.001) were significantly lower in the treatment group than the control group.

Conclusion: Ginseng has significant effects in improving sexual function and quality of life and mitigating menopausal symptoms. As a multipotent plant, Ginseng can be a suitable alternative for conventional therapies to promote the health of menopausal women.

A Meta-Analysis of the Efficacy of Panax Ginseng on Menopausal Women’s Sexual Function

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Backgrounds: An increase in life expectancy results in the aging population growth. This study was designed to evaluate the efficacy and adverse events of ginseng that could be used as a herbal medicine in women with sexual dysfunction.
Material and Method: The authors of this study searched Cochrane Library, MEDLINE, Web of Science, Embase, Scopus, ProQuest, Google Scholar, and Persian databases without a time limitation until May 2018 and examined all the randomized clinical trials (RCTs) that compared the effect of different types of ginseng on sexual function of menopausal women as compared to the placebo controls. The Cochrane risk of bias tool was used to assess the methodological quality of the included studies. The heterogeneity was determined using the I2 index. In addition, standardized mean difference (SMD) was used instead of mean differences (MD) and a random effect was reported instead of fixed effect in meta-analysis.

Results: The eligibility criteria were found in five RCTs. All the included studies were placebo-controlled. Two trials had a parallel design while three studies used a crossover design. Although four trials indicated that ginseng significantly improved sexual function, they didn't report any treatment effect compared to the placebo group. Based on the results of meta-analysis obtained from five studies including 531 women, there was no statistically significant effect of ginseng on female sexual dysfunction (FSD) compared to the placebo control group (SMD: 0.26; 95% CI: -0.26 to 0.76). Nonetheless, there was a considerable heterogeneity among the studies (I2 = 81%; P < 0.0001). Moreover, all the included studies assessed adverse events, but in three of the RCTs, there was no significant difference between the placebo and ginseng groups.

Conclusion: The evidence regarding ginseng as a therapeutic agent for sexual dysfunction is unjustifiable. Rigorous studies seem warranted in this respect.

Prenatal Diagnosis of Tetralogy of Fallot in a Fetus with Maternal Gestational Diabetes Mellitus a Case Report

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Backgrounds: Gestational diabetes mellitus (GDM) is a teratogenic condition for the fetus. Congenital malformations among the newborns of diabetic mothers is 5-times greater than general population. Tetralogy of fallot is a common form of congenital heart defect. We would like to report a diagnosed case of fetal tetralogy of fallot based on findings including a ventricular septal defect (VSD), aortic valve overriding, bidirectional shunt via VSD in aortic long axis view, in addition to anomalies on the three-vessel view with small pulmonic annulus in a high risk mother with GDM with a gestational age of 19 weeks. It appears that although the risk of fetal cardiac malformations may be highest in women with GDM, all pregnancies of pre-gestational diabetes and GDM are at increased risk, given this, regular fetal echocardiographies should be consider in women with GDM.

Material and Method: Case Presentation: A 30 year-old woman referred for routine echocardiography evaluations by gynecologist consult. The fetal echocardiography
perform ed by pediatric cardiologist at 19 weeks’ gestational age (second-trimester). The echocardiographic images were obtained in the four-chamber view, aortic long axis view and three-vessel view (3VV) to evaluate the size, position, alignment, axis of the fetal heart, atria, ventricles, atrioventricular (AV) valves, number of the main pulmonary artery, ascending aorta and superior vena cava. Normal right ventricle chamber (figure 1-a), ventricular septal defect and Aorta overriding (figure 1-b), bidirectional shunt via VSD (figure 1-c) and relatively small pulmonic annulus (figure 1-d) were detected in fetus echocardiography. According to the above abnormalities a diagnosis of TOF was suggested. The termination of pregnancy.

**Result:** Early detection of fetuses with congenital cardiac defects is important. The diagnosis of prenatally Tetralogy of Fallot is vital for obstetrical management of the disease (5, 12). The occurrence of fetal CHD in pregnant women with GDM is less well documented. GDM is defined as any degree of glucose intolerance with onset or first diagnosis during pregnancy (13). Diabetes mellitus (DM) is one of the most common maternal conditions. Approximately 1% of all pregnant women are considered to have pre-gestational DM. Overall, there is nearly a 5-fold (3%-5%) increase in CHD compared with the general population in women with pre-gestational DM (14, 15). Diabetes is multifactorial in which physiological, environmental and genetic factors play roles to develop GDM, age higher than 25 years, previous GDM, family history of DM, maternal body mass index more than 30, previous infant with a birth weight more than 4kg and pregnancy-related hypertension are some risk factors in developing GDM (16). Poorly controlled diabetic pregnancy is associated with the severity of cardiac malformation in fetuses of GDM. Studies have shown that maternal diabetes may cause abnormalities in the formation of fetal heart structures, including defects of the cardiac outflow and anomalies related to the heart valves (17, 18). Women who regularly have prenatal follow-up and monitoring and keep their blood glucose levels within normal range early in pregnancy would have much lower risk of having a baby with CHD. The four-chamber view is a practical screening tool for examining the fetal heart, as it provides information about CHDs. Using the 3VV, it is possible to image the MPA, AA, and SVC and to determine the relationship between them (19, 20). TOF consists of a ventricular septal defect, stenosis of the infundibulum of the pulmonary artery, aortic valve overriding the interventricular septum, and hypertrophy of the right ventricle. The severity of defects may vary widely (21). In our study, a diagnosed of TOF was suggested based on findings including a VSD, aortic valve overriding, bidirectional via VSD in aortic long axis view, in addition to anomalies on the three-vessel view with small pulmonic annulus. Prenatal diagnosis of fetal congenital heart disease has been shown to have a significant effect on prenatal and postnatal management and outcomes (22). All patients with tetralogy of TOF should have preconception cardiology counseling and follow-up.

**Conclusion:** It appears that although the risk of fetal cardiac malformations may be highest in women with GDM, all pregnancies of pre-gestational diabetes and GDM are at increased risk. Given this information, regular fetal echocardiographies should be consider in women with GDM.
Fetal Coarctation of the Aorta Successfully Repaired in the Neonatal Period a Case Report and Review of Literature

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**Backgrounds:** Abstract Coarctation of the aorta is one of the most difficult conditions to diagnose during fetal life with a frequency of approximately 5-8% of live births with congenital heart disease. We would like to report a case of coarctation of the aorta diagnosed prenatally at 28 weeks' gestation. There were evidences of right ventricular and atrial enlargements, significant aortic stenosis, antegrade and retrograde flow in proximal part of descending aorta at fetal echocardiography. Since it was not appropriate time for abortion, the pregnancy was monitored and continued to termination. Surgical relief of the aortic obstruction was done in the day 20 of birth. The neonate was surgically treated successfully. Prenatal diagnosis of coarctation of the aorta is potentially lifesaving and can improve the outcomes of operative conditions in infants preparing for surgery. Early detection and surgically repair of Coarctation of the aorta can significantly improve survival rate of affected neonates.

**Material and Method:** Case presentation: A 34-year-old woman (gravida 1, Para 0, Abortus 0) known case of diabetic mellitus was referred for fetal echocardiographic examination at 28 weeks' gestational age due to the routine medical assessments. There were not past medical history of any underlying diseases such as hypertension. Family history of congenital heart disease was negative. There were right ventricular and atrial enlargements at fetal echocardiography (Figure 1). Echocardiographic evidence of significant aortic stenosis, antegrade and retrograde flow in proximal part of descending aorta (DAO) in aortic arch view fetal echocardiography were seen (Figure 2 and 3). There was CoA in suprasternal notch view in transthoracic echocardiography (figure 4). On color Doppler imaging, flow acceleration in stenotic portion of descending aorta was noted (Figure 5). According to the findings, the diagnosis of coarctation of the aorta was suggested for the fetus. Since it was not appropriate time for abortion, the pregnancy was monitored and continued to termination. After delivery, there were pathological cardiovascular findings of right ventricular (RV) failure. Doppler spectral echocardiography showed saw tooth appearance (Figure 6). Computed tomography (CT) scan also revealed CoA in neonate (Figure 7). Surgical relief of the aortic obstruction was done in the day 20 of birth. No immediate complications were seen during surgical operation and the newborn was in stable condition. Imaging of suprasternal view (posterior repair of coarctation) showed no significant narrowing of DAO in neonate after surgery (Figure 8). After the postoperative course, the newborn and the woman were in good conditions. The patient is being regular follow up with pediatric cardiologist and is in good health.
Result: CoA is one of the most poorly detected lesions at routine prenatal and postnatal screening and is a life-threatening cardiovascular condition if undiagnosed in the early neonatal period. The incidence of CoA is approximately 4-5 per 100 live births with congenital heart defects (7,8). Diagnosis of CoA remains challenging. Prenatal diagnosis of CoA can be difficult to make even in the best centers. Prenatal diagnosis of CoA is associated with higher survival rate and better preoperative clinical outcome than postnatal diagnosis (11). In our case, the diagnosis of CoA was suggested according to the dominance of right articlar and ventricular structures, significant aorticstenosis, flow acceleration in stenotic portion and antegrade and retrograde flow in proximal part of descending aorta in fetal imaging evaluations. Fetal CoA has no significant effect on intrauterine hemodynamics since the right ventricle via the ductus arteriosus mainly supplies the descending aorta. In our newborn case, there were cardiovascular pathology of heart RV failure including tachypnea, tachycardia, pallor, respiratory distress, grunting and feeding difficulties. Transthoracic echocardiography is the most important diagnostic test for evaluation of both the anatomy and thehaemodynamic effects of CoA (16, 17).

Surgical treatment of aortic coarctation allows to reach adult age and also improves the reproductive capacity of women (19). Patients with successfully treated coarctation often continue to have systemic arterial hypertension both at rest and with exercise despite the absence of any residual coarctation due to various potential mechanisms including resetting the reninangiotensinsystem (RAS), impaired small resistance-vessel reactivity and abnormal aortic distensibility (20). Our case was successfully treated surgically and at present is at good condition and being regular followup.

Conclusion: Our study showed that prenatal diagnosis of coarctation of the aorta is potentially lifesaving and can improve the outcome of operative conditions in infants preparing for surgery. Early detection and surgically repair of CoA can significantly improve survival rate of affected neonates.

Comparison of the Effect of two Methods of Training Group and Educational Booklet on the Knowledge, Attitude and Self-Efficacy of Mothers About the Sexual Health of Intellectually Disabled Adolescent Girls: A Field Trial

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Background And Objective: The sexual problems of intellectually disabled adolescents are rooted in the unawareness and inability of adolescents to understand issues related to sexuality, unawareness and disability of parents, teachers, and religious-cultural beliefs of the community. Since parents play an important role in
shaping the attitude of their intellectually disabled adolescents toward puberty and sexuality, this study aimed to compare the effect of two methods of training group and educational booklet on the knowledge, attitude and self-efficacy of mothers about the sexual health of intellectually disabled adolescent girls.

**Materials and Methods:** In this field trial, 81 mothers of intellectually disabled adolescent girls were divided into three groups of group training, training through booklet and control that received no intervention, and its impacts on mother's knowledge, attitude and self-efficacy about taking care of sexual health of girls were determined. The researcher-made questionnaires about the assessment of knowledge, attitude and a self-efficacy standard questionnaire was completed before intervention and 1 months after the intervention by mothers. Data were analyzed with descriptive-analytic statistical methods.

**Results:** The mean score of mothers' knowledge and self-efficacy one month after the intervention in training group was higher than educational booklet group and control group (p <0.001) and the mean score of mothers' knowledge and self-efficacy in educational booklet group was higher than control group (p = 0.005, p = 0.02). Also, one month after the intervention, the mean score of mothers' attitude in the training group was higher than the control group and education booklet group (p <0.001), but there was no significant difference between the mean score of mothers' attitude in the two groups of control group and education booklet group (p >0.05).

**Conclusion:** Implementation of group-based educational intervention in comparison with educational booklet method was associated with a greater increase in knowledge, attitude and self-efficacy of mothers about the sexual health of intellectually disabled adolescent girls. Therefore, considering the effective role of the educator in group education, providing an opportunity for questions and answers on sexual health and its impact on better awareness and learning, eliminating mothers' mistaken beliefs about sexual health and also encouraging mothers of intellectually disabled adolescent girls and emphasizing on their individual abilities in taking care of their daughter's sexual health to enhance their self-efficacy, group education is suggested as a suitable way to educate parents of intellectually disabled adolescent girls.

**Keywords:** Education, Knowledge, Attitude, Self-efficacy, Sexual Health, intellectually disability

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**Iodine status in the Last Month of Pregnancy in Iranian Women**

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**Backgrounds:** Iodine is a trace element essential for thyroid hormone production. Thyroid hormones play a key role in normal fetal brain development. In-utero iodine deficiency can lead to irreversible cognitive and motor deficits. This study was
performed for the first time on iodine status in the last month of pregnancy in Iranian women.

**Material and Method** : This cross-sectional study was performed on 214 women in their last month of pregnancy in the city of Shiraz. Subjects were chosen from pregnant women referring to 4 major hospitals and 5 OB/GYN clinics for normal follow up. Inclusion criteria were confirmed last month of pregnancy and being in good general health without thyroid disorders, other chronic illnesses, or medications. A morning spot urine was taken from the subjects and sent for a single laboratory. Urine iodine concentration was (UIC) measured using the Sandell-Kolthoff method. WHO reference medians were used to classify iodine status as insufficient (<150 µg/l), adequate (150–249 µg/l), above requirements (250–499 µg/l) or excessive (≥500 µg/l).

**Result:** Overall median UIC (IQR) in the participants was 112.10 (92.05-134.60) µg/l. Median UIC in gestational age of 36 (n=44), 37 (n=58), 38 (n=47), 39 (n=36) and 40 (n=29) was 121.95 (100.83-149.13), 113.25 (94.30-137.20), 111.70 (89.10-128.70), 104.65 (85.05-129.15) and 111.30 (88.20-123.90) ) µg/l respectively. There was a statistically significant decline in iodine concentration in higher gestational ages (p=0.035). 12.6% of overall participants and 25%, 13.8%, 6.4%, 11.1% and 3.4% of participants in gestational age of 36-40 weeks respectively had ≥150 µg/l UIC. This difference was also significant (p=0.038).

**Conclusion:** Iodine deficiency has occurred in Iranian women in their last month of pregnancy. It appears universal salt iodization and seldom prescription of iodofolic supplements may not be enough to combat iodine deficiency in Iran. A comprehensive plan to fight iodine insufficiency in pregnant women should be studied.

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**GLP-1 Receptor Agonists in the Treatment of Polycystic Ovary Syndrome and Compare with Metformin a Systematic Review Study**

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**Backgrounds:** Polycystic ovary syndrome (PCOS) is the most common endocrine disorder in females and is often associated with a number of cardiometabolic disorders such as central obesity, dyslipidaemia, hypertension, insulin resistance, glucose intolerance and type 2 diabetes mellitus. A primary treatment goal is weight reduction. The weight loss effects of glucagon-like peptide-1 receptor agonists (GLP-1RA), previously demonstrated in diabetic and obese non-diabetic patients, offer a unique opportunity to expand the medical options available to PCOS patients.

**Material and method** : Electronic databases (PubMed, EMBASE, Cochrane Library) dating from their establishment to June 2019 were searched to find all randomized controlled trials (RCTs) reporting the efficacy of GLP-1RA therapy in PCOS and compare with Metformin.
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**Result:** The available studies of GLP-1RA therapy in the treatment of excess body weight in women with PCOS demonstrate that it is effective in weight reduction either as monotherapy or in combination with Metformin. A few studies showed that androgens may be modestly decreased and menstrual frequency may be increased. Eating behavior may be improved with GLP-1RA therapy and glucose parameters are generally improved. GLP-1RAs were well-tolerated, with nausea being the most significant adverse side effect. Compared with Metformin, GLP-1RAs were more effective in improving insulin sensitivity (standard mean difference [SMD] -0.40, 95% confidence interval [CI] -0.74 to -0.06, P = 0.02), reducing body mass index (SMD -1.02, 95% CI -1.85 to -0.19, P = 0.02) and abdominal girth (SMD -0.45, 95% CI -0.89 to -0.00, P = 0.05). GLP-1RAs were associated with a higher incidence of nausea and headache than Metformin, but there were no significant differences in other data.

**Conclusion:** Based on studies, GLP-1RA is a good method to control patients with PCOS and compared with Metformin, might be a good choice for obese patients, especially those with insulin resistance. More high-quality research is needed to assess the efficacy of a GLP-1RA on women with PCOS.

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**A Systematic Review on Endometriosis During Pregnancy**

**Diagnosis Complications and Outcomes**

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**Backgrounds:** Endometriosis in pregnancy predominantly tends to regress or to stay stable but small part of endometriomas and nodules of deep infiltrating endometriosis may undergo the process of decidualization. Therefore, the foci of endometriosis enlarge their volume and change their structure caused by the hormonal changes in pregnant women.

**Material and Method:** A literature review of published data on endometriosis on pregnancy via Pubmed between January 2000 and June 2019.

**Result:** Majority of decidualized ovarian endometriomas is asymptomatic so it is mostly accidentally found during the routine ultrasound check-ups within the frame of perinatologic screening. If ultrasound simple rules are not applicable, the pregnant patient should be referred to a tertiary center for expert ultrasound assessment. Magnetic resonance is indicated in cases of uncertain ultrasound findings, because it can clarify the diagnostics due to its high accuracy in detection of benign decidualized endometriomas in comparison to malignant ovarian tumors. Acute complications of endometriosis during pregnancy, such as spontaneous hemoperitoneum, bowel and ovarian complications, represent rare but life-threatening conditions that require, in most of the cases, surgical operations to be managed. Women with endometriosis had a statistically significantly higher risk of preterm birth (OR 1.63; 95% CI, 1.32-2.01), miscarriage (OR 1.75; 95% CI, 1.29-2.37), placenta previa (OR 3.03; 95% CI, 1.50-
6.13), small for gestational age (OR 1.27; 95% CI, 1.03-1.57), and cesarean delivery (OR 1.57; 95% CI, 1.39-1.78).

**Conclusion:** Complications of endometriosis during pregnancy are rare and there is no evidence that the disease has a major detrimental effect on pregnancy outcome. Therefore, pregnant women with endometriosis can be reassured on the course of their pregnancies although the physicians should be aware of the potential increased risk of placenta previa. Current evidence does not support any modification of conventional monitoring of pregnancy in patients with endometriosis.

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**The Relationship Between Prolactin Hormone and Polycystic Syndrome in Urmia Women**

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Polycystic syndrome is the most important and common endocrine disorder among women of childbearing age. Inadequate secretion of gonadotropins, FSH, LH, and prolactin can be attributed to this disease. Prolactin secretes from the lymphotrophic cells of the pituitary gland and increases its secretion by 6-fold during pregnancy.

**Materials and Methods:** Our statistical population included 90 women with polycystic syndrome referred to Omid hospital in Urmia. 100 healthy women were selected as the control group from all subjects. Finally, data were analyzed by SPSS V.24 and Spearman correlation coefficient and T-test.

**Results:** The mean age of the patients was 30.62 \pm 2.3 years and the control group was 28.12 4 4.70 years, indicating no association with disease incidence. The mean BMI in the patient group was 27.1 \pm 1.78 kg / m2. Mean serum prolactin level in patients was 21.19 12 6.12 ng / ml with a range of 10.9- 54.17 (P = 0.02) while in control group was equal to 0.09 1 1.14. Spearman’s correlation coefficient between BMI and prolactin hormone showed a significant correlation with disease incidence (14 = 23 ng / ml) (CL = 1.64-3.51-OR = 95%).

**Conclusion:** According to the results, the mutation in prolactin hormone secretion has a significant relationship with the incidence of polycystic oocyte syndrome, which can be used as a prognostic factor.

**Keywords:** Prolactin, Syndrome, Polycystic oocyte, Anterior pituitary
Parent-Child Relationship a Guarantee for Sexual Health

A Review Study

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Backgrounds: In order to promote children’s sexual health status and their general health and prevent their sexual problems and complications, it is necessary to establish and appropriate and correct relationship between parents and the child. Therefore, the aim of the present study was to investigate the between parent-child relationship and its effective role in child sexual health.

Material and Method: This study was carried out based a narrative review method. To do so, the following keywords were searched in the PubMed, Google Scholar, SID, and WHO Science Direct databases: Sexual health, Reproductive health, Relationship, Parents, and Child. A total of 56 articles were searched and finally 23 articles were selected.

Result: The findings of the present study were very valuable and were summarized in the following four categories. First category: Parent-parent relationship facilitators include: 1) Parents play their roles and take their responsibilities 2) They should comfortably talk with children about sexual issues 3) They should establish a positive relationship with their children 4) Children should be ready to acquire information on sexual health. Second category: Barriers to parents-child relationship include: 1) the difficulty parents to discussing sexual matters with their children; 2) the lack of experience and skills of parents while talking to their children about sexual issues. Third Category: Solutions for strengthening parent-child relationship include: (1) Health professionals and service providers should prepare parents and children and enhance their information about sexual and reproductive health (2) Communication skills training (3) Experience and participation and further research. Fourth category: Sexual and reproductive health problems caused by lack of parent-child relationship, including sexually transmitted infections, unwanted pregnancies, unsafe abortions, abuse and rape.

Conclusion: The results of the present study reveals the need promote the parent-child relationship by eliminating obstacles and train communication skills so that children’s sexual values system is formed properly and under the supervision of parents and they have peaceful sexual and common life during their adulthood.
Infertility and Treatment Exploring the Effects of the Treatment Process on the Life Cycle

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Backgrounds: The treatment process has a great contribution to the life cycle of the infertile women and couples, and involves various aspects of their lives. The treatment process causes disorders of the infertile couples’ decision makers to plans in life. This study aimed to exploring the effects of the treatment process on the life cycle.

Material and Method: A qualitative content analysis was conducted based on 32 semi-structured interviews with 25 women affected by primary and secondary infertility with no surviving children. The participants were purposefully selected with maximum variability from a fertility health research center in Tehran, Iran. Data were collected using semi-structured interviews and analyzed using the conventional content analysis method.

Result: Our findings indicate that the effects of the treatment process over the life cycle are divided into three main categories: 1. Reduce Couple’s interactions with subcategories including: (reduce verbal and emotional relationships of couples when treatment failure, Sexual dissatisfaction due to the treatment process, hiding some of the treatment information from one's husband) 2. The tensions and stresses of continuing the treatment process with subcategories including: (tensions entered from the treatment team, tensions entered from the arrival of fertile women to help treatment, tensions due to therapeutic interventions), 3. The economic tensions of treatment with subcategories including: (undesirable effects of high cost of treatment on other basic needs of life, the treatment of the factor of the social functional disorder).

Conclusion: This study reveals that Iranian women with fertility issues seeking treatment face with many problems that could have devastating effects on the quality of their lives. Therefore, there is a need for informational, emotional and financial support groups that policy makers in the health field should provide for infertile people.

Comparing the Effect of Teaching Breast Self-Examination by Face-to-Face And pamphlet on Health Ambassadors

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Background: Experience has shown that in order to achieve sustainable social development, the co-operation of each individual in the community is needed. Health development, which is one of the most basic dimensions of social development, needs
more cooperation than other aspects of development, since awareness, the sense of responsibility, and the ability to act individually Society is essential for public health. The ambassadors of health are the pioneers of this public assistance, which is a step in the way of public participation for public health. Given that breast cancer is one of the most common cancers in women, its early diagnosis is vital for self-examination and early onset prognosis. The education of its health ambassadors and other people in the neighborhood can play a significant role in this regard. This study aimed to compare education by face-to-face education and education at health ambassadors.

**Material&Method:** In this semi-experimental study, 30 Health Ambassadors were randomly selected and divided into two groups. First, two groups were pre-test, then they were given a self-test on a breast-fed self-examination to a group in person and to another group by pamphlet. After completing two post-tests one after the end of the session and two weeks later, their learning rate was analyzed. Results were analyzed by paired and independent t-test.

**RESULTS:** The results of the study showed that there was no significant difference between the level of information of the subjects before the intervention (pre-test results), but this difference was significantly different between the two groups after intervention and post-test (ie, post-test). That means that the level of learning in Face-to-face teaching method had higher scores than the method of using learning curriculum.

**Conclusion:** Effectiveness of face training is more and more effective than education. Therefore, in order to ensure the health of the community, in addition to providing educational leaflets, health centers are recommended to hold practical training sessions in various fields of health, especially breast self-examination.

**Keybords:** Breast Self Examination - Women - Health Ambassadors – Education

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**The Effect of PRP on Clinical Pregnancy Outcome of Repeated Implantation Failure Patients Referred to Mother Infertility Clinic of Sari City**

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**Background:** Platelet rich plasma (PRP) as an outpatient procedure and due to its possible effect in improving homeostasis is becoming to be a popular method in different medical interventions as well as infertility treatment especially repeated implantation failures (RIF). However, its definitive effect on clinical pregnancy outcome is yet to be defined. The aim of this study was to assess the PRP effect on clinical pregnancy outcome in repeated implantation failure patients referred to Mother infertility clinic of Sari city.
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**Method:** In this clinical trial research, 42 RIF patients were recruited based on following inclusion criteria: age, cause of infertility, endometrium thickness, number of days that patients were treated with progesterone, number of transferred embryos, embryos quality and embryo transfer quality. The women divided in two groups: PRP treated (n=22) and non PRP treated (n=20). In PRP treated group, platelet number was measured before and after process where it was promoted at least 4 times after process then injected into uterine cavity 48 hours before embryo transfer. Clinical pregnancy was recorded as result. Data normality was assessed in SPSS software version 25 using Kolmogorov smirnov test and Mann whitney test was used to assess significant difference in p<0.5.

**Result and Conclusion:** No significant difference was observed between two groups in this study. Although there are some evidence in which the positive effect of PRP on clinical pregnancy outcome has been shown in RIF patients, however, no significant effect was observed for PRP effect in this study. Furthermore, the same experiment with a larger sample size is suggested.

**Keywords:** Infertility, Pregnancy, RIF, PRP.

* * *

**Management of High Risk Pregnancy**

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**Backgrounds:** Pregnancies with a greater chance of complications are called “high-risk.”

**Objective:** Searching Management of high risk pregnancy.

**Material and Method:** In this literature review study by using the key words high risk pregnancy and Management of midwifery searched in Google Scholar, SID, WHO, Pub Med (Mesh), Finally found more than 30 articles about Management of high risk pregnancy.

**Results:** Most risks are related to preexisting conditions or complications of pregnancy by organic, biological, chemical, and occupational causes, but also to unfavorable social and demographic conditions. Thus the primary prevention and management of high risk pregnancy include: Schedule a preconception appointment, seek regular prenatal care, eat a healthy diet, gain weight wisely, avoid risky substances, in this connection midwives have a special responsibility to balance the natural and medical perspectives in the care of childbearing women at high risk, especially by promoting the woman’s inborn capacity to be a mother and to give birth in a natural manner. Thus a dignity-protective action takes place in a midwife’s caring relationship with a childbearing woman at high risk and includes mutuality, trust, ongoing dialogue, enduring presence, and shared responsibility and Secondly, the midwife’s embodied knowledge is based on genuineness to oneself and consists of theoretical, practical, intuitive, and reflective.
**Conclusion:** Discussion: Having one high-risk pregnancy does not mean that all future pregnancies will be deemed high risk as well. Ultimately, the most important thing to remember about having a high-risk pregnancy is that your maternal-fetal medicine specialist and Ob/Gyn have the knowledge and experience required to keep a pregnant woman and her baby as healthy as possible and also early and regular prenatal care helps many women have healthy pregnancies and deliveries without complications.

**Keywords:** pregnancy, high risk, factors, management.

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**Evaluation of the Effect of Hyper-Osmolar Magnesium Sulfate Solution on Labor Processes**

_Arezoo Heydari MSc, Nourossadat Kariman, Zahra Naeeji, Farzaneh Ahmadi_

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**Backgrounds:** Magnesium sulfate is an anti-seizure medication that has many other uses in the midwifery, including the manufacture of osmotic dilators that are used to cervical ripening. Its main mechanism of action is to reduce the amount of intracellular calcium through its magnesium component. Also, due to hyper-osmolarity, this solution can also be effective in absorbing intercostal water and reducing edema. With these two mechanisms mentioned, it can be effective in improving effacement and dilatation of the cervix (10-15% of the cervix contain from smooth muscle). The present study was conducted to determine the effect of hyper-osmolar magnesium sulfate solution on labor processes.

**Material and Method:** 64 nulliparous women with term pregnancy were examined in this clinical trial. Participants were evaluated in two groups of 32. In the intervention group, at the beginning of the active phase, 10 cc magnesium sulfate 50% and in the control group 10 cc distilled water was poured on the cervix and then the labor process was examined in two groups. Data were analyzed using SPSS software.

**Result:** In the intervention group, the mean active phase duration was 1.13 ± 1.75 hours and in the control group was 1.87 ± 3.85, which was 2.10 hours longer than the magnesium sulfate group (p = 0.001). There were no significant differences between the two groups in terms of the mean score of Apgar, delivery channel lacerations and other complications. The number of natural births was higher in the magnesium sulfate group, but this difference was not significant.

**Conclusion:** The results of the study showed that the use of topical magnesium sulfate in the active phase improves effacement and dilatation and shortens duration of labor. Due to the limited studies in this field, further studies are recommended.
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Investigation Effect of Softening and Improvement Cervical Effacement and Dilatation on Pain Relief

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**Backgrounds:** Childbirth is a painful process. One of the mechanisms of this pain is cervical elongation, followed by compression of nerve ganglion. It is possible that with cervical softness, the pain and discomfort caused by its stretching will be reduced. Magnesium sulfate is a medicine that is used empirically in some hospitals in the country to improve the effacement and dilatation of the cervix. The aim of this study was to evaluate the effect of softening and improvement of cervical effacement and dilatation after local administration of magnesium sulfate on the severity of labor pain.

**Material and Method:** 70 primiparous women with term pregnancy were studied in this study. The participants were divided in 2 group of 35 people. In the magnesium sulfate group, when cervical dilation was 3-4 cm, 5 g of magnesium sulfate (50%) was and in the placebo group distilled water was poured on the cervix, then labor processes was examined in two groups. Before the intervention, two hours later, pain intensity was measured using visual analog scale (VAS). Data were analyzed using SPSS software.

**Result:** After two hours of intervention, effacement and dilatation in magnesium sulfate group was higher ($P = 0.001$). After two hours in the control group, 0/71 increased in the mean of pain severity, which was significant ($P = 0.04$), whereas in the magnesium sulfate group, the pain severity did not change significantly.

**Conclusion:** It may be possible to reduce the severity of the pain caused by the stretch of the cervix by improving the effacement, dilatation and softening of the cervix during the labor process, but this effect does not seem so important that it can be used as a method solely to reduce labor pain.

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Simultaneous Psychiatric Disorders and Related Psychological Factors to Endometriosis a Review Study

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**Backgrounds:** Endometriosis is one of the most common diseases among women influencing almost 10% of women at the age of fertility. This disease does not only
influence biological aspects of patient, but it also impacts on her mental health. The purpose of this study is to review the simultaneous psychiatric disorders and associated psychological factors to endometriosis.

**Material and Method:** This study was conducted with steps consisting of search, which was carried out in the databases such as SID, PubMed, Science Direct, Scopus, Psych Info, and Google scholar search engine with the keywords like 'psychiatric disorders', 'endometriosis', 'mental health', 'sexual dysfunction', 'psychological factors', 'depression', 'anxiety', 'psychosis', 'obsessive compulsive disorder', and their English equivalent words. Afterwards, identifying related studies from the period of 2005 to 2019, and selection of studies organized, which were after the screening of title, abstract, and full text of 76 studies, 30 studies singled out for results declaration, and then these 30 studies were classified.

**Result:** By investigating the studies, the results were classified into two categories of psychiatric disorders and psychological factors. Psychological factors consist of anxiety, Alexitimia, Physicalization, psychosis, neuroticism, decreased emotional function, inappropriate physical image, infertility issues, isolationism and interruptions in interactions and psychiatric disorders comprises depression disorders, depression during the pregnancy and depression at parturition time, premenstrual syndrome, anxiety disorders, body dysmorphic disorders, sexual dysfunction caused by pain. In this regard, Depression is the most common disorder, and simultaneous anxiety is the most prevalent psychological factors. In addition, it can be said that pain is the most important element in the psychological factors, and psychological factors are significant part of causing psychological disorders that all aforementioned items will have negative effects on the quality of patient’s life.

**Conclusion:** Regarding to the survey, it can be declared that endometriosis is a physical disease; however, whether the possibility of occurrence or presence of psychological symptoms is also a mental illness. Hence, it can be said that, regarding to the psychiatric disorders, this illness needs mental cares in addition to the biological treatment in order to get better results.

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**Vitamin D Deficiency and Pregnancy: A Cross Sectional Study in Pregnant Women Referring to Health Centers in Amol**

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**Introduction:** Vitamin D deficiency in pregnancy period is common in so many parts of the world. The recent studies had shown the connection between this shortage and some sort of diseases in mother and fetus, so our purpose in this review is focused on determination of vitamin D abundance in first three month of pregnancy and finding
the connection between abundance of vitamin D and some Demographic and midwifery factors in pregnant women who referred to health centers of Amol city in 2018-2019.

**Method:** This study was done on 122 pregnant women under 14 week of gestation that referred to 3 different health centers in Amol city. Demographic and midwifery information and level of vitamin 25 hydroxy vitamin D3 in samples been gathered and recorded. Level of vitamin 25 hydroxy vitamin D3 less than 20 ng / 1 Dl considered as deficiency of vitamin D , data were analyzed using descriptive and inferential statistics and significance level was considered less than 0.05.

**Result:** The average age of mothers was 27.55 ± 6.31 years and half of mothers were college graduated, 85 percent of them were housekeepers and 66 percent of them were experiencing their first pregnancy. Results shown that in this 122 women, 64 person (52.22%) had vitamin D deficiency. also logistic regression test showed vitamin D deficiency in young mothers with age of less than 20 years and in primiparas is doubled more than mothers with ages more than 20 and multiparas but no significant was found between mother's graduation or their jobs and vitamin D deficiency.

**Discussion and Conclusion:** Abundance of vitamin D deficiency are high in pregnant women specially in pmriparas and women younger than 20 years old. According to the connection between this deficiency and its Complications in mother and fetus and its preventability, screening the level of vitamin D in all pregnant women before or in the beginning of pregnancy is recommended.

**Keywords:** Pregnant women, vitamin D deficiency, level of vitamin 25 hydroxy vitamin D3, Screening vitamin D

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**The Study of Theory of Planned Behavior on the Physical Activity of Women in the Age of Fertility in Isfahan**

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**Introduction:** The decrease in the mobility and physical activity of today's lifestyle has had adverse effects and has been associated with the risk of many chronic diseases. The sedentary life, especially among women of childbearing age, who is exposed to various physiological and physical changes, is of particular importance.

**Materials and Methods:** This descriptive-correlational study was performed on 224 women referred to Isfahan Health Centers during the years 2017 and 2018. The data collection tool was a questionnaire consisting of demographic information section, constructs of theory of planned behavior including attitude, behavioral intention, abstract norms and perceived behavior control. The content and face validity of the Health Belief Questionnaire was confirmed by experts and its reliability was confirmed by internal consistency and test-retest.
Results: The mean age of the samples was 38.96 ± 5.84 years. There was a significant positive correlation between behavioral intention and attitude constructs, abstract norms and perceived behavioral control (p < 0.05). In other words, people with higher behavioral intentions have a higher score on attitudes, abstract norms, and perceived behavioral control. Also, regression analysis showed that among the variables studied, attitude and abstract norms were capable of explaining behavioral intention of the studied samples and the effect of perceived behavioral control was not independent of other constructs.

Conclusion: The results showed that there was a correlation between attitude, abstract norms and perceived behavioral control with behavioral intention, but attitude and abstract norms had the most effect on behavioral intention. Therefore, it is necessary to develop appropriate training programs based on the theory of planned behavior with emphasis on the structures that have the greatest impact on the behavioral intention of women of reproductive age.

Keywords: Theory of Planned Behavior, Physical Activity, Women, Reproductive Ages

The Effect of Family-Based Self-Care Program on Adherence to Diet and Diet in Pregnant Women with High Blood Pressure

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Introduction: Hypertension is one of the most important health problems in the world but it is largely controlled by self-care behaviors. This study aimed to determine the effect of family-centered self-care program on adherence to medication and diet in pregnant women. He was discharged from hospital with hypertension.

Materials and Methods: This quasi-experimental study was performed on two groups of 30 people (discharged from selected hospitals of Isfahan University of Medical Sciences). The self-care program for adherence to the diet and medication was performed by the family in five sessions in the intervention group. The evaluation was performed using the Morisky questionnaire and the standard three-day food registration questionnaire in both groups before, immediately after and two months later. The scores were analyzed by SPSS software.

Results: According to the findings of the study, there was no significant difference in demographic characteristics between the experimental and control groups before intervention, but there was a significant difference between the experimental and control groups (p = 0.001). There was also a significant difference in dietary compliance scores immediately after and two months after the program (p < 0.05).

Conclusion: Despite family involvement in identifying care needs and collaborating with patients, advancing therapeutic goals can be achieved. Therefore, a family-centered self-care program promotes adherence to medication and nutrition in patients, especially pregnant women with hypertension.

Keywords: Self-care, Family-centered, Pharmacological diet, Pregnant women, Hypertension
The Effect of Multimedia Education on Uncertainty in the Disease of Women with Breast Cancer

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Objective: Breast cancer sufferers experience a high level of mental stress, including uncertainty about the disease, from the time of diagnosis and initiation of treatment, which requires effective training to manage it. Teaching patients in multimedia is one of the most useful and flexible educational strategies.

Materials and Methods: This randomized controlled trial study was performed on 60 breast cancer patients referred to Mashhad and Neyshabur cancer clinics and clinics. The intervention group was provided with a compact educational tablet produced by the researcher and no intervention in the control group. Questionnaire of uncertainty in Persian version of Michel’s disease was completed by both groups before and 1 and 2 months after the intervention. The data were analyzed by SPSS software at the significant level of less than 5%.

Results: There was no significant difference between the two groups in the pre-intervention phase (p = 0.42), but in one month after the intervention (p <0.001) and two months after the intervention (p <0.001). There was a statistically significant difference between the two groups.

Conclusion: Multimedia education can be effective in reducing uncertainty in women with breast cancer and it is suggested that nurses and health care providers use this method to facilitate the process of patient education to reduce uncertainty.

Keywords: uncertainty in disease, breast cancer, multimedia education

Effectiveness of Hydrotherapy on Improvement of Women with Breast Cancer

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Backgrounds: Cancer is a leading cause of death and disability around the world. Of all cancers, breast cancer commonly ranks amongst the top three. Hydrotherapy is therapeutic modality which may be utilized as an adjunct to self-management strategies after the intensive phase of lymphoedema management. Purpose of this study is to determine the effectiveness of hydrotherapy as an adjunct treatment for women with breast cancer.
Material and Method: A comprehensive search of three electronic databases, including Medline, Scopus and Web of Science was completed. Studies of adult women with secondary upper limb lymphoedema following breast cancer surgery, which measured lymphoedema volume, pain, upper limb and QOL outcomes were included.15 articles found and 10 articles selected based on compliance with the key words and availability of the full text.

Result: There is mixed evidence to support the positive impact of hydrotherapy as an adjunct treatment on reducing lymphoedema volume in the short-term and emerging evidence for upper limb function, pain and QOL. Hydrotherapy had a positive, clinically and statically significant immediate effect on limb volume but no long-term effect was noted. Some studies show that the adherence rate to hydrotherapy is significantly higher than the adherence to self-management therapy.

Conclusion: Hydrotherapy could be used as an adjunct treatment for women with breast cancer related lymphoedema. It seems that hydrotherapy is a safe method, with high adherence, in treating women who suffer from mild to moderate lymphedema. A significant immediate and insignificant long-term effect on limb volume was note.

Health Care of Pregnant Mothers and Health System Reforms in Iran

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Introduction: Improvement of mothers' health and providing services to them has been very important in all Iranian health system reforms (IHSR). The aim of this study was to compare the trend of maternal health indicators in the light of the triple IHSRs.

Methods: Components of the care of 4730 mothers include the month of onset and frequency of visit, total weight gain, maternal hemoglobin, ultrasound number and type of delivery during three periods of reforms (expansion of health networks, establishing family physician and health transformation plan) were gathered from family health files. They were selected by multi-stage random sampling and analyzed time trend method.

Result and Discussion: Starting first and number of care decreased from an average of 3.57 months to 2.56, 9 times to 6.14. Maternal weight gain increased from 7847.16 g to 10424.45, The anemia index also decreased from 13 to 12.86 and the number of ultrasound care increase from .3 to 2.81. And most importantly, the rate of cesarean section increased from 19.8% to 55.4%. We have seen a steady increase in weight gain, ultrasound and cesarean section this is consistent with several other studies in the country.
Conclusion: Our finding in the last three decades have not been in line with the triple reforms so other important factors appear to have been involved in these changes which have remained ignorant of reforms.

Education and Counseling and Their Roles in Adolescent Reproductive and Sexual Health

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Backgrounds: Adolescents (aged 11 to 19) account for 18% of the world's total population, 88% of whom live in developing countries. Every year, 7.3 million girls are under 18 years of age give birth and in total, 95% of all births of adolescent mothers occur in developing countries. Currently, one in nine girls in developing countries is under pressure to marry under the age of 15. Annually, 3.2 million adolescents die from unsafe abortions and 70,000 adolescents die due to complications of pregnancy and childbirth.

Material and Method: This study was a kind of meta-analysis, through the search of authoritative websites and the review of a large number of articles and authoritative foreign and domestic sources, as well as studies on the state of reproductive health of adolescents, the most important challenges ahead and the role of education and counseling. In control of these challenges.

Result: According to the latest WHO data, many causes threaten sexual and reproductive health adolescents. In many societies, girls are under pressure for early marriage and childbirth (In countries with lower income levels more than 30% of girls before the age of 18 and about 14% marry before age 15). Education and counseling are also a major contributor to these problems, while the overall coverage of education and counseling in developing countries is very low and most countries do not have this adolescent services. Another major challenge for adolescent reproductive and sexual health is sexual violence or forced sex (10% of girls under the age of 15 were forced into their first sexual encounters). Also, pregnancy in this group, which is often unwanted and early, can provide grounds for unprotected abortions or serious consequences of pregnancy and childbirth for the mother and the baby.

Conclusion: The most important thing that needs to be done to improve adolescent fertility and sexual health is preventing unplanned pregnancies and other dangers from reproductive and sexual health. Here are the suggestions below:
1. Efforts to improve the knowledge and skills of health care providers in the field of counseling and education related to reproductive and sexual health of adolescents.
2. Eliminating legal and cultural barriers to accessing information, counseling and reproductive health services, especially in schools.
3. Full access to all reproductive and sexual health services including condoms, other appropriate contraceptives and interventions to prevent, treat and care for sexually transmitted infections, including HIV.
The consequences of FGM

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Backgrounds: The term "female genital mutilation" refers to all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. Between 130 and 140 million girls and women in the world are estimated to have undergone such procedures, and 3 million girls are estimated to be at risk of undergoing the procedures every year.

Material and Method: It is kind of review study. Present conditions of FGM in the world studied.

Result: FGM has no health benefits, and it harms girls and women in many ways. It can include severe pain, shock, hemorrhage, tetanus or sepsis, urine retention, open sores in the genital region and injury to nearby genital tissue. Long-term consequences include: recurrent bladder and urinary tract infections; cysts; infertility; an increased risk of childbirth complications and newborn deaths; the need for later surgeries and soon.

Conclusion: Female genital mutilation of any type has been recognized as a harmful practice and a violation of the human rights of girls and women. The causes of female genital mutilation include a mix of cultural, religious and social factors within families and communities. According to which said, key strategies are offered:

1. Building evidence: generating knowledge about the causes and consequences of the practice, how to eliminate it, and how to care for those who have experienced FGM.
2. Increasing advocacy: developing publications and advocacy tools for international, regional and local efforts to end FGM within a generation.

Body Mass Index Sexual Function and Quality of Life in Women of Reproductive Age

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Backgrounds: Quality of life and sexual function are important variables in the general health of women of reproductive age. On the other hand, study reports that people with high body mass index (BMI) complain of low sexual function and lower quality of life. So the purpose of this study was to determine the relationship between BMI and sexual function and quality of life.

Material and Method: This cross-sectional study was conducted on 482 women of reproductive age referring to Jahrom women health centers in 2017. The WHO QOL questionnaire and the female sexual function index (FSFI) used as tools. The data were analyzed using ANOVA and Pearson correlation coefficient and P ≤0.05 was considered significant.
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Result: The mean age of the samples was 31.8 ± 7.64. The results showed that 162 (33.6%) of women had normal BMI and 200 (41.5%) of them were overweight and 120 (24.9%) were obese. Sexual desire (p <0.001), Sexual stimulation (p = 0.001), lubrication (p = 0.001), orgasm (p <0.001) and satisfaction (p = 0.008) decreased with increasing BMI and this reduction was statistically significant. On the other hand, there was a significant negative relationship between all aspects of quality of life with BMI (p <0.001).

Conclusion: The present study showed that obesity and weight gain are negative factors for sexual function and women's quality of life, as well as sexual desire, orgasm and marital satisfaction decrease with increasing BMI.

Association Between Infertility Factors and Non-Physical Partner Abuse in Infertile Couples

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Backgrounds: Infertility predisposes the couples to mental and psychological problems such as anxiety, depression, anger, and partner abuse. This study aimed to investigate the association between infertility factors and the non-physical abuse between infertile spouses.

Material and Method: This is a descriptive cross-sectional study conducted on 262 infertile couples (131 female and 131 male), selected through convenient sampling, who referred to infertility centers in Isfahan. Data were collected by “Partner Abuse Scale: Non-physical” (PASNP), designed to measure the non-physical abuse experienced in relationship with partner and “Non-physical Abuse of Partner Scale” (NPAPS), designed to measure the non-physical abuse delivered upon the partner. All data were analyzed through SPSS version 16.

Result: Mean scores of NPAPS were 23.1% and 21.3% in men and women, respectively. Mean scores of PASNP were 13.8% and 20.3% among men and women, respectively. There was a significant difference in the mean scores of perceived non-physical partner abuse between men and women (P <0.001). There was also a significant difference in the mean scores of perceived non-physical partner abuse and factor of infertility (P <0.01).

Conclusion: Perceived non-physical abuse and delivered non-physical abuse upon the partner were low among infertile couples. Women had a higher perception of abuse when the cause of infertility was female factor, compared to men. However, special attention should be paid to infertile couples. Marital counseling, besides infertility counseling, should be conducted for these couples.
The Effects of Masturbation on Female Health

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**Backgrounds:** The clitoris is the source of a woman’s deepest sexual pleasure that has approximately 8,000 nerve endings. That is more than any other area of the female body and accounts for the sensations felt during intercourse and sexual activity. According to statistics, masturbation is very common among women. In this article get to know a few curious facts about masturbation and its effects on female health.

**Material and Method:** This study was conducted by library source and paper indexed in medline about masturbation and its effects on female health. Result: Stimulating own erogenous zones is a quite common phenomenon. However, many women are tormented by doubts about whether female masturbation really is harmless to their health and whether it affects menstrual cycle regularity. Fears regarding female masturbation are groundless. Conversely, experts emphasize its positive aspects, for example, the chance to: *get to know your own body better; *Improve sex life, as masturbation makes more confident and aware of sexual responses; *Relieve stress; *Boost mood due to the release of endorphins. In most cases, masturbation is safe and even good. It can help to explore body and relieve both sexual and emotional tension. If masturbation doesn't cause discomfort or interfere with daily life, it is absolutely harmless.

**Conclusion:** Indeed, the clitoris was created for pleasure, but since it is an incredibly sensitive organ which has a huge number of nerve endings, its prolonged direct stimulation at the same rate and in the same way can result in a temporary desensitization. However, despite all the advantages of female masturbation, there are still issues to think about. Too much masturbation can make it hard to reach orgasm during sex because the body gets used to the stimulation of specific places that may be neglected during sexual intercourse.

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The Effect of Group Counseling on Depression of Premenstrual Syndrome

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**Background:** The most important indication of the women’s reproductive performance is the menstrual cycle. This process, sometimes accompanied by
annoying symptoms and signs. Premenstrual syndrome (PMS) is a series of physical, spiritual and emotional symptoms, which periodically occurs before menstruation. Therefore, the present study is designed with the aim of using non-pharmacological methods to reduce the complications of this syndrome, especially in the mental and psychological field. The main goal of this study is to The effect of group counseling on depression of premenstrual syndrome on Iranian women.

**Material and Method:** This study is a randomized clinical control trial on 112 married women with premenstrual syndrome referring to health centers in Qazvin city. The samples were randomly divided into two groups of 55 in the control and 57 in the trial group. The trial group was given three sessions of group counseling for 45 minutes. Information was collected by demographic information questionnaire, premenstrual syndrome scale, and DASS-21 questionnaire. Data were analyzed by SPSS-24 software and descriptive and inferential statistical methods.

**Results:** At the beginning, the results of the studied variables were homogeneous in both groups. Furthermore, there was no significant difference in severity of premenstrual syndrome (P-value <0.1) and depression score (p-value = 0.6) before intervention in both groups. However, at the end of the study, the average severity of premenstrual syndrome and depression in the intervention group significantly decreased (P value <0.05).

**Conclusion:** results showed, following the group counseling the severity of premenstrual syndrome symptoms and depression was reduced significantly.

**Keywords:** Premenstrual syndrome, PMS, Depression, Group counseling.

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**Effects of Bensons Relaxation Technique on Occupational Stress in Midwives: A Quasi-Experimental Study**

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**Background:** Occupational stress is one of the most common problems and serious threat to health of workforce in the world. Midwives working in the delivery ward experience a high level of stress in their occupational life, which necessitates using preventive and effective measures. This study aimed to examine the effect of Benson’s relaxation on occupational stress among midwives working in the delivery ward.

**Material and Methods:** This pre and post quasi-experimental study was conducted on midwives working at hospitals in Qazvin in 2018. Sixty-three midwives working in the delivery ward with a minimum one year of working experience in rotating shifts.
were included in the study. The subjects were selected through accessible sampling. After the training, the subjects performed Benson's relaxation technique twice a day for 4 weeks. Occupational stress was measured before and after the intervention using the standard questionnaires of occupational stress (HSE). Data were analyzed using the SPSS24. Statistical analysis was performed using Kolmogorov-Smirnov test, t-test and Wilcoxon.

**Result:** The mean age of the participants was 34.92 ± 7.34 years. The mean of occupational stress in midwives before and after the intervention was 120 ± 14.5 and 124 ± 14.7 respectively. This difference was statistically significant (P-value < 0.05).

**Conclusion:** This study revealed that Benson relaxation technique could be effective in reducing occupational stress in midwives working in the delivery ward.

**Keywords:** Benson relaxation, occupational stress, midwife, delivery ward.

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**Development and Psychometric Evaluation of the Menopausal Self-Care Questionnaire in a Sample of Iranian Postmenopausal Women**

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**Backgrounds:** Self-care assessment is a prerequisite to self-care promotion interventions. However, there is no specific measurement instrument for self-care assessment among postmenopausal women. The aim of this study was to develop the Menopausal Self-Care Questionnaire and evaluate its psychometric properties in a sample of Iranian postmenopausal women.

**Material and Method:** This methodological study was conducted in 2017 based on Waltz's method for instrument development. Questionnaire items were generated based on a literature review and then, face, content, and construct validity of the questionnaire were assessed. For construct validity assessment, a sample of 357 women aged 45–60 years was selected through cluster and stratified sampling from healthcare centers in Kashan, Iran. Then, exploratory factor analysis was conducted to determine the factor structure of the questionnaire. Moreover, reliability was assessed through calculating Cronbach's alpha and test-retest intraclass correlation coefficient.

**Result:** The primary version of the questionnaire contained 36 items. Two items were deleted due to their limited content validity. The impact scores, content validity ratios, and content validity indices of the remaining 34 items were at least 2.84, 0.70, and 0.70, respectively. During factor analysis for construct validity assessment, one item was deleted and the questionnaire was found to have a seven-factor structure,
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accounting for 54.87% of the total variance. The factors were public health care, screening, nutrition, memory, hot flashes and night sweats, sexuality, and social communication. The intraclass correlation coefficient and Cronbach’s alpha value for the questionnaire were 0.76 (P < 0.001) and 0.88, respectively.

**Conclusion:** The Menopausal Self-Care Questionnaire is a valid and reliable instrument for self-care assessment among postmenopausal women. It can be used in health monitoring programs for middle-aged and elderly women.

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**Treatment of Polycystic Ovary Syndrome with Genetic Methods**

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**Background and Aim:** Polycystic disease is a common disease in women and is the most common cause of infertility due to ovulation failure. The primary goal of the treatment is to return the ovulation. Today's studies are based on finding a genetic test that consists of several genetic differences in the determination of drug dosages for patients. The purpose of this study was to investigate the treatment of polycystic ovary syndrome with genetic methods.

**Methodology:** The study was conducted as a review of several articles between 2010 and 2019. The review was conducted in the journal and databases pubmed, scincedirect, elsiver, proqust, willy, spinger, google scular with key words such as treatment, polycystic ovary syndrome with genetic methods. The results were analyzed and graded as a schematic.

**Results:** The findings indicate that genetic changes in the gene of the vitamin D receptor can be important in the progression of the disease. Many studies have been conducted to investigate the association of taqI polymorphism in the vitamin D receptor gene in polycystic ovary syndrome. But there is still no definitive association between the Tt, Tt, TT genotypes with FSH, testosterone and progesterone, and research is still ongoing. Therefore, there is still no link between taqI polymorphism and polycystic ovary syndrome.

**Conclusion:** There are many new therapies on polycystic ovary syndrome. With the development of genetic therapy, great changes can be made in improving the health of patients.

**Key words:** Treatment, Polycystic Ovary Syndrome, Genetic Methods
Lifestyle Study in Patients with Polycystic Ovary Syndrome

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Polycystic ovary syndrome is a common disease with unknown cause in women of reproductive age. This disease is one of the most common neuroendocrine-metabolic disorders in the age of the present. Recent studies have contributed to the important role of quality of life and lifestyle in these women. The purpose of this study was to evaluate the lifestyle in patients with polycystic ovary syndrome.

Methodology: The study was conducted as a review of several articles between 2010 and 2019. Reviews in the journal and pubmed, scinecdirect, elsiever, proqust, willy, spinger, google scular databases with key words like the patient, polycystic ovary syndrome, lifestyle. The results were analyzed and graded as a schematic.

Results: The results of the studies indicate that overweight and obesity are higher in patients than normal people. Also, patients with irregular menstrual cycles, hirsutism, sleep problems and sleep disorder, late sleep, skin problems such as hair loss, baldness and skin acne. All of these complications are higher in women than in healthy people. Also, the use of healthy foods and exercise and exercise in patients is significantly lower than healthy subjects. Therefore, the lifestyle of patients is disturbed due to the complications of the disease.

Conclusion: Since the lifestyle of patients with polycystic ovary syndrome is disrupted, it can have bad physical and psychological effects on patients’ lives, and this should be considered in health planning.

Plasma Adiponectin in Polycystic Ovary Syndrome Is Connected with Recurrent Miscarriage and Obesity

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Background: Polycystic ovary syndrome (PCOS) is a current endocrine disease that is connected with recurrent miscarriage (RM). many studies that have surveyed the outbreak of PCOS in RM. PCOS seems to be nearly linked to obesity. Several studies have recommended that, in women with PCOS, a surged body mass index (BMI) is connected with a hazard of RM. The mechanism of miscarriage in PCOS is that, a surged in blood flow insistence in the uterine arteries and a decrease in endometrial vessels have been discovered in young non-pregnant women with PCOS that could disable implantation and placentation. Changes in placentation could appear owing to low-grade chronic inflammation, which could trigger abnormal immune adjustment in implantation. Furthermore, adipose tissue contribution to obesity. Adipokine might
play a critical role in embryo implantation. Adiponectin is the most plentiful plasma adipokine. Diseases connected with atypical adiponectin levels are PCOS, obesity, all of which are connected with fertility. Obesity is connected with decreased plasma adiponectin levels in PCOS that surged hazard of miscarriage.

**Method:** This is a brief review of recent literature on the status research networks such as Google Scholar, PubMed to identify plasma adiponectin in PCOS and connection between RM and obesity.

**Result:** Thus, in women with PCOS, increases obesity and decreased adiponectin level that is connected with a hazard of RM.

**Conclusion:** Studies have shown that abundant factors lead to obesity and RM associated with PCOS such as reduced plasma adiponectin level. These data recommend that adiponectin is necessary for normal fertility. Finally, women with RM, obesity and PCOS also encounter infertility and, in such a condition drug's treatment such as metformin, recombinant adiponectin therapy and surgery bariatric is helpful.

**Keywords:** Polycystic ovary syndrome, Obesity, adiponectin, recurrent miscarriage

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**Prevalence of Contraceptive Methods Among Selected Stricts of Tehran Critical Role Economic Factors on Selection of Method**

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**Backgrounds:** Family planning has critical role in improvement of various aspects of community health. In this regard, choosing the right contraceptive method can dramatically decrease prenatal mortality and morbidities. Owing to the limited and incomplete previously performed studies, the present work was conducted to determine the frequency of contraception methods and most important factors in selection of them among women of Tehran province.

**Material and Method:** A questionnaire including 24 questions was filled for 395 women (18-40 years old) referred to multiple private clinics in three selected strict of Tehran. Questions were designed in order to address the type of contraception method besides multiple social, economic and cultural factors which may affect the selection and demographic characteristics of enrolled samples.

**Result:** The frequency of the type of contraceptive methods was significantly different among women in different age categories (p-value=0.01). Overall rate of using contraceptive methods was 75.2% while remaining of the participants believed in no need for contraception. The most prevalent contraceptive methods were traditional methods (55.9%), modern methods (29.1%), combination of methods (8.1%) and surgery methods (6.8%), respectively. Status of housing was the only factor among economic issues which was meaningfully associated with the selection of the method.
**Conclusion:** High prevalence of natural contraceptive methods even among highly educated women is relying on the demand for more education regarding the selection of best methods based on the background information, obstetrics history, age and economic status of women. This is the first comprehensive study on the frequency and the factors involved in choosing contraceptive methods in Tehran which its results can be implicated in further health programs to improve family planning.

Design and Validation of a Sexual Health Literacy Questionnaire in Iranian Women

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**Introduction:** Sexual health literacy means the knowledge, belief, attitude, motivation and skill of individuals to access, understand, evaluate and use sexual health information to make decisions about sexual health care, health promotion, communication, and wellbeing. Despite designing multiple tools and scales for measuring health literacy in Iran has not yet been designed to measure sexual health literacy in Iranian women. Therefore, this study aimed to design and psychometric evaluation of sexual health literacy tools in Iranian women.

**Methods:** This study consisted of two parts: qualitative and quantitative. In the first stage, based on the data obtained from a qualitative study with 36 women between 18 and 65 years of age and extensive literature review the Initial items were designed. First, the qualitative and quantitative content validity (content validity index and content validity ratio) of the questionnaire was evaluated by experts and the necessary corrections were made. The face validity of the primary instrument was assessed by interviewing women. Reliability (internal consistency and instrument stability) and tool construct validity were also assessed.

**Results:** In exploratory factor analysis, 40 items were loaded into 6 factors that showed 64.8% of the observed changes. Cronbach’s alpha coefficient was acceptable for each factor. Re-test of the questionnaire with two weeks interval confirmed the stability of the questionnaire. The final questionnaire was approved by 37 items in 7 domains including access, reading, comprehension, evaluation, use, communication and empowerment as a valid and reliable tool for measuring women’s sexual health literacy.

**Conclusion:** Based on the results of confirmatory factor analysis, the designed tool for women’s sexual health literacy has appropriate internal consistency and construct validity, so this scale is capable of measuring health literacy in Iranian women.

**Keywords:** Health Literacy, Questionnaire, Psychometric, Sexual Health
Barriers to sexual and Reproductive Health Education for Iranian Men

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Background: Considering the obvious reasons for necessity of Men’s sexual and reproductive health education

Objective: The present qualitative study aims to identify and contextualization of the barriers to Sexual and Reproductive Health Education to Men in Iran.

Material and Method: This qualitative research was conducted using content analysis approach. Data was collected through in-depth interviews. 34 participant were interviewed via purposeful sampling considering maximal variation from two cities of Tehran and Mashhad, Iran. The data were analyzed by MAXqda software and based on the qualitative content analysis method.

Result: Through data analysis, individual barriers due to Low perceived threat and Unwillingness to learn, socio-cultural barriers, that were influenced by socio-cultural taboos and Family’s lack of knowledge and malperformance and structural barriers due to Policy making barriers, Executive barriers and Health system deficiency barriers were achieved as the main themes. The main barriers were a lack of guideline, lack of appropriate place for the provision of education, a woman educator, being busy with work, and lack of sexual issues education to adolescents in schools, which resulted in many challenges in policy-making realm, program designing and implementation and also sexual education in the families.

Conclusion: Sexual and reproductive health education programs for men demand contribution, support and interactive cooperation from policy-makers, authorities, clergymen, schools, family and media. The policies of the government and society with regard to sexual health education should be based on comprehensive and responsible implementation of such programs. This issue has turned into a challenging issue and is faced with many barriers.

Keywords: Sex Education, Sexual Health, Reproductive Health, Men, Qualitative Research
The Comparative Study Umbilical Cord Blood Gases and Perinatal Outcome in Newborns with or without Nuchal Cord in Alzahra Hospital, 2018

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Background: Entanglement of the umbilical cord around fetal neck is one of the causes of birth asphyxia. Umbilical cord blood gases can largely show embryonic metabolic status and asphyxia at birth. Studies report inconsistent results of the umbilical cord entanglement. Therefore, the present study we aimed to evaluate and compare the perinatal outcome and umbilical cord blood gases in two groups of neonates with and without nuchal cord in mothers referring to the delivery department of Alzahra Hospital in Rasht in 2018.

Methods: This cohort study was performed on 168 pregnant women with term pregnancy referred to Alzahra hospital in Rasht in 2018. Two groups )with and without nuchal cord(,were compared in terms of maternal demographic characteristics, umbilical cord blood gases (PH, Po2, PCO2, HCO3 and Base excess), duration of active phase of labor until delivery, type of delivery, fetal weight and sex, the number of entanglement of the umbilical nuchal cord, the first and fifth minute APGAR, meconium excretion and NICU requirements. SPSS software (V:21) were used. Chi-square and Fisher exact test were used to compare the qualitative and quantitative data between the two groups, and T-test was used for quantitative variables with normal distribution. Mann Whitney test was used for non-normal distribution. were used. p<0.05 was taken as the significant level.

Results: In this study, 84 pregnant women in each group with and without nuchal cord were examined. There was no difference between the two groups in terms of maternal age, gestational age and pregnancy history. The mean of cord blood pH in the nuchal cord group was 25/7(6.67-7.34) and in the group without nuchal cord, 7/27(6.94-9.37). This difference was statistically significant (p=0.005). There were no statistically significant differences in the other parameters related to umbilical cord blood gases (PCo2, Po2, HCo3 and Base excess) in the two groups. Also, there was no significant difference between the two groups in terms of birth weight, Apgar score at 1st and 5th minutes, median of active phase labor until delivery, type of delivery, fetal sex, meconium excretion and NICU need. Most majority had 1 umbilical cord around fetal neck. The mean of cord blood pH in neonates with one nuchal cord was lower than that of neonates with two or more nuchal cords, but there was no statistically significant (p=0.666). Other umbilical cord blood gases such as PCo2, Po2, HCo3 and...
base excess in single nuchal cord and infants with multiple nuchal cord were not statistically significant.

**Conclusion:** The findings of this study showed that although the nuchal cord twist leads to a decrease in the PH of the arterial blood of the umbilical cord, however, this decrease is not significant in clinical terms. In other arterial blood gas parameters, there was no significant difference between two groups with and without nuchal cord. Even the multiple nuchal cord have no effect on arterial blood gases. Perhaps in studies with larger sample sizes and concurrent examination of arterial and venous blood gases, different results can be observed.

**Keywords:** Prenatal outcomes, umbilical cord blood gases, nuchal cord

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**The Relationship Between Opioid and Sexual Function During the Recent Past**

**Shiva Zamani, Fatemeh Khosravifard**
Midwifery, Boroujerd

**Backgrounds:** Risky behaviors such as opioid addiction and sexual dysfunction are the most important risk factors for community health. Addiction is a social disease that has physical and psychological consequences. Sexual dysfunction is one of the most common problems that people with opiate dependence have. Sexual issues are important in life. The effects of opioid drug treatment on sexual function vary. Insecure sexual behavior can lead to the transmission of sexually transmitted diseases. The purpose of this study is to investigate the relationship between opioid and sexual function during the recent decade.

**Material and Method:** This review study was conducted by searching the scientific sites magiran, sed, pupmed and google scholar search engines for keywords such as sexual dysfunction, addiction, disease, and their English equivalent regardless of time frame. The study uses about 30 descriptive and analytical articles.

**Result:** The results show the highest levels of sexual addiction in people with opioid addiction and the least excitement. Sexual opioid addiction has a sexually transmitted disease in men or women. In those who have been prescribed methadone maintenance treatment. Erectile function shows an average improvement in mean recovery. Sexual intercourse is a complete improvement, sexual desire, sexual satisfaction has improved and the orgasmic function is shown with a slight change.

**Conclusion:** The results indicated a significant relationship between sexual maturity and marital satisfaction in addicted men's wives. Shows that there are meaning differences between sexual satisfaction and the attitude of women and addicted and non-addicted men. Sexually transmitted infections in non-addicted people and addicted people have a more positive attitude towards the opposite sex. The type of addiction is accompanied by a different amount of excitement, which makes it necessary to pay more attention to interventions consistent with the type of addiction. Methadone maintenance therapy is effective in the sexual functioning of opioid dependent people. Sexual function is affected by opiate affliction, so patients should be
evaluated for entering sexual therapy. Further studies are needed to examine the role of other factors.

**Keyword:** Opioid addiction. Sexuality. Sexual function.

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**Study of Relationship Between Anxiety and Depression and Breast Cancer in Women of Reproductive Age of Two Decades in Iran**

**Shiva Zamani, Fatemeh Khosravifard**

Midwifery, Boroujerd

**Backgrounds:** Breast cancer is the most common and destructive cancer of women in the world. Regarding the psychological effects of cancer, psychological use is very important in reducing the psychological effects of cancer. The aim of this study was to investigate the relationship between anxiety and depression in Iranian women of reproductive age and breast cancer in the last two decades.

**Material and Method:** This is a review article that was conducted with the search of the keywords of anxiety, depression, breast cancer and their equivalent in the Google search engines scholar, magiran, pubmed, sciencedirect in the last two decades.

**Result:** This study showed that there is a significant correlation between physical function in women of reproductive age, anxiety and depression. There is a meaningful and negative relationship between perceived stress, psychological disorders among women of reproductive age with breast cancer and their quality of life. Also, cognitive behavioral groups significantly reduce stress and anxiety and depression in women with breast cancer.

**Conclusion:** According to the results of this study, the recognition of the severity of the psychological problems of patients with breast cancer and the improvement of their quality of life require serious therapeutic, psychological and health plans in the clinics and hospitals. Social support networks, family support, and training courses for managing stress and anxiety are recommended for women with breast cancer.

**Keywords:** breast cancer, anxiety, depression

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**Hypnosis Intervention for the Management of Pain Vaginal Delivery**

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**Background:** Childbirth is a natural physiological phenomenon of women, but is the most severe pain. The World Health Organization (WHO) motto is that "No mother should have any pain in the maternity ward". The use of hypnosis, as one of the most painless delivery methods, has been used worldwide since the last 30 years. Therefore this article gives an overview of the role of Hypnosis on pain vaginal delivery.
Material and Methods: In order to do this research, keywords including Hypnosis, Labor pain AND vaginal delivery was searched in the following databases: Pub Med, Google Scholar, Scopus, Springer and Magiran from 1952 to 2019 which 17 papers were evaluated.

Results: Childbirth is a strong source of stress because it affects women’s own physical and psychological conditions. Anxiety is a powerful factor in pain tolerance. Due to severe labor pain, the rate of postpartum depression increases. Since one of the goals of the Ministry of Health is reducing the number of unnecessary cesarean sections, One of the policies developed, Promoting childbirth is painless. Hypnotism is the science of affecting on perceptions and behaviors of human that can modulate the phenomenological aspects of conscious experience, relieve pain, relax the body, and reduce anxiety. The use of hypnosis in childbirth reduces 80-100% of vaginal delivery pains. Evidence suggests that around a quarter of women can suffer from an intense fear of giving birth. When a woman learns to release the preconceptions, fears and worries about birth that are endemic in our society, her experience of giving birth to her baby can be the most wonderful and empowering experience of her life. Mind and body working together can be a powerful and efficient combination.

Conclusion: Hypnosis can be considered as a new, effective and noninvasive method of reducing pain in vaginal delivery.

Keywords: Hypnosis, Labor pain, vaginal delivery

Effect The of an Educational Intervention on The Proper Estimation of Weight Gain and Its Relation with Optimal Weight Gain During Pregnancy

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Backgrounds: Maternal weight gain during pregnancy of reliable indicators of maternal and newborn health that is influenced by several factors. Accordingly, a study was conducted to determine the effect of educational program on correct estimation of gestational weight gain and its relation with optimal weight gain during pregnancy.

Material and Method: Randomized controlled clinical trial study were compared on 100 nulliparous women in the two intervention and control groups. In the intervention group, pregnant women received educational program for calculation of body mass index, proper gestational weight gain and proper nutrition in two 90 minute sessions and control group received only routine prenatal care. Data collected by completing questionnaires including: demographic characteristics and correct estimated weight gain at the beginning and 4 weeks after the intervention, at the end
of the second and third trimesters of pregnancy and weight measurement at the last prenatal visit and analyzed by SPSS19 software.

**Result:** The results showed that the intervention group and the control group in terms of demographic characteristics and accurate estimation of optimal weight gain during pregnancy, BMI and nutrition pattern before intervention. But after 4 weeks, at the end of the second trimester and at the end of the third trimester, there was a significant difference between the intervention group and the control group (p < 0.001). In women who had a correct estimate of optimal weight gain proportional to BMI, optimal weight gain was significantly higher. Optimal weight gain in the intervention group was significantly different from the control group (P = 0.045).

**Conclusion:** Education program to increase mothers’ awareness of optimum weight gain based on BMI is effective in increasing proper nutrition awareness and weight control in optimal gestational weight gain.

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**Prevention and Screening of Cervical Cancer**

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In recent decades, significant changes in the field of pathogenesis and treatment of cervical cancer have occurred, including the proof that the relationship between HPV virus and cancer is due to major advances in vaccine production for primary prevention and use of HPV test for secondary or screening prevention. Awareness of screening methods of this cancer and the regular PAP diagnostic test has a significant role in reducing the prevalence of invasive types of cancer and mortality. The interval of infection with HPV and the establishment of CIN and cancer is long and lasts over the years or tens of years and offers the opportunity to be recognizable and treated by conducting pre-cancerous waste screening tests. Conventional screening tests are based on cytologic assessment and colposcopic and histologic investigation.

The World Health Organization recommends that women perform the test at least once in the age of years to ensure an effective treatment.

**Material**

There are major disputes in control of cervical cancer and its prevention worldwide compared to this cancer. Almost all cervical cancers are caused by certain types of human papillomavirus (HPV). Preventive vaccination for HPV is the most effective method of primary prevention against HPV-related diseases, but screening programs and its implementation are different depending on risk perception, health care budget, diagnostic test, costs and infrastructure among other factors.

The use of pop and HPV tests, in accordance With the published guidelines, it is an important component of HPV-based screening program and the most effective screening method for cervical cancer. However, there is currently limited information about optimal triage strategies for women with HPV. A serious challenge is to
integrate screening and vaccination programs, since the population is increasingly vaccinated, it constantly leads to reduced risk of cervical cancer...

This study information regarding HPV test and the potential benefits and disadvantages of this strategy for screening as well as the ones that need to be researched. They have more deals.

**Keywords:** cervical cancer, screening, pop test, initial prevention, HPV test.

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**Obesity of Women and Associated Disorders**

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**Backgrounds:** Worldwide, the prevalence of obesity and overweight in industrialized countries and in a substantial number of developing countries is increasing at an alarming rate. The World Health Organization has defined obesity as a body mass index (BMI) ≥ 30 kg/m². According to estimates, in 2015 about 2.3 billion men and women were overweight (BMI 25 to 30 kg/m²) and 700 million were obese (BMI > 30 kg/m²). The prevalence of obesity is estimated to range from 5% in some developing countries to more than 30% in developed countries. Obesity is an important public health issue not only because of its prevalence, but also because of the global impact it has on an individual's physical health and quality of life. Quality of life, control over eating behavior, and issues related to sexual function are three topics of relevance to a population with overweight or obesity.

**Material and Method:** Researches show that the obesity epidemic has also contributed to fertility problems. Obese women have a lower chance of conceiving naturally than non-obese women and a higher risk of miscarriage. Obesity can result in anovulation and a reduced chance of conceiving in ovulatory subfertility women. Obesity also has a negative impact on the outcomes of in vitro fertilization (IVF). Pregnancy and live birth rates following IVF are lower in obese women. Moreover, literature suggests that obesity is related to maternal and neonatal complications including congenital anomalies, hypertensive disorder, gestational diabetes, prolonged labor, macrosomia, and shoulder dystocia. To prevent the adverse effects of obesity, weight loss is recommended as the first line of treatment in obese women seeking pregnancy. Studies have demonstrated that as body mass index (BMI) increases, weight-related quality of life scores diminish; similarly, reductions in weight have been shown to improve these outcomes in patients with obesity.

**Result:** Binge eating and control over eating behavior are additional issues of importance to individuals with overweight or obesity. To prevent the adverse effects of obesity, weight loss is recommended as the first line of treatment in obese women seeking pregnancy. To assess the effectiveness of lifestyle treatment (diet, exercise, behavioral or combined treatments) in women with PCOS, lifestyle intervention improved body composition, hyperandrogenism and insulin resistance.
Conclusion: The etiology of obesity is believed to be multifactorial, with both genetic and environmental contributions. A key determinant of obesity is the balance between ingested calories and the body’s basal energy expenditure. Obesity therefore results when small positive energy balances accumulate over a long period of time. Weight loss can be achieved by lifestyle intervention programs incorporating the combination of a healthy diet, increase of physical activity, behavioral modification, and use of complementary and traditional healthcare approaches and medications.

The Dangers of Hymenotomy for Imperforate Hymen A Case of Iatrogenic Pelvic Inflammatory Disease with Pyosalpinx

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Complications associated with imperforate hymen include cyclical abdominal pain, acute urinary retention, endometriosis, and even iatrogenic infections.

CASE: A 14 year old female was diagnosed with an imperforate hymen, hematocolpos, and right hematosalpinx. A hymenotomy was performed, followed by a hymenectomy three days later. On postoperative day 7, she was admitted for pelvic inflammatory disease with a right pyosalpinx. The infection was refractory to intravenous gentamicin, ampicillin, and clindamycin so the patient underwent computerized tomography guided drainage of the pyosalpinx. Two days later, she was discharged home in good condition.

Small incisions and punctures into imperforate hymens without immediate definitive management should be avoided since inoculation of the newly introduced bacteria can ascend the gynecologic tract and lead to serious infections.

Endometriosis in young women

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Backgrounds: Endometriosis is a common disease among women of reproductive age, which causes severe pain and stiffness in their abdominal organs. In this disease, the endometrial tissue is formed outside its original location, the uterus, which is one of the main causes of infertility among women.

Material and Method: According to statistics, 176 million women in the world suffer from endometriosis, and 30 to 40 percent of these women are prone to infertility. Endometriosis means the growth of the uterine tissue somewhere outside the uterus. The pelvis is the most common site of endometriosis, where ovaries, fallopian tubes, ileum, colon, rectum, appendix, and bladder are most commonly affected. Endometriosis is not only a physical and biological disease, but also a social and psychological condition, which change the quality of life. The common
symptom of the disease is menstrual pain and often worse, which can't be overcome by taking medication. Other symptoms include irregular and severe bleeding, blood in the urine and stool, nausea, vomiting, constipation, and dyspareunia. Researches has demonstrated that there is a high cancer risk for the tissues involved with endometriosis.

**Result:** Women aged 25 to 40 years should go to the health centers for periodic examination and testing. Given the high incidence and lack of complete knowledge of women about the risk factors for this disease; medical advices on behavioral changes including proper diet, quitting smoking, maintaining proper weight and adequate mobility, could help to prevent early onset of the disease.

**Conclusion:** Women aged 25 to 40 years should go to the health centers for periodic examination and testing. Given the high incidence and lack of complete knowledge of women about the risk factors for this disease; medical advices on behavioral changes including proper diet, quitting smoking, maintaining proper weight and adequate mobility, could help to prevent early onset of the disease.

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**Sexual Activity, Interest and Satisfaction in Older Women in Iran.**

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**Introduction:** The world’s population is aging and the issue of sexual activity in elderly is still taboo in many cultures. The purpose of this study was to examine the sexual activity, interest and satisfaction in older women attended Health Care Centers in Ardabil city.

**Material & Method:** A descriptive study was conducted on 380 women over 60 years of old through a convenient sampling method. General health and FSFI Questionnaires were completed anonymously and through Face-to-Face and Individual Interviews. Data were analyzed using SPSS software.

**Results:** This study indicates that 60% of women had sexual activity and about half of them had interest in sex. Sexually active women were significantly younger (p<0.05) and more educated (p<0.001) than sexually inactive women. Sexual activity, interest in sex, Emotional closeness and sexual satisfaction with their husbands, were affected significantly by presence of children at home.

**Conclusion:** This study approved that despite misconceptions, aging and sexuality do not conflict. The result of this study could help health care providers to provide appropriate and effective sexual healthcare services to older women.

**Key words:** Sexual activity, interest, older women, Iran
**Does Aging Associated With Detrusor Underactive?**

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**Aims:** To evaluate association between voiding dysfunction & age induced biomechanical tissue changes, we reviewed on 160 patients with nonobstructive voiding dysfunction & impaired contractility with residual urine.

**Methods:** 160 female patients with chief complaint of difficult voiding, dribbling, frequency & nocturia, mixed incontinence with residual urine, we exclude prolapsed, UTI, hypermobility from the study.

All patients were assessed by UDS & VCUG.

**Results:** Impaired contractility has been regarded as etiologic of detrusor underactivity. However an age-related degradation of detrusor contractility makes impaired bladder emptying. There is potential impact of impaired sensory function on voiding efficiency. Structural & functional tissue changes accompanying aging may result in altered bladder afferent function, with subsequent reflex impairment of detrusor voiding function.

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**Breast Cancer and Pregnancy**

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**Introduction & Aim:** After cervical cancer, Breast cancer is the most common cancer in pregnancy. More than 3% of breast cancers are diagnosed in pregnancy. The most important cause of inadequate prognosis in this period is the delay in diagnosis of the disease due to special clinical problems such as enlargement and multiple nodularization of the breast during this period and limiting the use of various radiographic and paraclinical methods. This study was designed to investigate breast cancer during pregnancy.

**Methods:** This research is a review article

**Results:** Physiological changes in pregnancy make it difficult to diagnose. Tumors are ductal invasive carcinoma in 80-100% of patients. The occurrence of inflammatory tumors with poor prognosis is more prevalent in pregnant women than in non-pregnant women. Appropriate interventions should be made as soon as possible. Mammography can be performed. Ultrasound is more sensitive during pregnancy and lactation. Treatment of this cancer in pregnant patients is not different from other non-pregnant patients. In these patients, it is necessary to use various surgical
methods as soon as possible, but it is better to avoid different radiographs as far as possible and it should be postponed until after delivery. Chemotherapy is contraindicated in the first trimester of pregnancy due to teratogenic risks in the fetus. If you suspect the possibility of breast cancer, biopsy is necessary and should not be delayed until after delivery.

**Conclusion:** Treatment should be done as soon as possible using standard protocols and decided by a team of gynecologist and medical oncologist.

**Keywords:** Breast cancer, pregnancy, malignancy

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The Effect of Saffron on Sexual Dysfunction in Women of Reproductive Age

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**Backgrounds:** Sexual dysfunction is a common matter among women which has a significant effect on human’s life. Various methods have been evaluated for encountering and treatment of sexual dysfunction. Considering the effects of saffron and shortage of conducted studies in this field, the aim of the present study was to evaluate the effect of saffron on sexual dysfunction in women of reproductive age.

**Material and Method:** The present clinical trial was conducted on 69 women of 18 to 39 years old who referred to the health centers of the Arak University of Medical Sciences in 2013. Participants were selected using a continuous sampling method and were randomly allocated into two groups of intervention and control. The intervention was performed as using saffron extract capsule for 8 weeks and comparing it to the consumption of placebo capsules. The status of participants’ sexual performance was evaluated using the Female Sexual Function Index before the intervention and four and eight weeks after the start of the intervention. Data were analyzed through SPSS software using chi-square test, independent t-test, and Cochrane test.

**Result:** Results showed no significant difference between both groups regarding their sexual dysfunction at the beginning of the study. Comparing the two groups of intervention and control four weeks after the start of the intervention showed a significant difference between their excitement and desire. However, eight weeks after the start of the intervention, the difference between both groups regarding their total sexual dysfunction and all of its aspects except for lubrication and dyspareunia was statistically significant.

**Conclusion:** Considering the effect of saffron on the improvement of women’s sexual performance and also considering the safety of this herbal drug, saffron could be used for the improvement of sexual performance in women of reproductive age.
A Successful Pregnancy Outcome in a Heterotopic Abdominal Pregnancy A Case Report

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Backgrounds: Heterotopic pregnancy is the existence of both intrauterine pregnancy and ectopic pregnancy simultaneously. Heterotopic pregnancy (HP) has been a rare type of multifetal pregnancy. Heterotopic abdominal pregnancy (HAP) is a very rare diagnosis with very few reported cases.

Case Presentation: We reported a rare case of HAP in a 32-year-old woman (G2L1) with a history of 13 weak amenorrhea and mild pelvic pain presenting with two live fetuses in the 13th week. The patient also did not mention any risk factor of ectopic pregnancy such as pelvic inflammatory disease, assisted reproductive techniques, endometriosis, and multiparity. Diagnosis of HAP was performed with the use of sonography and magnetic resonance imaging. We managed the patient with emergency laparotomy due to acute abdominal pain a few hours after admission. Laparotomy revealed the rupture of the left fimbria with 500 cc hemoperitoneum. The excision of the ectopic gestational sac in the cul-de-sac and left salpingectomy with preserving the intrauterine fetus was performed. The patient finally gave birth to one live term birth.

Conclusions: Physicians should consider the possibility of HP in women with spontaneous pregnancy and abdominal pain. Both sonography and MRI should be performed to help timely diagnosis. Keywords: Abdominal Pregnancy, Ectopic Pregnancy, Heterotopic Pregnancy, Live Birth.

Material and Method: CASE PRESENTATION A 32-year-old woman G2L1 with a sonography based on 13w+3d twin pregnancy with an alive fetus in uterine cavity and another in abdominal cavity was referred to our hospital for termination the heterotopic (abdominal) pregnancy. She had a transvaginal sonography in 7th weeks of pregnancy with single alive 7 weeks embryo in uterine cavity and in 13th weeks in screening sonogram a heterotopic pregnancy was reported. A magnetic resonance imaging was done and confirm the diagnosis[fig1]. After admitted period for elective surgery she suddenly presented an acute abdomen with nausea and vomiting, heart rate was 104 and blood pressure was 100/60, in abdominal examination she had rebound tenderness, Her hemoglobin at the time of admission was 10 and after this situation became9.7; so, emergency laparotomy was done. After midline incision about 300cc blood and 100cc clot was suctioned and after abdominal exploration a 12 weeks large uterus with normal right tube and both ovaries was seen, in posterior cul-de-sac there was a gestational sac with alive fetus and adherent and ruptured left fimbria. After bringing out the pregnancy conception[figure2] left salpingectomy was done, and bleeding area sutured and again the pelvic cavity explored for any remnant conception and one unit packed cell was transfused during operation. After the operation fetal heart beat of intrauterine fetus was checked and it was normal.
Because of no wasting time the patient wasn't in shock before laparotomy after operation she was stable without any contraction her hemoglobin was 8.5. Few a days after good condition she was discharged. Fortunately she gave birth her child in 36w +4d without any problem.

Result: Two implantation sites for pregnancy, one in uterine cavity, the other in ectopic places like fallopian tube, abdomen, spleen, cervical, broad ligament, ovarian is called heterotopic pregnancy with prevalence of 1 in 30,000 pregnancy (1). It is still a question whether abdominal pregnancy happened when fertilization of sperm and ovum, with primary implantation in the abdomen or a result of a tubal abortion (5, 6). Risk factors for abdominal pregnancy include, pelvic inflammatory disease, tubal damage, assisted reproductive techniques, endometriosis and multiparity (8). This kind of pregnancy has critical type of complications. Patients present late because of live fetus in uterine cavity and limited usefulness of HCG titration. In this condition, different sites of implantation causes different signs and symptoms, like acute abdomen, vaginal bleeding, abdominal pain because of fetal movement, bowel obstruction (8). Heterotopic pregnancy is difficult to diagnose and need awareness and attention of sinologist. If sonography facilities couldn’t help, Magnetic Resonance Imaging will be a good method (9). There are many types of termination in ectopic embryo or fetus of heterotopic pregnancy: surgical, medical and expectant management. The administration of potassium chloride, methotroxate and hyperosmolar glucose is a nonsurgical (10), that depending on the implantation site, gestational age and surgeon experience the choice could be different. The goal of surgical intervention is to remove the extrauterine pregnancy without injury to normal intrauterine fetus (11*). In surgical method the key is removing placenta, because bleeding from implantation site can lead to life-threatening maternal hemorrhage. If it remains in placental site, ligation the umbilical cord. After this choice the patient can be followed without further intervention or using arterial embolization or methotrexate (8). The other important aspect of these pregnancies is increased risk for spontaneous abortion of intra uterine one; The main principle during surgery is attention to maternal bleeding with caring of the intrauterine pregnancy and minimal manipulation of the uterus. Intrauterine pregnancy is expected to develop normally.

Conclusion: In conclusion, physicians should consider the possibility of HP in pregnant women with abdominal or pelvic pain and both sonography and MRI should be performed. In such a case, the bimanual examination should not be in the first line plan. If a bimanual examination is required to perform, it should be done cautiously and gently because it may lead to severe bleeding. In our case, this might happen and lead to acute abdominal bleeding.
Comparison of the Use of Foley Catheter Traction for Cervical Preparation in Prolonged Pregnancy Outpatients and Admissions

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Backgrounds: Induction of labor is indicated when the benefits either mother or fetus outweigh those of pregnancy continuation. One of the most common indications is pregnancy. For this purpose, various methods, such as mechanical and pharmaceutical, or the combination of these two, are used.

Material and Method: In a case-control study, pregnant women with gestational age greater than 41 weeks were divided to two outpatients and admissions. For both groups under sterile conditions, Foley catheter number 16 was inserted into the cervix and reassuring heartbeat monitoring of the fetus was performed. The outpatient group was sent home after 30 minutes. The other group was admitted and received 25 μg vaginal Misoprostol at the same time and every 4 hours. Oxytocin was given as needed. The outpatients was admitted after the catheter expulsion or 12 hours later. Similar to the admission group, they received misoprostol and oxytocin. Foley catheter’s expulsion time, delivery time, dosage requirements for Misoprostol, and the need for oxytocin, cesarean section and postpartum fever were determined in two groups. Result: 112 in the outpatient group and 119 in the admission group were enrolled. The excretion time of catheter in the admission group was significantly higher. (p-value = 0.046) The need for misoprostol as well as oxytocin was significantly lower in the outpatient group. Cesarean section and postpartum fever were not significantly different in two groups.

Conclusion: The placement of a foley catheter in the cervix, in an outpatient setting for termination of pregnancy in prolonged pregnancies, reduces the foley expulsion time and the need for misoprostol and oxytocin and hospital stay and costs.

Prostitution Lifestyle: Getting Out and Challenge to Change

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Aim: The aim of this study was to determine street-level prostitution lifestyle of women and the extent of the desire to change this lifestyle and exiting.
**Methods:** this qualitative ethnography study was performed on 48 women street-level prostitution that referred to Mikhak drop in center in Tehran between Dec 2017 and Dec 2018. The transcripts were analyzed for themes that represented the shared consensus of the research participants.

**Results:** Their parents have a low level of education, their family finances are poor. There were addictions in most families. Many of these women have been victims of domestic violence as well as children. Wives are agents of encouraging these women to be prostitutes. After friends, the spouses of these people encouraged them to use drugs. The results of this study show that more than 60% of children were raped in their childhood, which could be the main cause of many mental and psychological illnesses. More than 90% of these people have no hope of a better future, and they think they should continue to work for the rest of their lives to earn a living and earn money. Given that these people have a low level of education, they had almost no knowledge about sexually transmitted diseases, and nearly 80% of them reported that they did not use condoms during sex.

**Conclusions:** None of the women based their personal desire on their own prostitution, and their majority were motivated by poverty and financial pressure. This study showed, poverty and addiction are two variables that propagate the prostitution phenomenon.

**Keywords:** Street-level Prostitution, Lifestyle, Change, Exiting

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**Effective Factors on Menstrual Health Among Female Students in Bam City A Qualitative Study**

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**Backgrounds:** Menarche has been described as an independent puberty event in girls and is accompanied by physical growth, ability in marriage and fertility. Therefore, poor menstrual health and inappropriate self-care are major determinants of morbidity, physical, psychical and social problems in this age group. So, the goal of this study is to explore Enabler Factors on Menstrual Health among Female Students in Bam City.

**Material and Method:** This is a qualitative study with content-driven analysis approach in 2017. The participants were 32 individuals including: students and their mothers, school principle associates and health educators of 5 secondary schools in Bam city who were selected based on an objective-oriented approach. The sampling was done until data saturation. Data collection methods were observation and semi-structured and in-depth interview. Data were analyzed using to GranHaim and Landman’ suggested steps.

**Result:** In total, 32 individuals participated in our study. Two classifications (positive and negative enablers to health behavior change), 13 sub-classifications and 52
primary and conceptual codes, obtained from interviews. positive enablers included Easy access to sanitary pad, Proper school education about menstruation, Easy access to physician or health centers, Schools flexibility on menstruation issues and negative enablers included unavailability to sanitary pad disposal, lack of access to informed people about menstrual issues, normal considering some unusual menstrual problems, the high cost of treatment and follow up menstrual issues, shame feeling on pursuing menstrual issues, self-medication with traditional medicines instead of referring to a doctor, insufficient self-directed education about menstruation, trusting inappropriate beliefs of experienced family members, lack of awareness and lack of trust in health centers staff to treat menstrual problems.

**Conclusion:** Overall, this study indicated that several economic, social, cultural and educational factors effect on girls’ menstrual health. So, identification of these factors helps the planners to apply the most appropriate methods and strategies in order to improve girls’ menstrual health.

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**Cultural Beliefs About Menstrual Health in Bam City A Qualitative Study**

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**Backgrounds:** Menstruation is a natural and physiologic process that is managed based on various sociocultural habits and behaviours. Cultural beliefs about menstruation can improve or prevent menstrual health behaviour. This study aimed to explain the cultural beliefs about menstrual health in Bam City.

**Material and Method:** This is a qualitative study with Directed Content Analysis approach. The participants were 34 individuals including, 14 students, 12 of their mothers, 8 school associates and health educators of 5 secondary schools in Bam city. purposeful sampling method was used until data saturation. Data collection method was in-depth and semi-structured interviews. Data were analyzed using Granehim and Lundman suggested steps.

**Result:** The analysis of data identified 58 initial and conceptual codes, 15 sub-categories and 5 categories from beliefs about menstrual health. Categories included beliefs related to menstruation, beliefs related to menstrual health behaviours, beliefs related to the effect of diet on menstruation, belief in the effect of some specific methods on menstruation, religious beliefs about menstruation.

**Conclusion:** Our findings identified different cultural beliefs about menstruation among participants. So planners should identify these beliefs in order to apply the most appropriate methods for menstrual health management.
Appropriate Interventions for Pregnant Women with Metabolic Risk factors and Pregnancy Outcomes: A Systematic Review


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Context: In recent decades, metabolic syndrome was considered as a health problem in developed and developing countries, which is a series of metabolic disorders, including abdominal obesity, impaired glucose and insulin metabolism, hypertension and dyslipidemia. Pregnant women with metabolic risk factors are at risk for potential pregnancy outcomes. This study aimed to investigate the effect of appropriate interventions on reducing the risks creating syndrome to improve the outcome of pregnancy.

Evidence Acquisition: This systematic review was performed to extract RCTs (published until August 2017) regarding any dietary, physical activity or lifestyle interventions for pregnant women suffering from the risk factors of metabolic syndrome, such as obesity, hyperlipidemia, hyperglycemia, and hypertension with potential risk for pregnancy and the health situation of mothers, by evaluating and searching in the Ovid, PubMed, Google Scholar, SID, Cochrane Library, EMBASE, CINAHL, Magiran and Iran medex databases. Two researchers have independently evaluated the quality of the methods and results presented in all the articles, and the studies were ranked as high / low quality; the level of evidence was based on the number of high quality studies and the coordination of the obtained results.

Results: 17 randomized clinical trials (on 5475 pregnant women) were evaluated; among which7 articles were studied the physical activity (1499), 3 articles were reviewed diets (3089), 6articles were studied the lifestyle interventions (1125), and 1 article on counseling (122). In general, evidence suggested the benefits of physical activity and proper diet, and their impact on proper weight gain during pregnancy, preventing maternal complications, and improving the outcome of pregnancy.

Conclusion: According to the results of this systematic review, proper interventions during pregnancy can have a positive effect on maternal weight gain and the health of pregnant women with risk factors for metabolic syndrome.

Keyword: metabolic syndrome, pregnancy outcomes, pregnant women, interventions.
Comparison of the Effect of Bupivacaine–Fentanyl Compared Bupivacaine–Sufentanil in Spinal Anaesthetics in Pregnant Women in Zanjan Iran

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Backgrounds: Labour pain is the most severe pain experienced by a mother during her lifetime. This study aims to encourage normal delivery, reduce caesarean section, and morbidity by comparing two fentanyl–bupivacaine and sufentanil–bupivacaine combination as spinal anaesthetics of the mothers who referred to Ayatollah Mousavi Hospital in Zanjan in the active phase of delivery.

Material and Method: This study was performed on 90 pregnant women with active phase of labour who were divided into three groups. The first group received 50 μg fentanyl and 2.5 mg bupivacaine and the second group received 5 μg sufentanil and 2.5 μg bupivacaine by spinal injection and the third group received no intervention. The severity of analgesia and maternal and neonatal outcomes were recorded. To compare the data, ANOVA, t-test and Chi-square test were used.

Results: Our study showed that the duration, the first and second stage of labour, did not show significant difference between three groups (P > 0.05). Sufentanil has a faster return pain duration (P = 0.37). Patients in Group A had more severe pain (3.93 vs. 4.73, P = 0.001). Return the sense was significantly longer for fentanyl (P = 0.001). In sufentanil group, 40% were in T8–T10 level, while in fentanyl use group, 20% were categorized in this range.

Conclusion: The present study reported that the use of fentanyl or sufentanil in combination with bupivacaine for spinal analgesia as a low-risk method for controlling labour pain, although it seems that the combination of sufentanil–bupivacaine is more effective.

Infertility Policies Challenges in Reproductive Rights

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Background: Infertility is an important public health issue. WHO, has announced that “Infertility generates disability, and thus access to health care falls under the
Convention on the Rights of Persons with Disability. Given the high cost of fertility treatment, many infertile couples in many countries go untreated or undertreated. There are few countries that have a legal mandate for counselling and supportive care in reproductive policies and prevention of infertility is a neglected issue. The aim of this study is attempted to evaluate the amount of implementation of reproductive rights in providing infertility services in selected countries.

**Methods/Design:** A comparative policy analysis was conducted to understand the infertility programs, rules and policies in selected countries. Evidence was selected from 1994 until the end of 2018. The 12 indicators that were lastly selected allowed us to determine, for each country, a summary score indicating its relative status across all three areas: 1) equity in utilization, 2) access to services and 3) service level.

**Results:** After the primitive survey, the policies of the United Kingdom, United states, Turkey, Singapore, Ghana, Iran and Australia were preferred. The most exhaustive policies were providing in UK, Australia and Singapore.

**Discussion:** A hypothesis is mention that, richer countries would, usually, have implemented more infertility policies than destitute countries. Another is mention that, if life expectancy and survival were valuable in a population, then appropriate policies for infertility will possibly be available and there may be forceful mechanisms for agenda setting. Major challenges in reproductive rights were, in providing preventive and supportive infertility care in communities where cultural, religious and social complexity will be existing and sexual health education.

**Conclusion:** Access to infertility services varies everywhere the world and depends on many factors, including availability of facilities, religious or ethical considerations as well as affordability of treatment.

**Key word:** infertility, policy, reproductive rights

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**Uterocervical Angle At Second Trimester May Be A Marker For Preterm Birth Prediction**

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**Backgrounds:** At present prediction of preterm delivery is one of the most important problems of obstetrics world. If the cervical length at tranvaginal ultrasonography screening is in normal range, we tried to apply uterocervical angle to predict spontaneous preterm birth before 37 weeks of gestations.

**Material and Method:** Our study was a prospective observational study, that 240 women enrolled until then, of them 210 have finally finished the study. Pregnancies between 18 and 24 weeks of gestation, all of them were singleton and primi parous, with normal ranges cervical length upper than 25 mm with transvaginal ultrasound, so suitable to participate in study. Cervical length and uterocervical angle (UCA) were
measured at the same time transvaginally by ultrasound. Birth information was composed, and analyzed.

**Result:** From 240 mother ,20 cases left the study in order to medical termination and other reasons .Among 220 cases ,12 (5.4%), had preterm delivery under 37 weeks ,with labor pain or rupture of membranes. 208 cases delivered after 37 weeks of gestations .All of 12 cases with cervical length of over 25 mm, had a wide UCA (over than 105º).from 208 cases 125(60%) had acute UCA (under 95 º )and 80 (38%) cases (between 95 º -105 º ),and only 2(0.9%) cases had over 105 º UCA.

**Conclusion:** In normal cervical length ,preterm birth may be correlated to wide uterocervical angle , but large studies should be done.

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**The Effectiveness of Information- Motivation - Behavioral Skills Model in Prevention of Gestational Diabetes Mellitus in Pregnant Women with Overweight and Obese**

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**Backgrounds:** Gestational diabetes is one of the most common metabolic disorders in pregnancy. The aim of this study was to determine the effect of behavior intervention on Information - Motivation - Behavioral Skills (IMB) Model in preventing gestational diabetes mellitus (GDM) in overweight and obese pregnant women.

**Material and Method:** This randomized controlled clinical trial was conducted on 162 overweight and obese pregnant women in the Rohani hospital of Babol from June 2018 to February 2019. 14 participants were excluded due to exclusion criteria and 148 were randomly allocated into intervention and control groups. In addition to standard prenatal care, the intervention group received four intervention sessions IMB Model at 12-16 weeks of gestation. Participants completed pretest measures, demographic and health promoting behaviors questionnaires and blood glucose were assessed. Then, 8 weeks after the intervention were re assessed. Diagnosis of GDM was based on a country protocol at 24-28 weeks of gestation. Descriptive and inferential statistics such as independent t-test, Chi-square, Ancova and Mancova were used. P value less than 5% was considered significant.

**Result:** The incidence of GDM in the intervention group was lower than the control group (RR = 0.33, P = 0.004). The mean score of health promotion behaviors in the intervention group was higher than the control group (P = 0.001). The mean difference between two groups were significant (d = 0.77).

**Conclusion:** Findings showed support for the effectiveness of the IMB-based intervention in overweight and obese pregnant women in decrease the incidence of
gestational diabetes and also improved the dimensions of various behaviors of health. Therefore; it is recommended that all pregnant women, especially high risks women, be counselling on IMB model for preventing gestational diabetes.

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**Indications of Pregnancy Termination in Patients Admitted with Preterm Premature Rupture of Membranes and Associations with Maternal & Neonatal Outcomes**

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**Background:** Preterm Premature Rupture of Membranes (PPROM) occurs in 1–2% of pregnancies, it accounts for 30–40% of preterm births. We aimed to determine the indications of termination of pregnancies and their associations with maternal and neonatal outcomes among pregnant women hospitalized with PPROM.

**Methods & Materials:** This prospective cohort study was performed over a number of 199 pregnant women with PPROM who were admitted to hospital. Data on indications of termination of pregnancy, amniotic fluid index, fetal presentation, and total days of patients' hospitalization till delivery were collected and then their associations with maternal and neonatal complications were evaluated.

**Results:** In this study, 199 women with a mean age of 29.3±6.4 years were included. Labor pain was the most common indication of termination of pregnancy. The most common maternal complication was chorioamnionitis with a frequency of 3 (1.5%) cases. In neonatal complications, PVH, IVH and seizure were most common complications, respectively. A total of 27 neonatal deaths occurred.

**Conclusion:** The results of current study indicated that the incidence of PPROM at gestational age below 30 weeks results in more frequent maternal and neonatal complications.

**Keywords:** Preterm Premature Rupture of Membranes, PPROM, Pregnancy Termination, Neonatal Complications

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**The Association Between Temperamental Traits Personality Disorders and Quality of Life in Breast Cancer**

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**Backgrounds:** Factors associated with Quality of Life (QOL) in patients with breast cancer have been noticed increasingly. The aim of this review was to evaluate temperament and personality disorders related to QOL in breast cancer patients.
**Material and Method:** The review was conducted searching electronic databases PubMed, Web of Science, the Cochrane Library, Scopus and Science Direct for English articles published since 1996 to 2018. The words temperament, character, personality disorder, breast cancer, quality of life were used as keywords. 21 out of 416 articles were included.

**Result:** 2 studies assessed personality disorders and 19 pointed different dimensions of temperamental traits. Findings of this review were assorted in two categories: 1. Factors deteriorating QOL: existence of a personality disorder, no matter the cluster was negatively related to emotional QOL. Higher neuroticism and higher openness were predictors of poorer QOL. Higher perseveration and higher emotional reactivity conducd to lower level of emotional QOL. 2. Factors ameliorating QOL: Lower harm avoidance was correlated with better general health, vitality and physical functioning. Higher self-directedness, novelty seeking and persistence were associated with better mental health, general health and physical functioning. Self-Transcendence led to a better mental health.

**Conclusion:** Regardless of inadequate studies, it can be concluded that the quality of life in breast cancer patients is influenced by temperamental traits and personality disorders. Therefore, the psychiatric evaluation of the breast cancer patients should be considered during and after the treatment.

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**Body Mass Index and Weight Gain During Pregnancy in a Cross-Sectional Study in Pregnant Women Referred to Amol Health Centers**

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**Introduction:** the prevalence of obeicity and overweight in women of childbearing age has increased world wide. obesity and overweight in pregnant women are essociated with maternal and fatel complications. therefore, this study was conducted to evaluate body mass index and weight gain during pregnancy in pregnant women referred to amol health centers.

**Method:** this cross- sectional study was performed on 200 pregnant women referred to 4 health center in amol city. midwifery demographig data (age, educational level,job, pregnancy rating and number of children), body mass index (BMI) and the first trimester weight of samples were collected and recorded. then, these samples were fallowd up to the end of pregnancy and were reevaluated in terms of weight gain. data were analyzed bi chi-square Test, T-Test and one way variance analysis that were avaluated in a significant level <0.05.

**Results:** the mean age of mothers was 29.41+- 6.10 years. 92% of mothers was housewife and 20% mothers have high level education. the half of mothers(50%) were primiparous. the body mass index mean of pregnant women in the first trimester was
28.61% ± 4.95 and 80% of pregnant women in the first trimester were overweight or obese. The descriptive analyses showed that 4 mothers (2.2%) were lean. 32 mothers (17.5%) have normal weight. 74 mothers (40.4%) have overweight and 73 mothers (39.9%) have were obese.

The mean weight gain during pregnancy was 10.50% ± 4.91 Kg. The minimum weight gain was 0 Kg and the maximum was 32Kg. The one way variance analyses showed that increasing pregnancy weight in obese mothers were significantly higher than normal weight and over weight pregnant mother. (p<0.05)

Discussion and conclusion: The prevalence obesity and abnormal weight gain during pregnancy were high in pregnant women. Nutrition training and proper physical activity before and during pregnancy are recommended in obese women.

Key word: Weight gain in pregnant women; pregnant women; body mass index (BMI)

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Efficacy of Single Agent Chemotherapy in Management Low Risk GTN Cases

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Objective: Low risk gestational trophoblastic neoplasia (GTN) is a curable disease if appropriate management was performed. This study carried out to determine the efficacy of methotrexate (MTX) versus Actinomycin D (ACT) as the initial single agent chemotherapy (ChT) in treatment of low risk GTN cases. In addition prognostic factors of resistance cases of ChT was evaluated.

Methods: This prospective cohort study was conducted on the 110 patients with low risk GTN candied to single agent ChT. All patients were referrals cases to an academic oncology center between 2012 to 2017. The treatment response and failure of each chemotherapy was analysis.

Results: 110 patients was treated initially with weekly (50 mg/m2) MTX and 10 patients treated with ACT regimen (1.25 mg/m2 biweekly at first line drug. Due to MTX-resistance, 20 Patients need to switch drug to ACT and in 3 of the others because treatment-related adverse effect, the drug changed to ACT.

Complete remission achieved in 71% of patients which treated with MTX and in 78.7% cases of ACT group. The overall response rate for all single agent ChT was occurred in 90.3% of cases.

Risk factors in resistance to first line ChT in patients who received MTX were; pathology of coriocarcinoma, higher level pretreatment of B-HCG titer, presence of metastases disease, delay in initiating treatment and lack of proper collaboration the patient’s.

Conclusions: Primary remission rates MTX was lower than ACT regimen respectively.
Keywords: gestational trophoblastic neoplasia, single agent chemotherapy, methotrexate, Actinomycin.
Is Cesarean Delivery Rate is Higher in Term Pregnancies with Oligohydramnios

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Backgrounds: Oligohydramnios is one of the major causes of maternal and perinatal morbidity and mortality. Aim of current study was to evaluating cesarean Delivery Rate in term Oligohydramnios.

Material and Method: A case control study was conducted from 2011 to 2014. 255 pregnantwomen (85 cases in oligohydramnios and 170 cases in control group) were included, from 37 to 41 weeks. The inclusion criteria for the study purpose was: Thirty seven completed weeks of gestation, amniotic fluid index of ≤ 5 cm, intact membranes, singleton pregnancy with cephalic presentation. Following patients were excluded from the study: gestational age less than 37 completed weeks associated fetal malformations, ruptured membranes, malpresentation and multiple gestation. Fetal growth restriction, Chromosomal abnormalities, diabetes, maternal hypertensive disease and instrumental delivery. To determine the association between oligohydramnios and cesarean delivery rate chi-square and Fisher’s exact test were used if necessary.

Result: There was not statistically significant difference regarding maternal age, gestational age, gravidity and parity between case and control group. Results of the present study revealed that the rate of cesarean was significantly higher in oligohydramnios group compared to the control group (75.3% vs. 36.5% respectively).

Conclusion: It can be concluded that an amniotic fluid index of ≤ 5 cm detected after 37 completed weeks of gestation is associated with significantly higher cesarean delivery rate.

Evaluation of Medical, Social, legal, Ethical and Religious Aspects of Surrogacy

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Backgrounds: According to the World Health Organization, 10 to 15 percent of the world’s couples (more than 80 million) have infertility problems and need some form of assisted reproductive technology. The use of these therapeutic methods has enabled infertile couples who have lost their natural fertility due to weakness in the main factors of child formation. In general, uterine replacement therapy is divided into two main groups, partial and complete replacements, based on the origin of the
egg used for embryo development. The purpose of this study was to evaluate the medical, social, legal ethical and religious aspects of surrogacy.

**Material and Method:** The surrogacy is the practice whereby one woman carries a child for another with the intention that the child should be handed over after birth. It was fundamentally analyzed analytically. The study was systematically collected and evaluated using multiple articles searches from 1995 to 2019 from various PubMed, Scopus, Web of Science and Google scholar sites.

**Result:** surrogate procedures in some countries such as Sweden and Germany are illegal and in others such as France, Denmark, the Netherlands, some US states and Australia have specific regulations. It seems that what has led some communities to prohibit and cease the use of uterine replacement technology for ethical cultural reasons is to ignore the limitations of medical necessity and extend it to non-medical cases. This attitude and action provided the ground for commercializing the use of third-party IVF methods through the widespread involvement of intermediaries in creating emerging and lucrative markets, and in a way considered the abuse of human dignity and the promotion of slavery. In our country, the consensus of the authorities on the laboratory approval of infertile couples requesting surrogate couples and the refusal of the uterine lady to refuse to deliver the resulting child to the infertile couple after delivery.

**Conclusion:** Do surrogacy in addition to the evidence, Professional counseling needs to be done before the process to the surrogacy should be provided.

**Keywords:** Assisted reproduction; gestational carrier; intended parent; surrogacy; surrogate mother

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**Domestic Violence and the Dimensions of Family Planning:**
**A Systematic Review**

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**Introduction:** Partner violence is a public health concern in the world and one third of women in the world experience domestic violence. Violence can directly affect women’s reproduction. Violence against women has adverse effects on public health and fertility, including: miscarriage, unwanted pregnancy, sexual dissatisfaction, sexually transmitted diseases. The purpose of this review study was to investigate the relationship between sexual partner violence and different aspects of family planning.

**Method:** This study is a systematic review study. In this review study, electronic databases including, Scopus, ProQuest, PubMed, and Google Scholar were searched for articles published in English between 2010 and 2018. The keywords used for searching articles were domestic violence, reproductive, sexual health and family planning.
Result: After completing the search and evaluating the articles using checklists, 20 studies were examined. In these studies, the lowest prevalence of violence was related to physical violence and the highest was related to psychological violence. Studies have examined the relationship between different aspects of family planning and domestic violence. The relationship between violence and non-use of family planning or condoms in the eight studies, Use of invalid or traditional family planning methods in two studies and Spouse or family opposition for use of family planning methods in three studies was meaningful.

Conclusion: A systematic review of these studies reveals the close relationship between domestic violence and important aspects of family planning that expresses the importance of preventing domestic violence in order to promote reproductive health and therefore the health of the whole community.

Key words: domestic violence, reproductive, sexual health, family planning.

The Impact of Maternal Levothyroxine Treatment on the Neurodevelopment of Offspring Born to Mothers with Thyroid Dysfunction, A Systematic Review

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Introduction: The thyroid hormones have an important effect on the development of central nervous system before and after birth. Several studies have evaluated the association between maternal thyroid dysfunction during pregnancy and neurocognitive development in offspring. The important role of maternal thyroid hormones in all stages of the brain development in children is undeniable; despite that, there is still insufficient evidence on the beneficiary effect of the levothyroxine treatment in pregnant women with thyroid dysfunctions in terms of neurodevelopmental outcomes of their offspring. The present systematic review was conducted to evaluate the effect of treatment with levothyroxine in pregnant women with thyroid dysfunctions on neurocognitive development in their offspring.

Methods: In this systematic review, the PubMed [including Medline], Web of Science, Wiley, Google Scholar, Science Direct and Scopus databases were searched with appropriate keywords for identifying and retrieving all English articles published up to March 2018 on the effects of maternal levothyroxine treatment on the neurocognitive development of offspring born to mothers with thyroid dysfunction. The search was performed based on the following keywords: (“Levothyroxine” OR “LT4” OR “L-thyroxine” OR “treatment”) AND (“maternal” OR “pregnancy”) AND (“development”
OR “neurodevelopment”) AND (“offspring” OR “children”). This study used a series of randomized clinical trials, cohort, case-control studies and case report. Of the 343 related articles in the initial search, 9 eligible studies were finally evaluated.

Results: From 9 studies in this field, seven studies showed that administration of levothyroxine in mothers with thyroid dysfunctions had no significant effect on children’s cognitive function or other neurodevelopment indicators; only a case report and a study on 13 pregnant women and their children showed that treatment improved the neurocognitive indicators in their offspring.

Conclusions: Current systematic review revealed that treatment with levothyroxine in pregnant women with thyroid dysfunctions has no significant beneficiary effect on neurodevelopment of their offspring.

Keywords: Thyroid dysfunction, hypothyroidism, Pregnancy, neurodevelopment, offspring, Levothyroxine.

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The Prevalence of Thyroid Dysfunction during Pregnancy, A Population-Based Study

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Background: Thyroid dysfunctions are frequently observed during pregnancy. The maternal thyroid dysfunction is associated with adverse outcomes such as miscarriage, preterm delivery, preeclampsia, postpartum hemorrhage in mother whereas increased risk of impaired neurological development in fetus. This prospective population based study was conducted among pregnant women in the first trimester of pregnancy to estimate the prevalence of thyroid dysfunctions.

Methods: A total number of 2404 pregnant women were selected with population based cluster sampling in Shahid Beheshti University prenatal care centers. Overnight blood samples were collected at the first prenatal visit to measure serum levels of thyroid stimulating hormone (TSH), Thyroxine (T4), T-uptake and thyroid peroxidase antibody (TPOAb). TSH and total T4 were assayed by immunoradiometric and radioimmunoassay method, respectively. T-uptake and TPO-Ab were measured by enzyme linked immunosorbent assay. Women with baseline concentrations of TSH 0.1-4 mIU/L, FT4I 1-4.5 and TPO<50IU/ml were considered euthyroid TPOAb-. Overt hyperthyroidism was defined as TSH levels<0.1mIU/L and FT4I>4.5. Overt hypothyroidism was defined as TSH>10mIU/L or TSH levels>4 mIU/L and FT4I<1. Subclinical hypothyroidism was defined as normal FT4I (1-4.5) despite elevated TSH
(4-10mIU/L). Subclinical hyperthyroidism was defined as normal FT4I (1-4.5) despite reduced TSH (TSH<0.1mIU/L). TPOAb >50IU/ml was considered as TPOAb positivity. 

**Results:** The results showed that 78.9% (n=1897) of the participants in this study had normal thyroid function, while 21.1% (n=507) of them had thyroid dysfunction. Frequencies of overt hyperthyroidism and hypothyroidism were 0.7% (n=18) and 4.5% (n=108), respectively. In this study11.4% (n=274) of the pregnant women had subclinical hypothyroidism. The prevalence of TPOAb+ were 9.5% (n=229) and 4.5% (n=107) of pregnant women were euthyroid and TPOAb.

**Conclusion:** The present study demonstrated thyroid dysfunctions was common in pregnancy and the prevalence of them was 21.1%. This also emphasized the importance of screening pregnant women for thyroid dysfunction to prevent both maternal and fetal morbidity.

**Keywords:** Thyroid, dysfunction, prevalence.

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**The Effects of Pelvic Floor Muscle PFM Training on Sexual Function of Postmenopausal Women**

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**Backgrounds:** Sexual problems are of major concern during menopause, and have a negative impact on quality of life among postmenopausal women. These issues could be counteracted with appropriate interventions, and pelvic floor muscle (PFM) training could be one of them. This study aimed to investigate the effects of pelvic floor muscle (PFM) exercises on sexual function in postmenopausal women.

**Material and Method:** The study was a randomized clinical trial conducted among 97 postmenopausal women, aged 40 to 60 years, who were residents of Chalous and Noshahr, Iran. The participants’ baseline sexual functions were assessed using the Female Sexual Function Index (FSFI) questionnaire over the course of face-to-face interviews. They were then randomly designated to two groups: (1) the intervention group, which received specific instructions on PFM exercises and was followed up on a weekly basis; and (2) the control group, which received general information on menopause. After 12 weeks, the sexual functions of the participants were reassessed. Data were analyzed using the statistical analyses of t-test, chi-square, Mann–Whitney U-test, ANCOVA, and multiple linear regression.

**Result:** No significant difference was initially observed between the two groups in terms of demographic and socioeconomic characteristics and total scores of FSFI. After the intervention, however, the scores of arousal, orgasm and satisfaction were significantly higher in the intervention group (3.10, 4.36, and 4.84 vs. 2.75, 3.89, and 4.36 respectively; P < 0.05). PFM exercises were a predictive factor for the variation
in the scores of satisfaction. Comparing to the control group, the intervention group considered their education more effective in improving the conditions of menopause and sexual relations.

**Conclusion:** PFM exercises have the potential to improve the sexual function in certain domains (arousal, orgasm, and satisfaction) among postmenopausal women and are thus suggested to be included in healthcare packages designed for postmenopausal women.

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**The Impact of Musculoskeletal Disorders on Sexual Function among Postmenopausal Women**

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**Backgrounds:** Medical conditions could influence sexual function. Since chronic medical conditions capable of affecting sexual function are common during menopause, it is crucial to identify the medical factors that influence sexual function during this period of women’s lives. The aim of this study was to determine the relationship between musculoskeletal disorders and sexual function in postmenopausal women.

**Material and method:** This is a cross-sectional study of 405 postmenopausal women, aged 40 to 65 years, who were residents of the cities of Chalous and Noshahr, Iran. A multistage, randomized sampling was carried out, and data was collected through interviews using the Female Sexual Function Index (FSFI) questionnaire and a self-administered questionnaire. The data were analyzed using t-test and multiple linear regression.

**Result:** Among the participants, 10% were suffering from musculoskeletal disorders. The mean score in the pain domain was significantly lower in the participants with musculoskeletal problems (3.89 vs. 4.44; P=0.041). The multiple-regression analysis showed that musculoskeletal disorders were a predictive factor for the pain domain, so that the participants with musculoskeletal disorders had a score of pain 0.6 unit lower (worse) than those without such problems (P=0.032).

**Conclusion:** In postmenopausal women, musculoskeletal problems have a negative effect on the pain domain of sexual function. Given that the risk of sexual dysfunction and musculoskeletal disorders increase during menopause, sufficient attention needs to be paid to this matter in any effort to improve postmenopausal women’s health.
Evaluation of Women's Satisfaction with the Ministry of Health's Performance in Relation to Fertility Management and Relationship with Individual Factors

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Introduction: the possible consequences of a sharp decline of fertility, community leaders and policy makers are forced to revise policies encouraging the population has birth families. The aim of this study was to determine the satisfaction of the people of childbearing government policies in recent years.

Materials and Methods: This descriptive cross-sectional study was performed on 300 women on reproductive age (18-45 years) referring to Karaj health centers in 2012 using cluster random sampling method. Data were collected using a questionnaire and data analysis using Chi-square test (P = 0.05) and SPSS software (version 20).

Results: Of the 300 women with a mean age 35 years, 62% of women (186) did not agree to limit access to contraceptives. 48% of women (144) report inadequate information about contraception. Intelligence sources in 37% of patients were families (111) and only 9% (27) were medical staff. Economic problems in 83% of patients are considered to be the greatest cause of unwillingness to fertility. Satisfaction with education, age, marriage age, family income and level of unwanted pregnancy correlated (p<0.05) and had no significant relationship with contraception method (p>0.05).

Conclusion: Dissatisfaction with family planning policies has been seen in almost half of the women and the lack of awareness and gaining information from invalid sources are still exist in Iranian women. In order to encourage the of the birth's growth, it is necessary first to create the welfare infrastructure and then, with proper education and counseling, allowed families to awareness raise their children's deliberately.

Keywords: satisfaction, fertility management, individual factors, management

Study of Maternal Health Social Management in Japan and Determine Its Application Components for Iran

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Background: The rate of maternal mortality in developing countries is still 15 times more than developed countries. Maternity health care can reduce infant and maternal mortality.
The aim of this study is to investigate maternal health social management in a developed country in Asia to extract the important factors.

**Materials and Methods:** This is a descriptive - analytical study. Country studied is Japan. Management aspects in this study include: human resources, government policies and support, financial resources and maternal service package and using research cards have been collected from reliable available sources. The questionnaire survey of experts has been determined important factors using exploratory factor analysis.

**Results:** According to the results, factors: financial resources, information and support packages - equipped service facilities staff - program staff - standard performance - pregnancy quality care - local services - local services maternal security - decentralized management wives participation financial resources, information and support packages identified with the greatest impact on the service management with special value 9/26.

**Conclusion:** More attention to the funding, support and local services in maternal social management may have a positive impact on the promotion of maternal health services in Iran.

**Key words:** Maternal social management, Maternal Health, Japan.

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**Comparative Study of the Effect of Exercise Education Through Multimedia and Pamphlet on the Quality of Sexual Life and Sexual Function of Postmenopausal Women in Quchan**

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**Backgrounds:** Menopause brings in a whole lot of changes in the body of women and in most of them leads to troublesome symptoms namely vasomotor, genitourinary problems like vaginal dryness, recurrent urinary tract infections, and weakness of connective tissue supporting the pelvic viscera. All these short and medium-term effects influence the quality of life of these women adversely. It is imperative to plan a comprehensive health program for them; including exercise. The aim of this study was to evaluate Comparative study of the effect of exercise education through multimedia and pamphlet on the quality of sexual life and sexual function of postmenopausal women.

**Material and Method:** A randomised clinical trial was conducted among 70 Iranian, aged 45 to 60 years, that were referred to Social Security Clinic in Quchan. Their sexual function statuses were assessed using the sexual quality of life-female...
(SQOL-F), Female Sexual Function Index (FSFI) questionnaires. Initially, the researcher explained the menopause, symptoms and effects, pelvic floor muscle, quality of sexual life, sexual dysfunction and exercise plane in 45 minute for all participants. After obtaining written informed consents, they were randomly assigned to two groups: exercise education through multimedia and pamphlet. Then, initial assessment was compared to the follow-up data. Data were analyzed by conducting the independent- and the paired sample tests, the Chi-square, vikakson and mann-whitney tests.

**Result:** The overall mean score of the quality of sexual life in group of multimedia were (P=0.001) and in group of pamphlet (P=0.002). That were significantly risen among two group. The mean score of the Sexual Function in group of multimedia were (P=0.004) and in group of pamphlet (P=0.003). That were significantly risen among two group. However, there was no statistical difference between two groups (P= 0.968).

**Conclusion:** The findings from this study suggest that multimedia and pamphlet had similar effects on the quality of sexual life of postmenopausal women.

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**Comparative Study of the Effect of Exercise Education Through Multimedia and Pamphlet on the Quality of Sexual Life of Postmenopausal Women in Quchan**

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**Backgrounds:** Women's sexual lives continue well into the menopausal years and beyond; however, the impact of menopause on the quality of that sexual life has not been comprehensively studied in the medical literature. The aim of this study was to evaluate Comparative study of the effect of exercise education through multimedia and pamphlet on the quality of sexual life of postmenopausal women in Quchan, Iran.

**Material and Method:** A randomised clinical trial was conducted among 70 Iranian postmenopausal women, aged 45 to 60 years. Their sexual function statuses were assessed using the sexual quality of life-female (SQOL-F) questionnaires. After obtaining written informed consents, they were randomly assigned to two groups: exercise education through multimedia and pamphlet. Then, initial assessment was compared to the follow-up data.

**Result:** The overall mean score of the quality of sexual life after intervention in group of multimedia were (79.07±11.33) and in group of pamphlet (80.52±8.27). That were significantly risen among two group. However, there was no statistical difference between two groups in (P= 0.968).
Conclusion: The findings from this study suggest that multimedia and pamphlet had similar effects on the quality of sexual life of postmenopausal women.

The Role of the Mortality and Morbidity Conference in Promoting Obstetrics and Gynecology Activities

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Backgrounds: The medical error is the sequence of an event in large system. The obstetrics and gynecology is one of the most sensitive areas of medicine. Preventing mistakes in addition to providing maternal and infant health will also prevent the injury of the medical team. One way to prevent it is through mortality and morbidity conferences (MMC). The MMC is a session in which members of the medical team participate in a deliberate and unannounced evaluation of the adverse consequences of a case to improve the quality of medical interventions by preventing medical errors. The purpose of this study is to evaluate the structure of this program and its role in promoting the activities of obstetrics and gynecology.

Materials and Methods: This literature review was conducted by reviewing articles published at Pub Med-Scopus-ISI databases in 2017-2019.

Result: This program is effective in promoting obstetrics and gynecology activities for the following reasons: Systemic approach to medical error, training without harm to the patient, without interference in the legal process of the case, without blaming, deep view, creating open, transparent and confidential space to discuss, audience participation, centralized error analysis Tips: Assign the suitable time, regular meetings, the proper selection of the case and the content of the meeting, the detailed discussion, no mentioning the characteristics of the patient and those involved, provide conclusion and ways to avoid repeating the error in Written form, the presence of midwifery and medical students.

Conclusion: Given the importance of reducing medical errors in the field of obstetrics and gynecology, the use of MMC for students and residents can reduce the incidence of errors and ultimately to promote the services provided to mothers and infants.
The Effect of Group Counseling Based on Friesh Theory on Quality of Life in Mothers with High Risk Pregnancy

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Background: Pregnancy is one of the enjoyable and evolutionary aspects of women’s life. In addition to being enjoyable, pregnancy is usually stressful. Counseling is one of the most appropriate interventions for decrease worries and anxiety. Therefore, the present study aimed to determine the effectiveness of group counseling based on the Friesh theory (quality of life model) on mothers’ depression in high risk pregnancy.

Methods: A randomized clinical trial was conducted on 104 high-risk pregnant women aged of 14 to 22 weeks and depression score of 24 to 85 in 97 at Shahroud University of Medical Sciences. The intervention groups received 8 sessions of group counseling based on the Friesh theory (quality of life) and the control group received only routine care in the health center. One month after the intervention group counseling was completed. Data were analyzed by SPSS software version 22 using t-test, chi-square, repeated measure ANOVA. A P value less than 0.05 was considered statically significant.

Results: The mean score of quality of life before the study was in intervention group (48/53) and in control group (52/76). These values after intervention in intervention group (55.73) and control group (40.53), respectively. One month after intervention in the intervention group (54.36) and in the control group (39.94). Analysis of variance with repeated measures showed that quality of life was significantly different in the intervention group after intervention and one month follow up (P <0.05).

Conclusion: Group counseling based on the Friesh theory (quality of life) is an effective way to improve quality of life in mothers with high risk pregnancy. Referral of these mothers to midwifery counselors is recommended for conducting and holding group counseling sessions based on the Frey Theory with the aim of promoting mental health and improving the mental and psychological status of this group of mothers.

Keyword: quality of life, High Risk Hospital, Quality of life Model, Friesh Theory, Group counseling
The Effect of Group Counseling Based on Friesh Theory on Depression in Mothers with High Risk Pregnancy

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Background & Aim: Pregnancy is stressful even in the best of circumstances for a periodic mother, and when stress is associated with pre-existing medical problems or pregnancy complications, stress and anxiety increase. Therefore, the present study aimed to determine the effectiveness of group counseling based on the Friesh theory (quality of life model) on mothers' depression in high risk pregnancy.

Methods: A randomized clinical trial was conducted on 104 high-risk pregnant women aged of 14 to 22 weeks and depression score of 10 to 24 in 97 at Shahrood University of Medical Sciences. The intervention groups received 8 sessions of group counseling based on the Friesh theory (quality of life) and the control group received only routine care in the health center. One month after the intervention group counseling was completed. Data were analyzed by SPSS software version 22 using t-test, chi-square, repeated measure ANOVA. A P value less than 0.05 was considered statically significant.

Results: The mean score of depression before the study was in intervention group (17/89) and in control group (14/10). These values after intervention in intervention group (5.96) and control group (14.56), respectively. One month after intervention in the intervention group (6.65) and in the control group (13.02). Analysis of variance with repeated measures showed that depression was significantly different in the intervention group after intervention and one month follow up (P <0.05).

Conclusion: Group counseling based on the Friesh theory (quality of life) is an effective way to improve depression in mothers with high risk pregnancy. Referral of these mothers to midwifery counselors is recommended for conducting and holding group counseling sessions based on the Frey Theory with the aim of promoting mental health and improving the mental and psychological status of this group of mothers.

Keyword: Depression, High Risk Hospital, Quality of life Model, Friesh Theory, Group counseling
Perceived Threats and Concerns of Women with Unplanned Pregnancy

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Backgrounds: Pregnancy is a pleasant process for a family, but unplanned pregnancy mostly perceived and understood as a challenging event in women life. Present study aimed to assess women’s perceived threats and concerns about an unplanned pregnancy.

Material and Method: Present cross-sectional study was performed among 230 women with an unplanned pregnancy referred to health care centers and gynecology clinics in Tabriz, Iran in 2017. Data were collected by interviewing and completing the perceived threats and concerns questionnaire. Descriptive testes (SD) were used for data analysis.

Result: The mean age of women participating in the study was 31.10 ± 6.75 and about two third of them had low-grade education. Mean (SD) of the perceived threat was 50/5±02/40 among women with an unplanned pregnancy which was higher than determined cut off. Subscales of the perceived threats were fear of parental responsibility, concerns about breaking the norms of society, fear of the difficulties and instability of personal and sexual life, deprivation of community presence and job continuity, physical and emotional negative consequences.

Conclusion: As present study results revealed, most of women with an unplanned pregnancy perceived threats in different dimension of their life’s, so there was necessity for counseling interventions for these women concerning perceived threats and provide appropriate solutions to address those threats.

Case Report: Successful Pregnancy Following Recurrent Implantation Failure with Clinical Laboratory Strategy

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In a treatment cycle of in vitro fertilization (IVF), 15% of the oocytes are immature and present in germinal vesicle (GV) phase. Rarely happens, more than 50% of the oocytes of one patient are immature per cycle. It is an enormous challenge to select the kind of treatment for infertility in these patients. The patient was a 35-year-old woman who had primary infertility for 10 years. She had undergone 6-time unsuccessful infertility treatment cycles of IVF during the treatment. In these cycles, more than 50% of the oocytes were immature and in GV phase. In this matter, we
developed a coordinated clinical-embryology laboratory therapeutic protocol for the patient by studying the patient's medical records of unsuccessful cycles. The development of a special and coordinated clinical-embryology laboratory protocol was efficient, as compared with the commonly used independent clinical and laboratory protocols, to achieve the best outcomes in such patients.

**Keywords:** Assisted Reproductive Techniques, Infertility, In Vitro Fertilization

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**A Systematic Overview Of The Role Helicobacter Pylori On Polycystic Ovary Syndrome**

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**Background:** Polycystic ovary syndrome (PCOs) is one of the most common endocrinopathies that affects about 6-8% of women of reproductive age. Helicobacter pylori is the most common pathogenic bacteria in the world, that Approximately half of the population worldwide has H.pylori infection. Chronic systemic inflammation has been considered to play a role in the development of PCOs. Helicobacter pylori has been shown to lead to chronic systemic inflammation. Therefore, the present study was to investigate with the aim of systematically reviewing the studies on possible link between H.pylori and PCOs.

**Material and Method:** In this systematic review was performed using the key words Helicobacter pylori AND PCOs in Scopus, PubMed, ScienceDirect, Google Scholar, Iranmedex databases, Until March 2019, and finally 21 articles were examined in this regard.

**Result:** Helicobacter pylori is recognised as the most important etiological agent for chronic antral gastritis in humans, and probable cofactor in the development of gastric cancer, MALT-lymphoma, variety of extradigestive disorders including cardiovascular, skin, rheumatic, and respiratory diseases. The activation of inflammatory mediators by H.pylori seems to be the common pathogenetic mechanism underlying the observed associations. Helicobacter pylori may be implanted in the female reproductive system due to the similarity of gastric and vaginal cells and may be transmitted sexually, using the human female vagina as a reservoir for transmission. In some studies, increased levels of PCOs and decreased total antioxidant status were found H.pylori-infected patients. Therefore, there is a possible association between H.pylori seropositivity and PCOs.

**Conclusion:** Based on the fact that in women with PCOs, the hypothesis of the role of Helicobacter pylori can be suggested as a risk factor for this disease, treatment H.pylori infections is required for decreasing the oxidative stress, which synergistically brings about an appropriate correction of PCOs soon in these patients.

**Keywords:** Polycystic ovary syndrome, Helicobacter pylori, Antioxidant.
The Possibility Of Women's Fertility With Female Sperm From Bone Marrow Stem Cells: A Review Article

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Background: Infertility is a major concern for community health worldwide. In the treatment of infertility, various therapies such as mesenchymal stem cells (MSCs) are used, Isolation and differentiation of germ cells from different cell sources such as bone marrow using morphogens is an efficient method for infertility research. This study reviews the possibility of women’s fertility with female sperm from bone marrow stem cells.

Material and Methods: A Review Article was performed using the following keywords: Mesenchymal stem cells, Sperm, Bone marrow in Medline, ISI, Pubmed, Cochrane Library, Science Direc databases from 1979 to 2019. A total of 16 relevant articles were found and their full text was reviewed.

Results: Women's fertility is scientifically and theoretically possible through their own stem cells. By producing sperm from bone marrow of female, and combining it with the oocyst, zygote is creating. In this way, the woman can be fertilized using his fetal stem cell, which is converted in to sperm. Of course, in the produced sperm by the cell division in the stem cell, a new recombinant occurs in the sexual cells, and recombination occurs. In this way, the created zygote, despite the preservation of genetic material, has a new recombination, and the new organism is not quite like similar to her mother.

Conclusion: With the help of a new technique for producing sperm from women's bone marrow stem cells, new methods of infertility treatment are available and it is a big success, but some believe that the possibility of converting female bone marrow into sperm will result in fading out of men's role in the fertility process.

Keywords: Mesenchymal stem cells – Sperm - Bone marrow.

Shift Work and Metabolic Syndrome: A Cross-Sectional Study in Reproductive Age Women

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Introduction: Shift work during reproductive age can be a risk factor for metabolic syndrome. This study evaluated the relationship of shift work with metabolic syndrome during reproductive age.
**Poster Presentations**

**15th International Congress on Obstetrics & Gynecology 2019**

**Methods:** This multi-center cross-sectional correlational study was conducted from September 2017 to May 2018. Participants were 419 female shift and day workers who were purposively recruited to the study from three central cities of Mazandaran province, Iran (i.e. Amol, Babol, and Ghaemshahr). To diagnose metabolic syndrome based on the National Cholesterol Education Program Adult Treatment Panel III guidelines, we measured participants’ anthropometric measures, blood pressure, and levels of serum triglyceride, high-density lipoprotein, and fasting blood sugar. Data were analyzed through the independent-sample $t$, the Chi-square, and the Fisher’s exact tests as well as the logistic regression analysis.

**Results:** Among 419 participants, 28 were excluded during the study. The total prevalence of metabolic syndrome was 16.3% and its prevalence among shift workers ($n = 196$) and day workers ($n = 195$) was respectively 17.3% and 14.9%. The most prevalent components of metabolic syndrome were low serum level of high-density lipoprotein and abdominal obesity. After adjusting the effects of potential cofounders (such as age, work experience, number of parities, sleep quantity and quality, and occupational stress), the logistic regression analysis revealed that the odds of metabolic syndrome among shift workers was around two times greater than day workers (odds ratio: 1.83; 95% CI: 0.088–3.79), though this relationship was statistically insignificant ($P = 0.10$).

**Conclusion:** Shift work is associated with greater risk of metabolic syndrome for women. The most important components of metabolic syndrome are low serum level of high-density lipoprotein and abdominal obesity which are attributable to limited physical activity and high occupational stress. The risk of metabolic syndrome among female shift workers of reproductive age can be reduced through strategies such as awareness raising, dietary educations, and provision of physical activity facilities at workplace.

**Keywords:** Metabolic syndrome, Shift work, Female shift workers, Reproductive age

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**Evaluation of GSTP1 Rs 4986949 Polymorphism Dispersion in Patients with Breast Cancer Refered to the Clinics of Mazandaran University of Medical Sciences**

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**Background and Purpose:** Breast cancer is one of the most costly diseases due to its high prevalence and its social and economic consequences are very important for our society. on the other hand, women as mothers, one of the organ of the family, are
involved in society, and this disease effects people of different ages with maximum personal and social activity, which, if not diagnosed and treated in a timely manner, without exception, the suffering person will die from the disease. Glutathione S-transferases, the gene family, are a multi-functional enzyme that plays a key role in the detoxification of electrophilic compounds such as carcinogens, peripheral toxins, drugs and nutrients, as well as in intracellular transmissions and oxidative stress protection. Research has shown that, in addition to hormonal factors, genetic factors also play an important role in the development of Breast cancer, and since the GSTP1 gene is an enzyme encoder and various gene polymorphisms affect the detoxification process, this study aimed to investigate the evaluation of GSTP1 (rs4986949) polymorphism dispersion in patients with breast cancer referred to the clinics of Mazandaran university of Medical Sciences.

Materials and Methods: in this case-control study, 79 clinically diagnosed breast cancer patients and 54 age-matched healthy individuals were included. 5 cc peripheral blood were collected from people with breast cancer and healthy subjects in a tube containing EDTA. Genomic DNA was extracted using Salting-out method and finally genotypic polymorphism was evaluated using PCR-RFLP.

Results: The frequency of genotypic GT (heterozygote mutant) in comparison with the genotypic frequency of GG (normal homozygote) was significantly different among the population (OR=5.08, p=0.0020). It can be said that T allele, probably five times the G allele, increases the risk of developing a disease. Also, due to the frequency of genotypic mutated heterozygote and mutant homozygote (GT+TT) in comparison with the genotypic frequency of normal homozygote (GG), there was a significant difference (OR=5.08, p=0.0020). Using HaploReg software (v 4.1) in silico analysis showed that the rs4986949 polymorphism is located in a DNase.

Conclusion: The results suggest that patients with Asp 147Tyr have an increased risk for breast cancer and this polymorphism may be a candidate marker for predicting individuals who are at higher risk to breast cancer. and as a result genotypically, polymorphism of GSTP1 (rs4986949) is probably related to breast cancer.

Keywords: gene GSTP1 (rs4986949), polymorphism, Breast cancer.

Relationship Between Serum Interferon Gamma Level and CD8 and NK Immune Cells in women with Metastatic Breast Cancer in Urmia

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Breast cancer is the most common type of cancer among women worldwide. Interferon-gamma is a type of protein that host cells release in response to a pathogenic invasion that stimulates the immune system. NK cells are also part of the immune system’s lymphocytes that target cancer-infected cells. Serum levels of interferon-gamma and CD8 and NK immune cells in women with metastatic breast cancer.
Materials and Methods: Our study population consisted of 5 patients with metastatic breast cancer and 5 women as control group. Serum levels of cytokines by ELISA and percentage of cells by flow cytometry using double antibodies Colors were determined against CD8 and CD3 / CD16 markers. The data were analyzed using SPSS V.24 and Anova test.

Results: Serum levels of interferon-gamma in the patient group were equal to (0.24), which was significantly increased compared to the control group (P = 0.04) (CL = 1.19-3.71-OR = 95% Also CD4 lymphocyte percentage in blood Peripheral group of patients was equal to (0.22) which had a significant relationship with disease incidence (P = 0.05) (CL = 1.22-3.95-OR = 95%) but NK cell level was significantly different from group No control (P > 0.007).

Conclusion: Based on the obtained results, interferon-gamma and CD8 cells have a significant relationship with the incidence of the disease, which can be used as prenatal factors.

Keywords: Breast Cancer - Polymorphism - Interferon Gamma - CD8 - NK

Comparing the Effects of Two Methods of Group Education and Peer Education on Sexual Dysfunction of Menopausal Women

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Backgrounds: Sexual problems could cause severe personal discomfort and affect interpersonal relationships. Considering that selection of appropriate methods has an important role in success of the education, this study was conducted to compare the effects of two methods of group education and peer education on sexual dysfunction of menopausal women.

Material and Method: In this randomized controlled trial, 108 menopausal women were allocated into three groups in the health centers of Isfahan, Iran. After educating four menopausal women, educational sessions were conducted by them for the participants(36women) in the peer groups. Two educational sessions were conducted by the researcher in the group education. The control group received no intervention. Before and 1 month after the intervention, female sexual function index was completed by the participants. Data were analyzed using descriptive and inferential statistics.

Result: The total mean score of sexual function and its domains in the peer education and group education groups was significantly higher than the control group after the intervention (F2, 93 = 23.52, p < 0.001); but the difference between the peer education group and the group education group was not statistically significant.
**Conclusion:** Both methods of peer education and group education have been effective in improving the sexual function of menopausal women. So, considering the advantages of peer education such as its low cost, affordability, and no need to train specialized individuals, its implication in educational programs for menopausal women is recommended.

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**Androgen Excess During Fetal Life Affects Rats Cardiac Function in Adulthood**

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**Backgrounds:** Developmental programming is a complex process whereby the hormonal, nutritional, and metabolic disturbances occurring during the critical period of intrauterine development lead to alterations in the developmental trajectory of the growing fetus. The origin of cardiovascular diseases may arise from suboptimal intrauterine environments such as disturbed hormonal milieu. We aimed to compare the effects of prenatal androgen exposure (PAE) on heart basal hemodynamic parameters and tolerance to ischemia/reperfusion (I/R) injury among PAE adult female and male rats.

**Material and Method:** Pregnant Wistar rats in the experimental group (n=8) received 5 mg of testosterone by s.c. injection on the 20th day of pregnancy and controls (n=8) received solvent. Female and male offspring experimental (n=16) and control (n=16) rats were kept with ad libitum food and water. In adulthood, the hearts of rats were isolated and perfused in a Langendorff apparatus, values of the hemodynamic parameters including: left ventricular end-diastolic pressure (LVEDP), left ventricular systolic pressure (LVSP), left ventricular developed pressure (LVDP), heart rate (HR), rate pressure product (RPP) and peak rates of positive and negative changes in left ventricular pressure (±dp/dt) were continuously recorded before (baseline) and after myocardial I/R, using a power lab system.

**Result:** At baseline: PAE adult males demonstrated significant higher amount of LVSP, LVDP, RPP and ±dp/dt, compared to their controls and PAE adult females (p<0.05), while PAE adult females showed no significant differences compared to their controls. After I/R: In PAE adult males, LVSP, LVDP, RPP and ±dp/dt had significant decreasing trends per phases after I/R, compared to their controls and PAE females, while these decreasing trends were not statistically significant in PAE adult female rats vs. their controls.
Conclusion: The impact of prenatal androgen exposure on adulthood cardiac function and tolerance to I/R is gender dependent, which may be partly explained by different cardiac effects of hyperandrogenism in males versus females. After prenatal androgen exposure, the baseline hemodynamic parameters of the hearts of adult males are increased; although they had less tolerance to I/R, findings however not observed in females.

The Effect of Exercise on Some Aspect of Prenatal Outcomes

Firouze Nourimand
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Backgrounds: Many studies continued to show effect of Exercise during pregnancy is beneficial for mother and fetus health that promote prenatal outcome. This review attempt to demonstrate exercise beneficial in pregnancy from other view.

Material and Method: This study reviewed 30 articles from 2010 to 2018 with search in reliability web site as PubMed, Web of science, Science direct, Google Scholar, Up to date and Scopus. Medline and Embase. The Key words which used in research including healthy pregnancy, prenatal and postnatal care with using exercise and vaginal delivery. Studies didn't have this words in title excluded from review.

Result: These articles recommend that all pregnant women without contraindications engage in ≥30 minutes of moderate exercise on a daily basis. Moderate exercise usually increased perceived physical and mental energy and likelihood of normal delivery and usually decreased perceived physical and mental fatigue. “Sufficient exercise” means they achieved at least 150 min of exercise per week (analogically 20-30 min per day on most or all days of the week) that it reported higher quality of life during each trimester of pregnancy and in the postpartum follow-up. In particular researcher pointed that if exercise takes place during the second and third trimesters reduce the risk of cesarean delivery, decreased durations of labor (the second stage) that in multiparous women is more than primeparuse. In addition, neonatal health indicators specifically increase cognition and intelligence of neonate are better in these mothers.

Conclusion: Moderate exercise during pregnancy is effective for improving feelings of energy and decreased fatigue. It may be associated with good pregnancy outcomes. Therefore pregnant woman should be advised to exercise during pregnancy and postpartum time under the consult of health care provider.
Screening and Prevention of Cervical Cancer

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Backgrounds: Cervical cancer is the fourth most common female cancer affecting women with 528000 new cases every year. Almost 70% of the global burden occurs in less developed countries. These regions with higher rates of advanced stage disease leading to higher death rates.

Material and Method: This study reviewed Fifty-three articles from 2013 to 2018 with search in reliability web site as PubMed, Web of science, Science direct, Google Scholar, Ovid/MEDLINE, EMBASE, up to date and Scopus.

Result: The findings of this study show that there is a relationship between marital status, marriage age, and age of first pregnancy, smoking, consumption of oral contraceptive pills, multiple sexual partners, family history, multiparty, and the prevalence of cervical cancer. Women with higher educational levels and higher income had better awareness of cervical cancer and more willing to accept regular Pap smears. Personal barriers included lack of knowledge, insurance coverage, high cost of care have an important role to do screening. In developed countries, cytology-based services have been the basis of cervical cancer screening. Recently liquid-based cytological tests have gained wide acceptance and also replaced conventional cytology in routine screening, also it can perform molecular assays of HPV.

Conclusion: Prevention efforts should be focused on improving social awareness strategies to reduce risk factors and improving the strength and quality of counselling. To improvement the cervical cancer outcomes will require advocacy efforts at the national leaderships. Annual screening still remains the most cost-effective preventive strategy. Our results showed that the predictors of belief in women’s Pap smear screening and HPV vaccination is a major strategy for preventing cervical cancers.

The Effect of Individual Counseling on Pain Quality in Women with Cyclic Mastalgia a Clinical Trial

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Backgrounds: Due to the high prevalence of cyclic mastalgia and disagreement about its therapeutic methods, this study aimed to investigate the effect of individual counseling on the quality of pain in women with cyclic mastalgia.

Material and Method: This study was a randomized controlled trial that was conducted in 2017 on eligible women with cyclic mastalgia that they had referred to health centers in Karaj. The subjects were randomly assigned to two intervention and control groups. Intervention was conducted in four individual counseling sessions. With a special visual analog scale for pain and cardiff’s breast pain chart, cyclic
mastalgia was diagnosed. With the McGill Pain quality questionnaire, pain was assessed before and after the consultation. T-test and ANCOVA were used to examine the means of pain quality for before and after of intervention.

**Result:** Two groups in terms of age, marital status, educational level, occupation, spouse’s education, husband’s job, history of lactation, history of surgery, or breast sampling, history of benign breast disease, history of nipple secretion breast, history of breast injury, were no significant differences. After the intervention, comparison of the McGill mean score test between the two groups of intervention and control in all of pain dimensions, showed a significant difference (P=0.001).

**Conclusion:** The study showed that counseling can lead to improvement of pain quality indices in women who are affected. As a result, counseling can be suggested as a suitable treatment for mild to moderate pain.

* * *

**The Effect of Individual Counseling on the Rate of Maternal Involvement in Decision Making in the Treatment Process Clinical Trial**

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**Backgrounds:** Due to the high Sensitivity of pregnancy and the vulnerability of mothers during this period adds to the importance of their participation in clinical decisions. Therefore, this study aimed to investigate the effect of individual counseling based on education on the participation of pregnant women decision making in the treatment.

**Material and Method:** This study was a randomized controlled trial that was conducted in 2018 on eligible women with that they had referred to Kosar maternity center in Qazvin. The subjects were randomly assigned to two intervention (95) and control (95) groups. Intervention was conducted in one 60-minute individual counseling sessions. With SDM-Q-9 Shared Decision Making questionnaire, was assessed. Independent t-test and paired t-test with a significant level of less than (0.05) were used to compare the mean scores in the two groups.

**Result:** The mean age of pregnant women in the intervention group was 28.6 and in the control group it was 27.5. Two groups in terms of age, Gestational age, education, parity, number of births, abortion, infertility, Participate in childbirth classes, Wanted pregnancy, were no significant differences. After the intervention, the comparison of the mean score of the participation of mothers in decision making between the two groups showed a significant difference (P = 0.001). Using the cut-off point method and the frequency distribution of participation rate of mothers in the experimental and control groups after intervention was significant.

**Conclusion:** Individual counseling increases the participation of pregnant mothers. As a result, it can be used as an effective and appropriate intervention to increase the participation rate of mothers.

**Key words:** Counseling, Patient Participation, Decision Making, Mothers.
**Effect of Metoclopramide Administration to Mothers on Neonatal Bilirubin and Maternal Prolactin a Randomized Controlled Clinical Trial**

**Backgrounds:** Jaundice is a common neonatal problem. This study was conducted to determine the effect of metoclopramide on neonatal bilirubin and maternal prolactin (primary outcomes) and milk volume (secondary outcome).

**Material and Method:** This triple-blind, randomized, controlled, clinical trial was conducted on 112 mothers. The participants were assigned to the intervention (metoclopramide) and control groups (placebo) using block randomization. Ten-mg metoclopramide and placebo tablets were taken by the participants three times a day. The intervention began in the first 2–10 hours after childbirth and continued until the fifth day. The mothers’ prolactin level was measured on the first morning after the intervention and on the sixth day (1 day after the intervention was over). Neonatal total bilirubin was also measured before the intervention and on the sixth day.

**Result:** After the intervention, the two groups did not differ significantly in terms of the mean neonatal indirect bilirubin ($P = 0.565$) and milk volume ($P = 0.261$), but the mean serum prolactin was significantly higher in the metoclopramide group compared to the placebo group (adjusted mean difference $37.95\%$ confidence interval $58.1–16.5; P = 0.001$).

**Conclusion:** Metoclopramide increased maternal serum prolactin but had no effects on neonatal jaundice. The insufficient numbers of studies on this subject mandate further research.

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**The Effect of Metoclopramide on Prolactin Levels in Breastfeeding Mothers A Systematic Review and Meta-Analysis**

**Backgrounds:** Exclusive breastfeeding is beneficial to not only infants, but also mothers. Since prolactin stimulates milk production, increasing its levels through dopamine antagonists, such as metoclopramide, may enhance milk production. However, the efficacy of this method should be further studied. Therefore, this systematic review sought to determine the effects of metoclopramide on prolactin levels in breastfeeding mothers.

**Material and Method:** In this systematic review study, International and National data bases such as PubMed, Google Scholar, Cochrane Library, Scopus, Web of Science were used.
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Sciences, SID, Magiran, and Iranmedex were searched for the keywords of lactation, breastfeeding, prolactin, metoclopramide and breast milk. Articles published during 1979 to 2016 in either English or Persian was selected. Thereview was limited to human clinical trials examining the effects of metoclopramide on mothers’ serum prolactin levels. Two authors independently evaluated the eligibility the studies and cases of disagreement were resolved through consensus.

**Result:** Five studies on the effects of metoclopramide on mothers’ serum prolactin levels were included in this systematic review. Based on their results, compared to placebo, two weeks of metoclopramide administration did not have significant effects on mothers’ serum prolactin levels (mean difference: 73.06; 95% confidence interval [CI]: -19.99 to 166.11). However, placebo-controlled studies showed significant changes in prolactin levels after using metoclopramide for three weeks (mean difference: 111.06; 95% CI: 1.93 to 220.20).

**Conclusion:** The result of meta-analysis showed that the use of 10 mg of metoclopramide three times a day for three weeks increased mothers’ serum prolactin levels after childbirth.

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**Relationship Between Intrauterine Insemination Time and Its Outcomes According to Islamic Hadiths**

**Ashraf Pahlevani Qomi 1, Reza Tabatabaei Qomi 2, Akram Heidari 3, Abbas Ali Vashiyan 4**

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4. Abbas Ali vashiyan: Quran & Sciences (Hygiene & Health) - Medical Law & Jurisprudence PHD, Al – Mustafa al – Alamieh university & Qom University of Medical Sciences, Qom, Iran.

**Background and Objective:** Intra Uterine Insemination is an infertility treatment method. With the question of when is the best time for fertilization? Considering the many hadiths about the time of fertilization, For the birth of a child with physical, mental and spiritual health this study examines the relationship between intrauterine insemination time of sperm and its results according to Islamic hadiths.

**Materials and Methods:** This retrospective study was conducted at Academic Center Education, Culture and Research using data from 298 existing cases from 2011 to 2015 under the sex selection intrauterine insemination and repeated abortion, primary infertility, anatomical abnormalities of the uterus and endocrine disorders, autoimmune and untreated genital infection are deleted. Data were gathered in this study using a researcher-made checklist with 32 questions including demographic questions and factors affecting pregnancy outcomes in terms of medical and hadiths. Data were analyzed in ver 20 SPSS software circuit.

**Results:** The findings of this study showed that there is a significant relationship between the time of performing IUI and the outcome of pregnancy test (p = 0.003)
Also, there was a significant relationship between the time of IUI and its outcome (p= 0.023), so that, the highest abortion and abnormalities of the infant in the time of Makrouh (inappropriate in the hadiths such as end of the lunar month and the Moon In Scorpio) and most healthy baby birth at the Mustahab times (recommended in hadiths such as noon on Thursday).

**Conclusion:** Considering the relationship between the time of IUI and its outcome, doing the intrauterine insemination at a time other than Makrouh times can improve its results.

**Keywords:** Fertilization, Abortion, Pregnancy outcome, Artificial insemination, abnormality, Infant Health

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**Comparison of Vitamin E and Vitamin D Effects on Primary Dysmenorrhea A Double-Blind Clinical Trial**

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**Introduction:** Dysmenorrhea has a prevalence of 50-80% and is one of the most important problems in women, especially in their reproductive age. Various studies have investigated the effect of vitamin D and E supplements. The purpose of this study was to compare the effects of these vitamins on dysmenorrhea.

**Materials and Methods:** This double-blind clinical trial study was conducted in 2016 on 18- to 25-year-old students with moderate to severe dysmenorrhea. Participants were randomly assigned into two groups of vitamin D and E, and the two groups received pain-lowering doses of pain medication for 5 days. The effect of drugs on the severity of dysmenorrhea in two consecutive cycles after supplements was evaluated by VAS and questionnaire. Data were analyzed by SPSS software.

**Results:** 110 female students were enrolled in the study, 10 of whom were excluded from the study. Comparison of mean age and mean BMI between the two groups was not statistically significant. The mean severity of dysmenorrhea based on the VAS instrument before entering the study in vitamin D group was 7.01 ±0.11 and in vitamin E 7.20 ±0.64. After the first month of consumption in vitamin D group was 5.44±1.40 and vitamin E 5.84±0.84 and After the second month of consumption in the vitamin D group was 5.20 ± 1.34 and vitamin E 5.32 ± 0.68. The results showed that the severity of dysmenorrhea was significantly decreased after supplementations (P <0.001), but there was no statistical difference in the severity of dysmenorrhea between the two groups.

**Discussion & Conclusion:** Vitamin D and Vitamin E are both equally effective in reducing the severity of dysmenorrhea, so these supplements can be used instead of pain relievers.
Survey of Reasons for Not Conducting pre-pregnancy Counseling in Primiparous Women in Kermanshah

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Introduction: Pre-pregnancy care is a set of care services that assesses the risks of pregnancy and tries to improve pregnancy outcomes by suitable interventions before pregnancy. The purpose of this care is assessment of mother condition from physically and spiritually aspect to have a healthier pregnancy. This reduces the mortality and morbidity in mothers and infants. Therefore, pre-pregnancy counselling is the most important visit. Unfortunately, most women become aware of their pregnancy very late so they lose their golden time to prevent some maternal and fetal complications. Therefore, this study was conducted to investigate the reasons for not conducting pre-pregnancy counseling in primiparous pregnant women.

Material and Methods: This retrospective study was performed on 370 primiparous women who attend to hospital with continuous sampling. The data gathering tool was a researcher-made form and data were analyzed using SPSS software.

Results: The results showed that among 370 primiparous women who attend to hospital for delivery, only 85 (23%) cases had pre-pregnancy counselling and 285 (67%) cases did not do that. Reasons for not conducting pre-pregnancy counselling include lack of knowledge about its benefits (70%), unwanted pregnancy (15.8%), lack of access (11.2%), and financial problems (3.5%). The rate of hospitalization during pregnancy due to pregnancy complications in the counseling group was 4.7% and in the non-counseling group was 9.5%, which there was a significant difference between two groups.

Conclusion: Considering the findings that the most common reason for not conducting pre-pregnancy counseling is lack of awareness of its benefits, so women can be trained to do pre- pregnancy counselling to plan a safe and secure pregnancy.

Keywords: Pre-pregnancy counseling, Consultation, primiparous women
**The Effect of Pre-Pregnancy Maternal Body Mass Index on Pregnancy Outcomes in Nulliparous Women**

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**Introduction:** Studies have shown that abnormal body mass index of mother at the onset of pregnancy and even before pregnancy and as well as inadequate weight gain during of pregnancy effects on pregnancy outcomes. This study was conducted to evaluate the effect of pre-pregnancy BMI on pregnancy outcomes.

**Methods:** In this study, BMI was measured in 360 nulliparous women. According to BMI, pregnant women were placed into three groups: group I (lean group BMI≤19/8), group II (normal weight group BMI=19/9-24/9), and group III (obese group≥25). Data were analyzed using SPSS16.

**Results:** showed that the mean duration of the first and the second stage of labour were significantly different between three groups (p<0.001). Cesarean section ratio in group I was lower than group II (OR=0.15;p=0.013). Instrumental delivery in group III was more than group II (OR=4.6;p=0.002). Risk of nonreactive non-stress test (NST) was significantly different between group II and III (OR=5.7;p=0.009). Induction ratio in group I was lower than group II (OR=0.43;p=0.002).

**Conclusion:** Deviation of BMI from the normal level is associated with adverse outcomes of pregnancy and delivery.

**Keywords:** Body mass index, Pregnancy outcomes, Nulliparous women

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**A Rare Case of Ignored Transverse Vaginal Septum with Poor Consequences (Case Report)**

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**Introduction:** Transverse vaginal septum is a rare mullerian anomaly. Patients with a complete transverse vaginal septum generally complain of primary amenorrhea.

**Case report:** The patient was a 26 year-old female with complain of severe abdominal and pelvic pain accompanied by significant weight loss. She had the history of a surgery for hydrometrocolpos because of transverse vaginal septum at infancy period without any gynecology follow up until 26 years. At the last surgery defuse endometriosis with metastatic colon cancer was noted.
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Conclusion: by diagnosis of transverse vaginal septum during infancy period, appropriate drainage and then frequent follow-up until puberty to complete resection of the septum is essential to achieve the best fertility and better quality of life consequences.

Keywords: Hydrometrocolpos, Vaginal septum, Vesicovaginal fistula, Endometriosis

Evaluation of Mean age of Menarche on Fariman Township's Female Student

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Background: Adult puberty is a transitional period between childhood and adulthood, and the onset of menstruation is recognized as an important indicator of health and socioeconomic status of societies. The aim of this study was to determine the mean age of menarche in female students of Fariman city.

Methods: In this cross-sectional study, 300 of high school students in Fariman were selected by multistage stratified sampling method. Data were collected by a questionnaire. Data were analyzed using descriptive and inferential statistics, including Pearson correlation coefficient test and ANOVA using SPSS statistical software.

Results: The mean age of menarche in children 12 years and 6 months. The beginning of the menarche was more frequent in the summer (38.18%) and the least in the winter (15%). There is no significant relationship between the occupation and education of the parents, the place of residence and the birth rank of the students with age of menarche. But there is a significant relationship between the age of menarche with weight, height, and BMI. The average weight, height, and BMI of the students who were menarche were more than those who did not menarche.

<table>
<thead>
<tr>
<th>p-value</th>
<th>non-menarche situation</th>
<th>menarche situation</th>
<th>mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.000&gt;</td>
<td>151.9±6.8</td>
<td>5.7±157.6</td>
<td>Height± Std.deviation</td>
</tr>
<tr>
<td>0.000&gt;</td>
<td>40.4±8.6</td>
<td>48.8±9.5</td>
<td>Weight± Std.deviation</td>
</tr>
<tr>
<td>0.000&gt;</td>
<td>17.4±2.9</td>
<td>19.5±3.3</td>
<td>BMI± Std.deviation</td>
</tr>
</tbody>
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Conclusion: With the increase in body mass index, the age of menarche begins to decrease and considering the increasing trend of overweight and obesity prevalence in children and adolescents and the effect of obesity on early onset and its complications in the community, attention to controllable environmental factors and it’s important to make obesity, including a diet pattern and a pattern of activity in this vulnerable group.

Keywords: maturity, student, menarche, Fariman
Study of Mental Health and Its Related Factors in Midwives of Shirvan Hospitals and Health Centers in 2018

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**Backgrounds:** Midwives are the prominent part of community health care providers. Mental health of midwives can have the most significant impact on providing and maintaining mothers and infants health. The psychological problems caused by occupational stress may seriously impair the mental health of midwives and affect on job quality of this occupational group. The current study aimed at investigating mental health and its related factors in midwives of Shirvan hospitals and health centers.

**Material and Method:** This cross-sectional study was performed on 60 employed midwives in Shirvan hospitals and health centers in 2018 using the census method. Goldberg’s General Health Questionnaire (28 questions in 4 subscales) (GHQ-28) was used to collect data. The data were analyzed through t-test, ANOVA, and Pearson correlation tests using SPSS software (version 16) and p values below &lt;0.05 was regarded statistically significant.

**Result:** Based on the results, the mean age of the participants was 32.66 ± 5.90 years, and the mean work experience was 7.61 ± 4.89 years. Based on the GHQ-28 test, 82.38% of the participants showed mental health and 17.62% of them have high risk of mental disorder, of those 4.5% have severe mental health disorder. 0.38%, 1.2% and 1.30% of the participants showed symptoms of depression, anxiety and physical disability respectively. No significant difference was found between mental health and variables of individual characteristics (age, work experience, marital status, and education level).

**Discussion:** Considering the various stressful factors in midwives work environment, it seems necessary to use appropriate approaches for controlling and managing source factors of stress and amending workplace conditions to promotion mental health. Overall, various health improvement strategies can be suggested such as increment awareness of mental health disorders, decrease in working hours, and meliorate the financial payment system.

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The Effect of Sufficient and Insufficient Vitamin E in Treatment of Infertile PCOS Patients

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**Backgrounds:** vitamin E has multiple functions in humans and animals and its antioxidant effect was concluded in cancer therapy, high-risk pregnancy and male infertility. several investigators have demonstrated the benefits of dietary
supplementation with vitamin E on fertility in different animal species. The aim of this study is to assess the effect of sufficient and insufficient levels of vitamin E on treatment of infertile PCOS women.

**Material and Method:** in this clinical trial, 144 PCOS infertile patients referred to Dr. Rasekh clinic, Jahrom, Iran that randomly divided in two groups (groups with sufficient and insufficient levels). Each of these two groups was randomly divided into case and control groups (36 participants in each group). Usual drug regimen of PCOS started for all groups (Metformin and dydrogestrone). Case groups received vitamin E supplementation as an add-on their treatment. Data collection performed via questionnaires by midwives and statistical analysis by SPSS 21.

**Result:** There was a significant relationship between follicular size and use of vitamin E (P <0.05). Increased endometrial thickness and reduced BMI detected in using vitamin E group. The overall pregnancy rate was twenty women (66.7%) which related to the using vitamin E groups.

**Conclusion:** vitamin E has a positive effect on treatment of PCOS patients. Although response to the treatment is better in patients with insufficient vitamin E levels, prescription of this vitamin in patients with sufficient vitamin E level is also effective. According to rare side effects related to this vitamin, its low cost and low toxicity, we recommend to add daily use of vitamin E to drug regimen of infertile PCOS patients.

**key words:** infertility, Vitamin E, pregnancy rate  Main source of funding; private funding by Dr. Athar Rasekh Jahromi.

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**Exploring Effective Contextual Factors for Regular Cervical Cancer Screening in Iranian Women A Qualitative Study**

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**Backgrounds:** Adherence to regular screening programs for cervical cancer in Iranian women is not common. The aim of this study was to explore contextual factors influencing behavior and compliance with guidelines.

**Material and Method:** This qualitative content analysis study was conducted in 2016-2017 in Hamadan city, Iran. Semi-structured in-depth interviews were conducted with 31 participants who were selected purposefully on referring to health centers. Twenty-three were women with various experiences of cervical cancer screening and 8 were health care providers (4 midwives, 1 gynecologist, 1 general practitioner and 1 family health expert). Guba and Lincoln criteria were used for trustworthiness. MAXQDA10 software was employed for data analysis.

**Result:** Four themes were extracted from the data: an opportunity maker system, opportunities to become acquainted, concerns for healthy living, and perception of cancer.
Conclusion: The results showed sensitivity of health care providers and their appropriate performance in relation to regular screening behavior of women is very important. Women's perception of cancer and its curability is another factor with a major effect on screening behavior. Opportunities for people to become acquainted with the Pap smear in a variety of ways and concern for healthy living and the need to have a healthy life to ensure quality of life were also found to be important.

Keywords: Uterine cervical neoplasms, papanicolaou test, regular screening, Iran.

Socioeconomic Consequences of Cervical Cancer

**Conclusion:** The burden of this disease is high. Most studies have reported their estimates are less than the actual burden of the disease on communities. Few studies have focused on indirect costs related to cervical cancer. It is suggested that studies be carried out on the effects of the disease on family members, relatives and especially the spouse of the affected woman. Early detection of cancer can save lives and reduce health care costs; these health benefits and money savings can be used to evaluate the cost-effectiveness and promote screening regularly.
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**A Comparative Study of Single Dose Versus 3 Days Regime of Ampicillin Ccephalosporin and Nitrofurantoin in Treatment of Cystitis in Pregnancy Referred to Imama Reza Hospital**

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**Backgrounds:** Urinary tract infection is the most common bacterial infection that occurs in 2-10% of pregnancies, and causes 30% of mothers of acute pyelonephritis. The timely start of appropriate antibiotics is of particular importance. The aim of this study is to compare single-dose and three-day treatment regimens of ampicillin, cephalosporin and nitrofurantoin in treating cystitis in pregnant women in Imam Reza Hospital in 2016-2018.

**Material and Method:** This study is an interventional clinical trial study. The population of this study was pregnant mothers with diagnosis of pregnancy cystitis referring to Imam Reza Hospital during 2016-2018. 1 gravidity women, aged 35-20 years with no history of systemic diseases and certain medications, and gestational age of 20 weeks, singleton pregnancy with symptoms of cystitis and patients who tested UA And UC have been given in Imam Reza Hospital laboratory and bacteriuria and pyuria have been reported to them, entered the study. Patients were divided into three treatment groups: Ampicillin, Cephalosporin and Nitrofurantoin. In each treatment group, 82 subjects were divided into two subgroups of 41 patients receiving single dose and 3-day antibiotic treatment. Data were recorded in the checklist and analyzed using spss-16 statistics software.

**Result:** The rate of recovery and response to treatment in the cephalexin group (68.29%) was higher than the other two groups (ampicillin (52.43%) and nitrofurantoin (60.9%)) (P = 0.065). The three-day treatment in the ampicillin group (P=0.032) and nitrofurantoin-(P= 0.884) was significantly more effective in improving the patients than the single dose of the two drugs. The most common cystic microorganism in our study is E. coli.

**Conclusion:** Cephalexin is more effective than ampicillin and nitrofurantoin in the treatment of pregnancy cystitis.

**Related Factors to Sexual Knowledge and Attitudes Among Engaged Couples**

Zohreh Sadat

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**Backgrounds:** A significant number of couples have insufficient awareness about sexual health; whereas, correct sexual information is the main factor to prevent adverse consequences. The current study aimed to investigate the sexual knowledge and attitudes in a sample of Iranian premarital couples.
Material and Method: In this cross-sectional study, a sequential sample of 500 males and females who met the inclusion criteria was selected. This study was conducted in Kashan, Iran. Participants were in the age range of 16 to 40 years referred for premarital testing and educational classes. Two questionnaires containing demographic data and a culturally based sexual knowledge and attitudes scale were used for data collection. Data were analyzed using the Chi-square test, independent samples t-test, Mann-Whitney U, analysis of variance and multivariate regression.

Result: About 50% of premarital couples had poor sexual knowledge and attitudes. The mean score of total sexual knowledge was 12.45 _8.54 out of a possible score of 33; and the mean score of total sexual attitudes was 121.63 _14.51 out of a possible score of 170. A significant association existed between the score of sexual knowledge and the level of education (P < 0.01), participants’ age (P < 0.01) and the score of sexual attitudes (P < 0.01).

Conclusion: The majority of participants had poor sexual knowledge and attitudes regarding different aspects of sexual health.

Keywords: Sexual Health, Attitude, Couples, Premarital.

Psychometric Properties and Factor Analysis of Sexual Attitudes Scale for Couples

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Backgrounds: Developing a valid and reliable scale that allows a evaluation of sexual attitudes and develop a proper sexual educational program is necessary. The present study was designed to develop and psychometric evaluation of the sexual attitudes scale for couples.

Material and Method: An study was conducted in two phases; in the first, in order to develop a questionnaire an item pool was generated on sexual attitudes through focus group discussions and individual interviews. second phase, the psychometric properties of the questionnaire were examined. For this purpose, In the face validity, content validity as well as construct validity were conducted. Reliability was assessed by the Cronbach’s alpha coefficient to assess internal consistency and test-retest reliability.

Result: In the first phase an item pool with 43questions. In the second phase, the number of final items reduced to 34 items of sexual attitudes , through exploratory factor analysis (EFA). six factors for sexual attitudes identified by EFA, including factor 1(sexual satisfaction) with 9 items, factor 2(negotiation of sexual issues between spouse) with 8 items, factor 3 (the importance of sex in life) with 6 items, factor 4 (sexual concerns) with 6 items, factor 5 (initiation of sex by the woman) with 3 items and factor 6(shared pleasure of sex) with 2 items The Cronbach’s alpha coefficient was 0.81. The test-retest correlations for sexual attitude was 0.82.

Conclusion: The findings suggest that the Sexual Attitudes Scale for Couples is a valid and reliable scale. Further studies are needed to establish stronger psychometric properties for the questionnaire.
Evaluating the Sexual Dysfunction of Middle-Aged Middle-Aged Caregiving wife in the Cities of Eastern Azerbaijan Province in 1397

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**Backgrounds:** Sexual instinct, which is the source of many changes in human life, can be affected by several factors. Sexual dysfunction is common in women and is one of the causes of divorce and disintegration of the families of the families. By training and increasing adolescence, you can take effective steps to reduce these problems. The aim of this study was to evaluate the sexual dysfunction of middle-aged middle-aged women in care centers in the cities of East Azerbaijan, Iran in 1397.

**Material and Method:** The present study is a descriptive cross-sectional study. The statistical population of this study was middle-aged middle-aged women from 30 to 59 provinces that visited the health centers of the province during the year of 1997. The required examinations were carried out by midwifery experts according to the national service package and recorded in the software. The information was extracted from the software and was analyzed using descriptive methods.

**Result:** Out of 725482 women aged 30 to 59 years old, a total of 197337 (27%) of the women were enrolled in the survey and served "Sexual Dysfunction Evaluation" service and recorded in the software. According to the assessment 72,100 (36%) women are dissatisfied with their marital and sexual relationships, including the lack of marital relationships due to Age and periods of life (premenopausal, menopause, and early menopause) 28039 (14%), anthropometric or unpleasant lifestyle, 18025 (9.6%), pain disorder for reasons of genital tract 16022 (8%), use of medications that causes colds (7610) 3.8%), others are 24.3 (1.2%).

**Conclusion:** A significant proportion of women in reproductive age and menopause experience sexual disorders, and the phenomenon of menopause can be a factor in the creation, continuity, or doubling of sexual dysfunction. Given the impact of these issues on the occurrence of mental disorders, Psychological and disadvantages and marital conflicts Designing specific counseling and education programs tailored to cultural conditions and taking into account the values that govern each society can be effective in correcting beliefs and attitudes and pre.

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The effect of Herbal medicine with pregnancy, delivery and menstruation (a qualitative study)

Zahra Saghaﬁ, Hossein Ghaedamini, Fereshteh Abbaslou, Mohammad Reza Ghaedamini, Ali Reza Ghaedamini, Mahsa Rostami Ghezelje

**Introduction:** Nowadays, the use of herbal medicines is one of the most common treatments. Complementary therapies as low-risk, cost-effective, easy, and with
limited side effects are expanding in health care. the aim of this study was to investigate the effect of Herbal medicine with pregnancy, delivery, and menstruation. **Methods:** This was a qualitative study with the content analysis method. Participants included pregnant mothers referred to health centers in Rafsanjan. Sampling was purposive and after data saturation 30 participants were selected. Interviews took placed at Rafsanjan Health Centers. Data were collected in the spring and summer of 2013 with in-depth and semi-structured interviews with open-ended questions. The mean duration of each interview was approximately 30 minutes, after recording the interviews were listened for many times, and the researchers felt with the participants, then analysis was performed. **Results:** The results of this study included 400 concepts extracted from interviews that were divided into four general categories, including experiences of the non-pregnancy period, prenatal, postpartum (including infants and mothers) and hope and anxiety. Experiences of non-pregnancy times include menstrual pain, menstrual adjustment, abortion, infection reduction and etc. Prenatal experiences include prevention of jaundice, constipation, hypertension, the onset of labor pain, and etc. postpartum experiences related to neonates include reduced jaundice, colic pain, diarrhea, and constipation and mothers such as reduced pain and bleeding, Increasing lactation and etc.). **Discussion and Conclusion:** Due to the widespread use of herbal medicines by mothers and their lack of awareness of the side effects and safe dose of them and its effects on the fetus and neonate, it is necessary to educate and inform mothers with different methods especially using social media and large scale education programs about midwifery knowledge to providing high-quality education. **Keywords:** Mothers, herbal medicines, neonates, pregnancy, lactation

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**Last Year Midwifery Student as Trained Companion (Doula) for Pregnant Mother (A Qualitative Research)**

**Zahra Saghafi, Marzieh Loripour, Zohreh Akbar Abadi**

**Introduction:** The internship course is essential for creating the basic skills and competencies of midwifery students and some factors such as inadequate clinical knowledge, inability to use the equipment, fear of making a mistake in providing care causes discretion in self-confidence, stress, and inefficiency among students. This study aimed to evaluate last year midwifery student as trained companion (Doula) for pregnant mother. **Methods:** This was a qualitative study with the content analysis method. Participants included final year students of the bachelor of midwifery of nursing and midwifery school in Rafsanjan university of medical sciences. Sampling was purposive and after data saturation 25 participants were selected. Interviews took placed at Rafsanjan nursing and midwifery school. Data were collected in the autumn and winter of 2019.
with in-depth and semi-structured interviews with open-ended questions. The mean duration of each interview was approximately 50 minutes, after recording the interviews were listened for many times, and the researchers felt with the participants, then analysis was performed.

**Results:** The results of this study included 500 concepts extracted from interviews that were divided into four general categories, Includes motivation to study (need to answer the questions in the field of sports, pharmaceutical, nutrition, laboratory tests and etc.), feelings of usefulness (satisfaction and popularity in the family, Increasing family confidence to job empowerment, pregnant mother's satisfaction, Liberal colleagues, and the usefulness experience of midwifery education and etc.), reduce work anxiety (due to independent experience of having midwifery companion, exercise, pressure points, responsiveness to the question of pregnant mother, communication with a pregnant mother throughout pregnancy and etc.), Increasing midwifery student acceptance (because of feeling empowered in midwifery with the consent of family, pregnant mother, maternity staff, school coaches and etc.), Increasing acceptance of midwifery student (due to answering questions, following the pregnancy process and lab tests, attending in pregnancy classes with a pregnant mother, attending in pregnant mother's bedside during delivery, helping reduce pain during difficult times and etc.).

**Discussion and Conclusion:** The continued presence of midwifery students during pregnancy and labor helps to empower them and reduce the pain of a pregnant woman and teach students how to care and support pregnant women without stress, anxiety, or undesirable emotions and it seems to Prepare their future career and it can be considered as a valuable internship assignment.

**Keywords:** Pregnant mothers, Student companions, Trained companions, Pregnancy

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**The Effect of Coping Strategies-oriented Interventions in Breast Cancer Women A Systematic Review**

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**Backgrounds:** Coping strategies can predict breast cancer patients’ emotional well-being. Accordingly, the purpose of this systematic review was to investigate the effect of coping strategies-oriented interventions in breast cancer women.

**Material and Method:** A systematic review of articles published from 2009–2018 was conducted using a comprehensive search of databases, such as Google Scholar,
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PubMed, Scopus, Springer, Elsevier, Cochrane Library, Science Direct, Web of Science, Magiran and Scientific Information Database. The following keywords were used in the search: coping strategy, breast cancer, interventions, psychological intervention, social intervention, spirituality intervention, and religion intervention. A total of 51,390 articles were obtained. After excluding duplicates and irrelevant articles, 11 studies were evaluated using the Oxford quality scoring system or the Jadad scale.

**Result:** The coping strategies-oriented interventions were classified into four main categories: psychological interventions such as cognitive–behavioral therapy, mindfulness, coping therapy, self-management, and psychoeducation; spiritual–religious interventions; social interventions, such as family therapy; and complementary interventions, such as acupuncture. Most interventions improved the coping strategies of the women. Based on the Jadad scale, only two studies were of good quality.

**Conclusion:** Health care providers should provide detailed plans and apply appropriate approaches to promote the development of coping strategies to improve the health of women with breast cancer.

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**Psychological Interventions in Chemotherapy Induced Nausea and Vomiting in Women with Breast Cancer A Systematic Review**

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**Backgrounds:** chemotherapy is an important therapeutic option for women with breast cancer, while having various side-effects. Nausea and vomiting are considered as the most common chemotherapy side effects and can impress different dimensions of women’s lives. Therefore, their control and treatment are significantly important. There are lots of interventions for treating them, so this study aims to investigate the psychological interventions in chemotherapy induced nausea and vomiting in women with breast cancer.

**Material and Method:** in this systematic review, researcher search Google Scholar, Scientific Information, Cochrane Library, Science Direct, Web of Science, PubMed, and Scopus Database by keywords such as Breast Cancer, Chemotherapy, Vomiting, Emesis, Nausea and Psychological Intervention. Finally 31753 papers were found referred to 2000-2019. After removing the repeated and unrelated papers, 6 clinical and quasi experimental trials were assessed by Jadad scale.

**Result:** Psychological interventions on chemotherapy-induced nausea and vomiting among women with breast cancer include Progressive Muscle Relaxation, Yoga and
Guided Imaginary. The results indicated that in all studies, except one, the interventions improved conditions and reduced chemotherapy induced nausea and vomiting. In addition to, just 2 studies were suitable basing on Jadad scale. 

**Conclusion:** according to the low-quality trials, it seems that we need more qualified studies to approve the effect of psychological interventions along with medication on chemotherapy-induced nausea and vomiting in women with breast cancer.

**Keywords:** nausea, vomiting, breast cancer, chemotherapy, psychological interventions.

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**Health Medical Tourism in Gynecology Disorders in Iran**

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Health tourism is a developing business in world. There was 14-16 million medical tourism on 2017 in the world. Any medical tourism pay about 3800-6000 dollars per trip, so medical tourism make a 450 billion dollar industry annually. Medical tourism is in progress specially in long time therapy and follow up like as knee exchange, cardiac conditions, gastric by pass and liposuctions instead of nasal or dental surgeries.

**Material and Methods:** We reviewed the all evidences in the best countries on field of medical tourism specially in gynecology and obstetrics. We had some in depth interview with stakeholders of medical tourism and data collection about gynecology medical tourism in Iran for determining of opportunities in this area.

**Results:** The most frequent countries for medical tourism are India, brazil, Malesia, Thailand, Turkey, Costa Rica, Taiwan, south coria and Singapore. In field of gynecology medical tourism we can find brazil, Thailand, Mexico and Costa Rica and for infertility Barbados in north of United State, Israel and Thailand. Emirate in Dubai has started special programs for tourist attraction. The most important standards for hospital medical tourism are JCI (and Joint Commission International, NABH) National Accreditation Board for Hospitals and Healthcare Providers. Hospitals with JCI standards increased from 800 to 1071 with 20 percent elevation to date in the world. Iran has not any hospital with JCI or NABH standards. IPD(International Patients Department) standards carry out in Iranian hospitals and only 170 hospital and 6 limited surgery center have this Iranian certification for medical tourism. Dental and cosmetic surgeries, heart diseases, infertility, transplantation and neurosurgery are the most frequent treatments in international medical tourism. In Iran gynecology, cardiac conditions, cosmetic surgeries like as hair graft and rhinoplasty, eye surgeries are common. Medical tourists have to pay five-time coast of approved Iranian price, although this price is very low according Iranian Rial value in recent years. The most visitors in Iran are from Afghanistan, Iragh and from Azerbaijan, Pakistan and Oman. Tehran, Qom and Mashhad had more than 70.000 medical tourism in last year.
Unfortunately brokers are the most facilitators instead of standards facilitator agents in Iran. Middlemen make frequent problems process for selection of best treatment and follow up and higher prices in patients.

**Conclusion:** The most important needs for gynecology area are cosmetic and infertility. It is necessary to evaluate patients' needs in different target countries. We have to improve infrastructures in gynecology hospitals specially IPD and JCI standards and facilitators. Gynecology society shall to make treatment packages for foreign patients to make more income for gynecologists.

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**Comparison Between Vaginal Royal Jelly and Vaginal Estrogen Effects on Quality of Life and Vaginal Atrophy in Postmenopausal Women Clinical Trial Study**

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**Backgrounds:** This study was conducted to evaluate the therapeutic effects of vaginal royal jelly and vaginal estrogen on quality of life and vaginal atrophy in postmenopausal women.

**Material and Method:** This double-blind randomized controlled clinical trial was carried out at gynecology and obstetrics clinics of Hajar Hospital of Shahrekord University of Medical Sciences (Iran) from January 2013 to January 2014. The study was conducted on married postmenopausal women between 50 and 65 years old. Of 120 patients, 30 individuals were excluded based on the exclusion criteria, and 90 women were randomly distributed into three groups of 30 royal jelly vaginal cream 15%, vaginal premarin, and placebo (lubricant), for three months. At the beginning and the end of the study, quality of life and vaginal cytology assay were evaluated. Data were analyzed by SPSS Version 11.

**Result:** Vaginal cream of royal jelly is significantly more effective than vaginal cream of premarin and lubricant in improvement of quality of life in postmenopausal women (p<0.05). Moreover, Pap smear results showed that vaginal atrophy in vaginal Premarin group was lower than the other groups (p<0.001), and there was no significant difference between lubricant and royal jelly groups (p=0.89).

**Conclusion:** Administration of vaginal royal jelly was effective in quality-of-life improvement of postmenopausal women. Given to the various properties of royal jelly and its effectiveness on quality of life and vaginal atrophy in postmenopausal women, further studies are recommended for using royal jelly in improving menopausal symptoms.
Introduction: Studies have shown that abnormal body mass index of mother at the onset of pregnancy and even before pregnancy and as well as inadequate weight gain during of pregnancy effects on pregnancy outcomes .This study was conducted to evaluate the effect of pre-pregnancy BMI on pregnancy outcomes.

Methods: In this study, BMI was measured in 360 nulliparous women. According to BMI, pregnant women were placed into three groups: groupΙ(lean group BMI≤19/8), groupΙΙ (normal weight group BMI=19/9-24/9), and group ΙΙΙ (obese group≥25). Data were analyzed using SPSS16.

Results: showed that the mean duration of the first and the second stage of labour were significantly different between three groups(p<0.001).Cesarean section ratio in groupΙ was lower than group ΙΙ ( OR=0.15;p=0.013). Instrumental delivery in group ΙΙΙ was more than groupΙΙ (OR=4.6;p=0.002). Risk of nonreactive non-stress test(NST) was significantly different between groupsΙΙ and ΙΙΙ (OR=5.7;p=0.009). Induction ratio in group I was lower than group ΙΙ (OR=0.43;p=.002).

Conclusion: Deviation of BMI from the normal level is associated with adverse outcomes of pregnancy and delivery.

Keywords: Body mass index, Pregnancy outcomes, Nulliparous women

Red Blood Cell Antibody Screening in Pregnancy

Background: Hemolytic Disease of Fetal and Newborn (HDFN) is defined as neonatal anemia and hyperbilirubinemia caused by an incompatibility between maternal and fetal red blood cells (RBCs). In 98% cases it is caused due to ABO and Rh incompatibility and antibodies to other blood group antigens (Kell, c, E, C, Kidd, Duffy, M, and so on) are causative in remaining 2%. More than 43 different RBC antigens have been reported to be associated with HDFN. Red cell antibody screening (RCAS) is a valuable tool in the detection of alloantibodies to other blood group systems (other than ABO and Rh) in the serum of patients during pregnancy or prior to transfusion. Red cell antibody identification (RCAI) should then be carried out on a larger panel of RBCs to precisely identify the antibody.
**Methods:** In a prospective study carried out on 624 antenatal cases, RCAS was done using a 3-cell panel from Tabriz, Iran. RCAI was carried out on cases that were positive for RCAS. These tests performed with Iranian Blood Transfusion Organization (IBTO) made kits.

**Results:** RCAS was positive in 9 out of 624 cases—1.4% (excluding the 3 cases who had autoantibodies). After RCAI these were identified as anti-D antibody (6 cases, 66%), anti-D with anti-C antibody (2 cases, 22%), and anti-M antibody (1 case, 11%). The most common antibody identified remained anti-D. In 2 cases of Rh negative pregnancy, the RCAS was suggestive of anti-D. RCAI done, however, showed a combination of anti-D and anti-C. One case of anti-M was detected in a G2P1L1D1 lady. The first pregnancy was full-term normal delivery at home, however, the baby died after birth. The mother's and baby’s blood group was O positive. RCAS done during second pregnancy was suggestive of anti-Duffy (Fya) or anti-M antibody. RCAI done showed anti-M antibody with dosage effect. The second pregnancy was postdated with intrauterine growth retardation (IUGR,) and Lower segment caesarean section (LSCS) was done for fetal distress. The baby had hyperbilirubinemia and was Direct Coombs test (DCT) positive requiring phototherapy. Rh incompatibility continues to be a common cause for HDFN. Patients with no prior history of sensitization can also develop anti-D as seen in 3 of our cases probably due to naturally occurring anti-Rh antibodies or antepartum hemorrhage. Despite the use anti-D immunization, 1%–2% of the cases are still sensitized. Anti-D immunization resulted in a favorable fetal outcome in the study. Anti-D complicated with anti-C presents with more severe HDFN as seen in 1 patient who had a previous stillbirth and a hydrops baby despite receiving anti-D. Anti-C antibodies resulting in HDFN requiring exchange transfusion have been reported.

**Conclusion:** Antenatal detection of the non-anti-D causes of HDFN requires RCAS. If RCAS is positive, the following steps are to be taken. RCAI should be done to identify the antibody. The spouse has to be screened for the presence of offending antigen and the pediatrician has to be alerted about delivery of a potentially sensitized infant. The blood bank should find a suitable antigen-negative donor for transfusion to baby and mother.

**KeyWords:** HDFN, Screening, Pregnancy, Tabriz, Iran

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**Anthropometric Characteristics and Central Fat Deposition Markers Associated with Uterine Fibroids in Women; A Case-Control Study in Iran**

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**Introduction:** Uterine Fibroids (UFs) are the most common benign tumors of the uterus with an unknown etiology, affecting many women of reproductive age.
**Objectives:** To evaluate the association between uterine fibroids and anthropometric features, central fat deposition and lipid profiles.

**Materials and Methods:** In this case-control study, 212 patients were enrolled. Study variables including weight, height, waist and hip circumflexes were measured for all individuals. For patients with UFs, the size, number and location of fibroids were also recorded. Also, subcutaneous and preperitoneal fat thicknesses were measured. Finally, the data were analyzed by the SPSS software.

**Results:** The most common complaint was Abnormal Uterine Bleeding (AUB) in both groups. Most of the patients had a BMI of 25-30. There was a significant difference between the two groups regarding the age and waist circumflex of the patients. Cholesterol levels were much higher in the case group. Only age and LDL-c levels in the case group were positively related to developing UFs, so that with ageing and increased levels of LDL-c, the likelihood of experiencing uterine fibroids rises to 10% and 1.1%, respectively. Also, there were no significant differences among the two groups regarding neither the Preperitoneal Fat Thickness (PFT) nor the Subcutaneous Fat Thickness (SFT).

**Conclusion:** it is revealed that with aging and higher levels of LDL-c, the likelihood of developing UFs rises.

**Key Words:** Uterine Fibroid, Subcutaneous and Preperitoneal Fat Thickness, Lipid Profile

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The Characteristics of Uterine Leiomyoma and Metabolic Syndrome in the Multiparous Overweight Women in Northern Iran

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**Objective:** some Studies have shown that the incidence of Uterine Leiomyoma (U.L) is associated with obesity and hypertension as the components of metabolic syndrome. Therefore, authors aimed to investigate the relationship between incidence of U.L and their characteristics with metabolic syndrome and its components in women referring to Al-Zahra hospital in Rasht.

**Study Desing:** This study was conducted in two groups (N=144) with and without U.L. Demographic, anthropometric, smoking, past medical history, serum lipids and blood glucose levels, U.L features including size, number, location of U.L and clinical symptoms were recorded. Data were analyzed in SPSS.

**Results:** Results showed that there was no significant difference between the components of metabolic syndrome including waist circumference, systolic and diastolic blood pressure, fasting blood sugar and HDL levels in the groups (P> 0.05).
There was no significant difference regarding the occurrence of metabolic syndrome in the groups (P> 0.05). However, individuals had U.L without metabolic syndrome were 28.9% asymptomatic, but in individuals with metabolic syndrome, this finding was decreased to 8.2 (P <0.001). Also the incidence of U.L (4.9%) in patients with metabolic syndrome was lower than those who didn't have metabolic syndrome (21.7%) (P = 0.014).

**Conclusion:** The incidence of U.L in this study did not correlate with metabolic syndrome and its components, but those with metabolic syndrome were more likely to have abnormal uterine bleeding. The most common bleeding pattern was menometrorrhagia, and their U.L were less submucosal predominantly.

**Key words:** Leiomyoma; Metabolic syndrome; Hypertension

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**Predictive Factors of Breast Cancer Screening among Iranian Women A Review Study**

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**Backgrounds:** Breast cancer accounts for nearly one-third of all cancers in women, and is the second most prevalent cancer after lung cancer. The present study aimed to determine the predictive factors of breast cancer screening in Iranian women based on the Health Belief Model (HBM).

**Material and Method:** This review was conducted by searching electronic databases of Google Scholar, PubMed, Magiran, and SID with the English keywords of "breast cancer"; "mammography"; "health belief model"; "breast self-exam"; and the equivalent Persian keywords.

**Result:** Altogether, 67 articles were obtained, nine of which were more relevant and were selected for analysis. Women's awareness of breast cancer screening methods was moderate in two studies and poor in two other studies. The constructs of perceived susceptibility, perceived severity and perceived barriers were poor in five studies, and the constructs of perceived benefits and self-efficacy were poor in four and three studies, respectively. Health behavior was at a good level in two studies.

**Conclusion:** Regarding the general results of the present study, the low level of awareness, as well as the constructs of perceived susceptibility, perceived severity, perceived benefits, perceived barriers and self-efficacy, it is recommended that special attention be given to all the constructs of this model in implementing HBM-based education programs.
A Predictive Model For the Outcome of Induction of Labor in Term Nulliparous Women

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Background: Induction of labor is artificial stimulation of uterine contractions before the spontaneous onset of labor, with the aim of achieving vaginal delivery. Induction of labor can fail in certain patients, which can lead to several sequelae including emergency cesarean section. Several maternal and fetal characteristics are associated with increased risk of failed induction, but a universally accepted criterion is not yet available.

Objective: To detect antepartum factor associated with increased risk of failed induction of labor in term nulliparous women and create a model to calculate the overall risk.

Study Design: This was a retrospective cohort study conducted in Yas hospital, Tehran, Iran from 2015 until 2017. A total of 700 term nulliparous women with singleton pregnancy of more than 37 weeks were included in this study. Patients with non-cephalic presentation, placenta previa, preeclampsia, diabetes, prolonged premature rupture of membranes, previous myomectomy and patients undergoing spontaneous labor were excluded from the study. Maternal and fetal characteristics were assessed. Patients underwent induction of labor using different methods. Patients with failed induction underwent emergency cesarean section. Univariate and multivariate logistic regression was used to detect factors contributing to failed induction.

Results: 400 patients (57.14%) had vaginal delivery and 300 patients (42.86%) had emergency cesarean section. Cesarean section was done due to: arrest of descent or full arrest (19.66%), arrest of latent phase (9.33%) and arrest of dilation (71%). In univariate analysis, higher maternal age, higher weight, higher BMI, higher duration of latent and active phase of labor, lower gestational age, lower cervical dilation and effacement, lower fetal station, lower Bishop score and fetal head positions other than occipitoanterior were associated with increased risk of failed induction. In multivariate analysis, increased maternal age (OR=1.05, CI: 1.00-1.09, P=0.028), decreased maternal height (OR=0.95, CI: 0.90-0.99, P=0.043), increased gestational age (OR=1.61, CI: 1.3-2.0, P=0.000), lower fetal station (OR= 0.48, CI: 0.24-0.96, P=0.039), decreased Bishop score (OR=0.48, CI: 0.27-0.71, P=0.001), longer latent phase (OR=1.65, CI: 1.47-1.85, P=0.000) and longer active phase (OR=2.60, CI: 2.20-3.09, P=0.000) were associated with higher risk of failed induction.

Conclusions: We showed that that higher maternal age, lower maternal height, higher maternal BMI, higher gestational age, lower fetal station, lower modified Bishop score, longer latent and active phase are associated with an increased risk of failed induction of labor in term nulliparous women. We also created a model to predict the risk of failed induction in these women.

Key words: induction of labor, failed induction, predictive model, Bishop score, nulliparous, cesarean.
Ethical Issues in Maternal and Child Health Nursing

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Presenting Author: Farzaneh Solaimanizadeh

**Background:** Health care givers, particularly midwives, perinatal and neonatal nurses, face ethical issues possibly because of their interactions with patients and clients in the reproductive age groups. Ethical issues across the child bearing ages are multiple and complex.

**Material and Methods:** This is a literature review on ethical issues in maternal and child health nursing, challenges faced by maternal and child health nurses and strategies for decision making.

**Results:** A unique aspect of maternity nursing is that the nurse advocates for two individuals, the woman and the fetus. The maternity nurse’s advocacy role is more clearly assigned for the pregnant woman than for the fetus, yet the needs of the mother and fetus are Interdependent. Ethical dilemmas occur in maternal and child health nursing, as they do in other areas of nursing. Such situations are common in perinatal and neonatal care because the wellbeing of mother and her neonate must be considered. Rapid technological and scientific advancement are presenting difficult questions. Maternal and child health issues often involve conflicts in which a woman behaves in a way that may cause harm to her fetus or is disapproved of by some or most members of society. Conflicts between a mother and fetus occur when the mother’s needs, behavior, or wishes may injure the fetus. The most obvious instances involve abortion, assisted reproduction (artificial insemination, in vitro fertilization and embryo transfer, and surrogate parenthood), and selective reduction in multi fetal pregnancy, intrauterine treatment of fetal conditions, substance abuse, and refusal to follow the advice of caregivers. Health care workers and society may respond to such a woman with anger rather than support. However, the rights of both mother and fetus must be children.

**Conclusion:** Maternal and child health nurses are faced with complex ethical issues. Moral courage and advocacy for women and children are necessary tools to help manage the associated distress. Nurses should adhere to standard professional ethics in health care decision making.

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Investigating the Factors Affecting Pregnancy Depression in Pregnant Women Referred to Bam Health Centers

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**Background:** Women during pregnancy are more susceptible to depression than postpartum period. The aim of this study was to determine the factors affecting depression during pregnancy in pregnant women referred to Bam health centers.
Materials and Methods: This descriptive-analytic cross-sectional study was performed on 257 pregnant women referred to Bam urban health centers. Random cluster sampling was carried out. First, a list of health centers in Bam was prepared and from among these health centers, six Bam health centers were selected as cluster and the units were randomly selected from the centers to reach the sample size. The desired ones were selected. In this study, two-part questionnaires were used. A demographic questionnaire and other sections related to midwifery variables. To analyze the findings of this study, SPSS software version 17 was used and descriptive statistical tests of logistic regression were used.

Results: The mean age of pregnant women was 25.49 ± 5.18 years. The level of education was 46.3% (119) of the units studied at secondary school. 238 (92.6%) were housewives and 19 (7.4%) were employed. 28 (92.6%) had no history of preterm labor. 243 (94.6%) had no history of stillbirth. Using the logistic regression model, the variables related to the desired emotional relationship with the spouse, preterm delivery, systemic disease history, history of stillbirth and depression were the most effective variables that influenced the likelihood of depression in this study, respectively.

Conclusion: Depending on the identification of the strongest variables that can be effective in depression, depression can be prevented during pregnancy.

Key words: Depression, Pregnancy, Pregnant women

Ethical Obligations To Patients

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Background: Obstetrician-gynecologists have the ethical obligation to ensure that every patient receives clinical management of her condition that is supported in deliberative clinical judgment. An essential component of this obligation is the continuous improvement of the safety and quality of patient care.

Material and Methods: This study is article review

Results: Obstetrician-gynecologists should engage patients in decision making that meets the ethical requirements of informed consent. The professional virtue of integrity and the ethical principles of beneficence and respect for autonomy guide this process. The obstetrician-gynecologist’s role in the informed decision-making process should not be distant and impersonal, but engaged and supportive. The obstetrician-gynecologist should begin by identifying, on the basis of deliberative clinical judgment, the medically reasonable alternatives for managing the patient’s condition. That a form of clinical management is technically possible is not sufficient to consider it to be medically reasonable. There is no ethical obligation to offer such clinical management. The obstetrician-gynecologist should then present the medically reasonable alternatives to the patient and provide an unbiased description of each alternative along with the clinical benefits and clinical risks of each. This disclosure
does not need to include theoretical benefits and risks, which can be distracting. The determination that a form of clinical management is medically reasonable is an expert clinical judgment and therefore not a lay judgment. There are two clinical contexts in which the obstetrician-gynecologist is ethically justified in making recommendations. The first is when there is only one medically reasonable alternative or when, among two or more medically reasonable alternatives, one is clinically superior in deliberative clinical judgment. Sometimes, among medically reasonable alternatives, no one is clearly superior in deliberative clinical judgment. In such clinical circumstances, the obstetrician-gynecologist should be cautious in making a recommendation and explain the basis for doing so, which could include an unbiased evaluation of the obstetrician-gynecologist’s clinical experience. Making ethically justified recommendations is not disrespectful of patient autonomy or inconsistent with shared decision making, because such recommendations empower the woman with the valued input of the obstetrician-gynecologist’s Professional clinical judgment. Obstetrician gynecologists in leadership positions have the ethical obligation to identify and advocate for the resources required.

**Conclusion:** Obstetrician-gynecologists have the ethical obligation to society to support the health of the entire population of patients. Obstetrician-gynecologists have the ethical obligation to advocate for women and children. Obstetrician gynecologists in leadership positions have the ethical obligation to coordinate advocacy of their professional colleagues for women and children.

* * *

**The Unlimited-Rights Model of Obstetric Ethics Threatens Professionalism**

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**Background:** In the professional ethics of obstetrics, respect for autonomy supports the crucial right of women to make their own decisions about whether to accept or refuse the recommendations their obstetricians make. What we have called the professional responsibility model of obstetric ethics includes the decisional rights of patients as essential. Obstetricians should therefore respect the decisional rights of pregnant women throughout pregnancy, from prenatal diagnosis to intrapartum management. In addition, the professional responsibility model strongly advocates for the global human rights of women and children to perinatal healthcare, especially impoverished women and women in low-income countries.

**Material and Methods:** This study is article review

**Results:** In the unlimited-rights model of obstetric ethics obstetricians have an ethical obligation that demands identification of the values of patients before making any recommendation in any clinical circumstance. The unlimited-rights model makes shared decision making, in which ‘physicians must base their recommendations on
the patient’s values rather than on their own,’ required for all clinical decision making with patients. Shared decision making thus understood requires the doctor to elicit the patient’s values as the basis for recommendations and therefore subsequent decision making. Beneficence-based recommendations that do not include the patient’s values are disallowed, to prevent the risk of substituting the doctor’s values for those of the patient. The unlimited-rights model and its demand for nondirective shared decision making requires the obstetrician to first take into account the patient’s values.

Conclusion: The unlimited-rights model should be replaced with the clinically more nuanced and applicable professional responsibility model, in which obstetricians have professional obligations to patients and in which patients’ rights have an essential but not unlimited role.

*Biomonitoring of Maternal and Fetal Mercury Exposure in Sabzevar City and its Affecting Risk Factors*

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Mercury (Hg) is a well-known neurotoxicant and exposure in high levels can harm to living organisms and human beings in all ages. Fetuses and young children are a sensitive group even in low level exposure to Hg that can damage the brain and affect their central nervous system and cognitive development. The aim of this study was determining the maternal and fetal mercury burden levels in 89 mothers whom refer to Shahidan Mobini Hospital for delivery. About 360 samples were taken from 89 mothers as placenta tissue, placenta blood (representing mother blood), umbilical cord tissue and umbilical cord blood (representing infant blood) that the average of total mercury (tHg) in these samples were 10.65, 10.65, 12.18 and 9.10 µg/L, respectively. Findings also revealed that there was a strong and significant correlation (r=0.89, p≤0.001) between mothers blood and infants blood mercury burden. There was a negative significant correlation between number of pregnancy and mercury level values of placenta tissue (p≤0.036). The level of mercury in the blood of mothers and newborns had a meaningful relation with mother’s living area. Our studies showed that the number of abortions and fruit consumption decrease the blood mercury levels with a non-significant correlation.

**Key words:** Mercury; Placenta; Umbilical cord; Maternal and fetal mercury
The Effectiveness of Group-Based on Acceptance and Commitment Therapy on aggression and Communication skills teen girls with Premenstrual Dysphoric Disorder

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Backgrounds: Adolescents are a significant stage in the development of a person’s social and psychological development. Premenstrual dysphoric disorder is one of the issues affecting the aggression and communication skills of adolescent girls. The aim of this study was to determine the efficacy of admission and commitment therapeutic approach to reducing aggression and improving communication skills among adolescent girls with premenstrual dysphoric disorder.

Material and Method: In this study a quasi-experimental work was a pretest-post test with control group. The study population consisted of all high school female students in the academic year 2017-2016. The sample included 24 female high school students who were selected by multi-stage cluster sampling and randomly selected. Were divided into control and experimental groups. The instruments used in this research were aggression and communication skills questionnaire which was used in the pre-post and posttest stages. The students of the experimental group participated in 8 sessions of admission and engagement. It was agreed that treatment of admission and commitment to aggression Reduces communication skills.

Result: The results of covariance showed that in the post-test stage the aggression scores significantly decreased compared to the control group and the scores of communication skills increased.

Conclusion: Also, teaching school counselors to apply this technique is to reduce the symptoms of this disorder in girls.

Inner Voice of Pregnant Women

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Backgrounds: Spirituality is an integral part of well-being of every individual and is regarded as a foundation for health. Spirituality becomes more significant and evident during crisis periods like pregnancy. Therefore, it is crucial for health care providers to be supportive during pregnancy by exploring and understanding the meaning of spirituality for the pregnant women. This study aimed to discover the experiences of Iranian pregnant women regarding spirituality.
Material and Method: The data were collected through semi-structured, face-to-face, and in-depth interviews and were analyzed using the directed qualitative content analysis approach. The participants included 11 pregnant women who referred to healthcare centers of Karaj, Iran. They were selected by purposive sampling and invited to participate in the study. The research was approved by the Ethics Committee of the Islamic Azad University Karaj Branch.

Result: Three major themes emerged through the data analysis: “permeable transcendence”, “doubled responsibility”, and “spiritual circumstance”. The first theme consisted of the three sub-themes of “spiritual awareness of the mother”; “the spiritual light of baby” and “personal transformation and improvement”. The second theme consisted of the two sub-themes of “spiritual nourishment for mother” and “spiritual nourishment for child”. The third theme consisted of the two sub-themes of “religious background” and “spirituality of healthcare provider”.

Conclusion: Results of the study indicated that the spiritual essence of the unborn child, the mother’s own spirituality and also the significant others influence on her experiences regarding spirituality which make her more responsible to care of a spiritual entity within her womb.

Relationship Between SHBG Gene C458K Polymorphism and Breast Cancer Incidence in Urmia Women

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Breast cancer as the most common type of cancer among women worldwide SHBG gene is a glycoprotein that binds to androgen and estrogen and sex steroids. This gene is located on the short arm of chromosome 3 (17 P12-13) and contains 2 exons. Be it. One of the most common mutations in this gene is C458K polymorphism, which converts aspartate amino acid to aspartate, which disrupts cellular control process. The purpose of this study was to investigate the association of SHBG gene C458K polymorphism with breast cancer in women.

Materials and Methods: In this study, 5 women with breast cancer as control group were selected from 5 women as healthy group in West Azarbaijan province. RFLP and shear enzyme techniques were used for sequencing and data were analyzed by SPSS V.24 software.

Results: Frequency of C allele was 69.19% in patients group and 82.68% in control group which showed a significant relationship with disease incidence (P = 0.02). Frequency of dominant homozygous (CC) genotype in patients was 62/01 (P = 0.04) indicating significant association with disease incidence while heterozygous (TC) and recessive homozygous (TT) genotypes. With 25.54% and 12.45% respectively, there
was no significant relationship (P <0.05). Also, the incidence of disease was 28% in women with familial marriage (P = 0.05). (CL = 1.14-3.52-OR = 95%)

**Conclusion:** Based on the results of the mutation of the SHBG gene C458K polymorphism, it is possible to disrupt the cellular control process, which can be used as a prognostic factor.

**Keywords:** Breast Cancer - Glycoprotein - C458K - SHBG Gene

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**Association Between Intracellular Adhesion Molecule Polymorphism (ICAM-I) and Breast Cancer Incidence in Urmia Women**

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Breast cancer is one of the most prominent cancers in women worldwide. The ICAM-I molecule, also known as CD54, is a cell surface glycoprotein that is expressed on the cells within the vein and the immune system. Mutations in this gene disrupt apoptosis metabolism. The purpose of this study was to investigate the relationship between intracellular adhesion molecule polymorphism (ICAM-I) and the incidence of breast cancer in women.

**Materials and Method:** Our statistical population includes 5 breast cancer patients and 50 healthy women as control group. ICAM-I biopsy specimens were prepared and then stained with indirect immunofluorescent and hematoxylin eosin and then the results were normalized. SPSS v.24 and T-test were used for data analysis.

**Results:** The highest mean decrease of expression of these molecules was observed in patients of 5 to 5 years old age group. Comparison of ICAM-I correlation coefficients in the slides of patients with control group was 5% and 5%, respectively. There was a significant association with disease incidence (P = 0.04) (CL = 1.07-3.18-OR = 95%). There was a significant correlation with disease incidence (P = 0.03) (CL = 1.55-3.69-OR = 95%). Also, a positive correlation was observed between the disease and the decrease with a significant difference.

**Conclusions:** Based on the results of ICAM-I, there is a significant relationship between the incidence of breast cancer and which can be used as one of the predisisease factors.

**Keywords:** Breast cancer - Polymorphism - Adhesion molecules – ICAM
A Case of D Alloimmunization in Pregnancy: Successfully Treated Solely with Therapeutic Plasma Exchange (TPE)

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One of the most common causes of fetal anemia is red cell alloimmunization. The standard treatment in fetuses with anemia is intrauterine transfusion (IUT); but this approach may have adverse effects, or sometimes it is not available or even possible. Therefore, immune modulating approaches such as therapeutic plasma exchange (TPE) and the use of intravenous immunoglobulin should be implemented to avoid or delay IUT. We report here the successful management of a case of D alloimmunization in pregnancy solely with TPE, without the need for IUT. The patient was a 33-year-old G4, L2, and D1, who had a history of alloimmunization in her previous pregnancy. TPE was initiated at 17 weeks gestation and was repeated weekly. Altogether, 20 times of plasma exchange were performed and a normal fetus was delivered at week 37.

Keywords: alloimmunization, therapeutic plasma exchange, hemolytic disease of the newborn

Marriage A Way to Achieve Relaxation Evolution:
A Grounded Theory Study

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Backgrounds: Marital satisfaction is a complex of feelings which includes pleasure, satisfaction, and pleasure experienced by the husband or wife in all aspects of marriage, and it is an important part of individual health, especially mental health. The health of human fertility has physical, psychological and social dimensions, and reproductive health experts are responsible for providing mental health of couples, which includes marital satisfaction. Therefore, this qualitative study was conducted to understand marital satisfaction using grounded theory on couples.

Material and Method: This qualitative study was implemented using Grounded theory based on Corbin & Strauss 2008 to investigate the process of marital satisfaction formation among couples from 2014 to 2016. The criteria for entering the study included at least 3 years of marriage duration, living in the urban community of Tehran, being Muslim and Iranian with the ability to
understand and speak Persian, being in the first marriage, and willingness to participate in the study. The sampling was started as purposeful and continued as theoretical. Data were obtained using semi-structured interviews. The duration of the interviews was in the range of 45 minutes to 1.5 hours. MAXQDA software was used to facilitate the organization of classes and subclasses.

**Result:** In this study, 28 interviews were taken from 25 participants (20 women and 5 men). The average age of women was 35.75 ± 7.61 years, and the men was 36 ± 4.84 years. In addition, the average duration of marriage was 14.18 ± 9.27 years. Therefore, the central variable of this study was called "towards a relaxing evolution". On that account, the main classes included "supportive companionship" and "responsible love", and variables of "personality traits", "interactive relationships," "economic status", "passage of time", and "present resources in society" provided the basis for the formation of marital satisfaction.

**Conclusion:** The results of the present study showed that in order to achieve marital satisfaction, couples should set their family’s ultimate goal toward achieving a relaxing evolution for the entire family, and they should accompany each other in order to achieve that goal. This sometimes requires sacrifice, and forgiveness to achieve the ultimate goal of the family. In this regard, families of couples, children, family counselors, reproductive health experts, and religious counselors can be very helpful and have a significant impact on achieving marital satisfaction.

* * *

**Maternal and Neonatal Outcome of Cesarean Section at 38 Weeks Versus 39 Weeks of Gestational Age of Pregnancy**

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**Backgrounds:** As controversy exists regarding appropriate timing of elective C/S, the present study was designed to compare maternal and neonatal outcomes of cesarean section at 38 weeks versus 39 weeks of gestational age of pregnancy.

**Material and Method:** We conducted a cross-sectional study being performed at Hafez and Zeinabieh Hospitals during a 12-months period from 2016 to 2017. Present study included 1000 pregnant women aged 18-40 years who had singleton pregnancies scheduled for either an elective or an emergency C/S at 38 and 39 weeks of gestation. The maternal and neonatal outcomes of cesarean section at 38 weeks versus 39 weeks of gestational age were compared overall and separately based on emergency and elective patients.

**Result:** A total of 1000 mothers with singleton pregnancies who underwent C/S were included during the study period. A total of 646 (64.6%) participants (322 in 38-week group versus 324 in 39-week group) had an elective caesarean delivery and 354 (35.4%) participants (133 in 38-week group versus 221 in 39-week group) had an emergency caesarean. Overall, neonatal complications in the 38-week group were
significantly more than those in the 39-week group [96 (21.09%) vs. 72 (13.21%); P=0.001]. The incidence of sepsis, hyperbilirubinemia, and hypoglycemia in neonates of the 38-week group were significantly higher compared to those in the 39-week group (P=0.001, P=0.03, P=0.03, respectively). Moreover, the number of maternal adverse events was significantly higher in the 39-week group 45 (8.2%) compared with the 38-week group 20 (4.4%) (P=0.01). However, when we separately compared elective and emergency maternal complications between the groups, statistical tests for trend were not significant.

Conclusion: Overall, cesarean section at ≥ 39 weeks gestation would significantly reduce neonatal complications, and don’t have difference regarding maternal complications. Thereafter, performing elective cesarean section at 38 weeks could lead to slightly increased risk of neonatal and maternal complications.

Outcome Assessment of Women with Cervical Intraepithelial Neoplasia Grade 1 Who Were Referred to the Oncology Clinic of Naghavi Hospital Between September of 2013 and September of 2015

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Introduction: The potential development of cancer and mild abnormal growth (dysplasia) on the cervical surface are called CIN1, which is the most common pathologic diagnosis in patients referred for colposcopic examination due to abnormal Pap smear testing. The most important cause is HPV infection. The annual incidence of CIN1 is 1.6-1.2 out of 1000 women. This study aimed to evaluate the outcome of CIN1 patients with mild cervical dysplasia as well as their demographic and fertility characteristics.

Materials and Methods: This retrospective cohort study was performed on the records of all women who were referred to the oncology clinic of Naghavi Hospital from September 2013 to 2015 and after colposcopy their corresponding biopsy was CIN1. All data were analyzed with SPSS.

Results: The results showed that rate of recovery after 6 months was 80% and after 12 months it reached 88%. Within 18 months, the rate of recovery decreased and only during the last month 1% recovered. Among patients who had healed after 6 months, 99.4% were still recovering within 24 months, and 0.6% changed to CIN 1, among those who were CIN 1 after 6 months 90.3% improved and 7.9% remained the same. Also, of those who progressed after 6 months, 77.8% recovered within 24 months, 22.2% became CIN1 again.

Conclusion: This study states that the rate of recovery decreases by every 6 months after follow-up of patients. Among the risk factors during follow-up after 6 months...
there was a significant association between outcome with diabetes and age of first intercourse.

**Keywords:** Mild Cervical Dysplasia, CIN1

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**Assessment of Diagnostic Value of Non-Stress Test NST in High-Risk Pregnancies**

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**Backgrounds:** Non-stress test is the most widely used technique for screening and evaluating primary fetal health during pregnancy, which is based on accelerating heart rate in response to fetal activity. The aim of this study was to determine the diagnostic value of non-stress tests (reactive and non-reactive) in the outcomes of high-risk pregnancy.

**Material and Method:** A cross-sectional study was conducted on pregnant mothers of the third trimester of pregnancy and gestational age of 41 to 28 weeks. After obtaining informed consent, women with high-risk pregnancy were subjected to non-stress tests. When in 20 minutes monitoring the heartbeat of the fetal, there were at least 2 movements leading to increased heart rate, In this case, the non-stress test is reactive and otherwise non-reactive or abnormal (negative). Data was entered into the spss-16 software and was analyzed statistically.

**Result:** There was a statistically significant difference between the two groups of reactive and non-reactive NST responses in low APGAR score (p = 0.023), Heart rate decrease (P=0.045), Need for recovery (P= 0.034), Emergency cesarean section (P=0.011) and need for admission to NICU (P=0.045). However, there was no significant difference between the two groups (P = 0.188). In 83.3% of the cases, there was a favorable outcome of pregnancy. The optimal outcome of pregnancy is higher in non-reactive test (29.85% vs. 16.79%).

**Conclusion:** When NST is used, observe the embryo sleep timing and maternal prescription and the age of the fetus, and in cases where the non-stress test is non-reactive, wait a bit longer, repeat testing, or another supplementary test.

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**The Relationship Between General Self-Efficacy And Perceived Social Support With Quality Of Life In Pregnant Women Referred To Health Comprehensive Centers of Sanandaj 2018**

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**Introduction:** Pregnancy is a natural and pleasant phenomenon for most of the women, but often as a vulnerable and stressful period, it can change their quality. The purpose of doing this study was to determine the relationship between general self-efficacy and perceived social support in quality of life in pregnant women referring to Sanandaj comprehensive health centers.
**Poster Presentations**

15th International Congress on Obstetrics & Gynecology 2019

**Materials and Methods:** This was a descriptive-correlational study which conducted on 480 pregnant women referring to Sanandaj comprehensive health centers in 2018. The pregnant women with selected using a multi-stage cluster sampling method. The data gathering tools in this study were a two-part questionnaire for demographic, and three World Health Organization Quality of Life Questionnaires, Schwartz and Jerousal's general self-efficacy and a multi-dimensional social support perceived scale. Data were analyzed using 21th version of SPSS software, descriptive statistics, paired t-test and Pearson's correlation coefficient.

**Results:** The findings showed that the average score for quality of life was 95.93, the average self-efficacy score was 28/14 and the mean social support score was 47.76. Pearson's correlation test showed that there is a significant relationship between general self-efficacy and perceived social support with the quality of life of the pregnant women, that with an increase in the rate of self-efficacy and perceived social support, the mean scores for quality of life have increased. \( r = 0.054, (p<0.001) \)

**Conclusion:** The results of this study showed that general self-efficacy and perceived social support have a significant relationship with the quality of life of the pregnant women. Hence, the design and implementation of educational interventions to increase the social support and self-efficacy as well as quality of life in pregnant women is recommended.

**Key words:** pregnancy, quality of life, general self-efficacy, perceived social support

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**Save lives The Time for action -The introduction of the Human Papillomavirus Vaccine in Iran A Health Policy Proposal**

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**Backgrounds:** WHO has recognized the importance of HPV related diseases, which emphasizes on the cervical cancer and other HPV-related diseases’ prevention as a public health priority, through the achievable and feasible introduction of HPV vaccine. The HPV vaccine is implemented in many countries; however, it has not yet entered into the Expanded Program of Immunization (EPI) in Iran. This paper proposes a health policy to decrease the burden of HPV-related diseases by vaccinating females and males aged 9 to 14 years (in grade 6), which comprise the target group for protection.

**Material and method:** Two doses of the vaccine should be given at a gap of 6 months. The setting for vaccine delivery would be both government and private schools. This proposal uses the ‘policy analysis triangle’ as a framework to examine what the policy entitled (content), where is the origin of the key ideas (context), how implement and evaluate the policy (process) and who are the key actors (stakeholders)?

**Result:** This paper suggests a policy analysis for the introduction of HPV vaccine in Iran in order to reducing HPV burden. Development of new vaccine policy requires multiple iterations of policy formulation, engaging immunization stakeholders,
consideration of the policy context, increasing community awareness, learning from the experience of developed as well as developing countries around the world, evaluations of cost and cost-effectiveness, and constant assessment. **Conclusion:** The magnitude of HPV-related cancer cases that could be averted by HPV vaccination emphasize the need to implement HPV immunization program, which might become the only realistic opportunity to reduce present inequalities in cancer risk.

Cluster Analysis and Scientometric Mapping of Researches in the field of Reproductive Rights 1983-2019

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**Backgrounds:** Research in reproductive health (RH) has been located in the core of women’s health research and providing accurate information through conducting scientific and controlled research is essential. Bibliometric methods and social network analysis have been used to measure the scope and illustrate scientific output of researchers in this field.

**Material and Method:** In this cross-sectional study, the samples included all scientific publications about reproductive health, indexed in the Web of Science databases during the period 1983-2019. VOS viewer software was used for creating maps and network analysis on journals, authors, publication years, organizations, funding companies, countries, keywords and Web of sciences Categories.

**Result:** USA with 34.291% of scientific productions in this field was ranked the first among all countries. Only 4 articles from Iranian researchers have been published and occupied the 40th rank. The universities of Mashhad and Shahid Beheshti Medical Sciences had the most publications. Harvard University and reproductive health matters were the most organization and journal working on this issue.

**Conclusion:** The results of this study showed that the amount of scientific production in world and Iran in the field of reproductive health is very low. Therefore, the health and social sectors have to be strengthened in this area.

**Keywords:** Reproductive health, Bibliometric analysis, Scientometric.

The Relationship Between Third-Prenatal Sleep Quality and Postpartum Mental Disorders in Primiparous Women

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**Backgrounds:** The pattern of sleep changed in pregnancy. Sleep quality disorders associated with depression symptoms and poor outcomes. The aim of this study was to
determine the relationship between third prenatal sleep qualities and postpartum mental disorders in primiparous referred to prenatal centers of Ayatollah Rohani hospital in Babol, Mazandaran.

**Material and Method:** This is a cross-sectional study was conducted on 300 participants from May, 2017 to June, 2018. The information was collected with demographic, sleep quality Pittsburgh and SCL90 checklist questionnaires in two stages. At first, in the third trimester of pregnancy and second in 4-6 weeks after delivery. SPSS-21 software was used to analyze the data.

**Result:** The overall sleep quality score of most women was more than 5 and 74% (222) suffering from poor sleep quality. In the sub-scales, half of the women reported sleeping periods of 5-6 hours per night, indicating a serious problem. The mean (SD) delay in falling asleep was 2.55 (1.49) hours. 45% (136 people) of women, 58% (174 people), 46% (139) and 71.7% (215) had moderate delays in falling asleep, sleep disturbances, daily dysfunction and sleep quality, respectively. The majority of women reported normal sleep performance. The overall score of sleep quality with a general index of symptoms and all sub-scales has a significant relationship (P <0.05).

**Conclusion:** According to the results of this study, there is a significant relationship between the quality of sleep in the third trimester and psychological symptoms. The lack of attention to sleep disorder in pregnancy can have adverse effects on the mother. Therefore, sleep health education is recommended to prevent mental complications and safe pregnancy.

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**Control Bleeding of Ectopic partial Molar Pregnancy in the Cesarean Scar with Embolization of Uterine Artery**

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**Introduction:** Molar pregnancy is a fetal trophoblastic disease that, it often happens in the uterus but rarely occurs in the other places, especially in previous cesarean scars, diagnosis and treatment of this matter is controversial. In some studies, the prevalence of this problem was reported one in a million pregnancies.

We report is a case of molar pregnancy at cesarean section scar that treated with a combination of methotrexate and uterine artery embolization.

**Case report:** A 34-year-old multiparous female patient with two previous cesarean sections who has referred due to complained of abnormal uterine bleeding and pain. BhCG at the first day was 118000 IU/L. Vaginal ultrasound reported pregnancy in the lower uterus with 7W+5d age, heart rate and several cystic areas adjacent to the fetus that the myometrium between the sac and the bladder was very thin, about 1.2 mm (Fig1) In order to initially KCL injected in the fetus, the heart rate disappeared and then the intramuscular methotrexate and oral Leucovorin were ordered for eight-day
period. Then, with the reduction of BhCG on day 8, 52,000 IU / L patients were discharged and followed up. One week after discharge due to intra-peritoneal hemorrhage for, patient had due uterine artery embolization and bleeding was controlled. Then follow up on the patient BHCG titer there was a decline trend and finally was negative.

**Conclusion:** Molar pregnancy is rare in cesarean section scar and it has the risk of bleeding and rupture of the uterus. However, evidence for the best treatment for molar pregnancy in cesarean section scar is controversial, such as intrauterine methotrexate injection, curettage suction, uterine artery embolization with curettage suction have been reported in studies. The recently treatment reported with methotrexate and uterine artery embolization that's done successfully.

**Key words:** Ectopic partial molar pregnancy, cesarean scar, embolization of uterine artery.

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**The Effectiveness of a Multi-Dimensional Group Counseling Program Based on the GATHER Approach on the Quality of Life in Surgically Menopausal Women**

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**Background:** Surgical menopause leads to an abrupt onset of the menopausal symptoms when it is performed without an adequate preparation. It can affect women’s quality of life in many aspects. The purpose of this study is to assess the effectiveness of a multi-dimensional group counseling program based on the GATHER approach, on the quality of life of the surgically menopausal women.

**Material and Method:** This randomized clinical trial was conducted in two groups. It focused on 78 qualified women who had referred to four healthcare centers of Tehran from December 2017 to September 2018. The participants were selected by simple random sampling (39 people in each group). The intervention group received six consecutive weekly group counseling sessions with an average time of 90 minutes per session. The control group received no interventions. The data was collected using the Menopause-specific Quality of Life (MENQOL) Questionnaire at 4 time-points (i.e. baseline, after the intervention, one month, and three months after the intervention). To analyze the collected data, SPSS 19 was employed; t-test, Wilcoxon, Mann-Whitney, repeated-measures and Fridman tests were used. (IRCT Code: 2018110003802N4).

**Result:** Three mounts after intervention, the mean score of overall quality of life, vasomotor, psychosocial, and physical domains were significantly different compared to those baseline in the intervention group. There was no statistically significant differences in control group. Also, The trend of changes at 4 time-points based on the
results of the repeated-measures test in between the two groups showed statistically significant in the vasomotor (P = 0.001), psychosocial (P= 0.025), physical(P= 0.001) domains. The Friedman test showed a statistically significant difference between the two groups in the mean score trend of changes at 4 time-points in the sexual (P= 0.002), and overall quality of life(P = 0.004) domains.

**Conclusion:** Program resulted in improvements in symptoms in the vasomotor, psychosocial, physical, and sexual domains as well as the overall quality of life of the surgically menopausal women. Using the techniques provided in group counseling sessions has enabled the individuals to make better and more effective decisions over time. Therefore, implementation of this approach in healthcare centers with a focus on improving the quality of life of surgically menopausal women, with less expenditure, is highly recommended.

**Keyword:** Surgical menopause, group counseling, Quality of Life.

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**The Effect of Ginger on Preventing Post-spinal Puncture Headache in Patients Undergoing Cesarean Section**

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**Backgrounds:** Post-spinal puncture headache (PSPH) has constantly been one of the research priorities, especially in women undergoing cesarean section (C-section) and it is related to physical and psychological problems. The present study aimed to evaluate the effect of ginger on preventing PSPH in patients undergoing C-section.

**Material and Method:** This clinical trial was conducted on 160 women undergoing C-section with spinal anesthesia, who were eligible to enter the study in the experimental and control groups. One ginger capsule (250 mg) was prescribed every 8 hours(TDS) to the experimental group 24 hours before the C-section. The prescription of ginger was continued half an hour after transfer to the post-partum ward until the PSPH onset. PSPH intensity was measured by using visual analog scale (VAS) pain scores at 6 timepoints (Time 1=30, Time 2=60, and Time 3=90 minutes vs. Time 4=3, Time 5 =6, and Time 6=12 hours) after C-section. No interventions were performed in the control group. The data were analyzed using the SPSS software by descriptive statistics and analytical tests were applied to determine the changes in PSPH intensity.

**Result:** The comparison results of the mean score of PSPH intensity in the experimental and control groups indicated significant differences over time (P&lt;0.05), except for the sixth time point (12 hours after C-section). In addition, the trend of changes at 6 timepoints based on the results of the repeated-measures test demonstrated that PSPH intensity significantly differed in the two groups over time (P&lt;0.001).
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**Conclusion:** Based on the result, the oral prescription of ginger to women undergoing C-section under spinal anesthesia led to effective PSPH prevention at 5 time-points (30, 60, and 90 minutes, along with 3 and 6 hours). Further, the trend of the changes represented that the intensity of PSPH decreased in the experimental group over time. Therefore, ginger is suggested as a noninvasive and efficient method used for preventing PSPH.

**Keywords:** Post-spinal Puncture Headache, Ginger, Cesarean Section, Prevention.

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**Management of Anesthesia in High Risk Pregnancy Induced Hypertension**

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**Backgrounds:** They are hypovolemic, hypotensive with NA, thus, crystalloid is needed. They are at risk of pulmonary edema or oliguria unresponsive to a fluid. C.B.C is needed, platelet &lt; 70,000/mm3 increased risk of epidural hematoma. LFT, RFT are essential in determining severity of preeclampsia or HELLP syndrome.

**Material and Method:** Labor Analgesia. Vaginal delivery in PIH and in the absence of fetal distress is acceptable plan. C/S is necessary in fetal distress. EA is preferred for labor analgesia, if not contraindicated. EA reduces maternal catecholamine and facilitate BP control. EA improve IBF, UPP and fetal well-being. They are at risk of C/S, early epidural placement facilitate use of EA for C/S. EA is accomplished with LA and opioid without epinephrine, while maintaining left uterine displacement and FHR monitoring. Result: GA indicated for C/S who refuse RA or who are coagulopathic. SA avoid depressant effects of drugs and the risk of failed or difficult intubation. GA selected when hemorrhage or sepsis is the reason for an emergency C/S. The risks of GA include difficult intubation, aspiration, increased sensitivity to NDMR, exaggerated pressor responses to intubation and impaired PBF. Mortality is due to difficult airway or failed intubation. Restore IVFV and control BP.

**Induction:** STP, Sch. Magnesium attenuates fasciculations produced by Sch. In upper airway edema should use smaller tube. Avoid repeated laryngoscopy. In impaired coagulation, trauma result in bleeding. SBP responses to intubation exaggerated, increasing risk of cerebral hemorrhage or pulmonary edema. Short-duration laryngoscopy is most method for minimizing magnitude and duration of BP and HR responses. Hydralazine, labetalol, or nitroglycerin attenuate SBP. Maintenance of anesthesia: Low doses of volatile anesthetics +/N2O. The major determinant of neonatal depression is a prolonged interval between uterine incision and delivery. After delivery, anesthesia supplemented with opioids.

**Conclusion:** Spinal Anesthesia SA discouraged because severe hypotension. In severe preeclampsia, magnitude of maternal BP decreases are similar following administration of SA or EA for C/S. Should SBP decrease more than 30% from preblock value, treatment: left uterine displacement and increased rate of fluid
Infusion with ephedrine or phenylephrine. Bupivacaine is adequate to achieve T4 sensory level and 120 minutes of anesthesia. Meperidine or morphine used for postoperative analgesia.

Investigating the Effects of Education of Hedging Against Stress on Mental Health and Quality of Life in Pregnant Women

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Background: Reproductive phenomenon is a physiological process that causes many changes in pregnant women, and they made vulnerable both spiritually and physically. These changes can be affects mental health and consequently the quality of life in pregnant women and the fetus also affected. The aim of this study was to Investigating the Effects of Education hedging against stress on mental health and quality of life in pregnant women.

Method: This study was a semi experimental with Pre-test and post-test design on 30 pregnant women referred to health centers in Birjand in 1393 was done. The sample selected randomly and were divided in two groups (intervention and control groups). The intervention group received eight sessions education. At the end training, questionnaire of quality of life and mental health completed again. Data were analyzed with analyze covariance and using the software SPSS-22.

Result: Results showed that mean of total score of quality of life was significantly higher in the intervention group than the control group (p =0/001). Also the mean of total after public health education in the intervention group compared to the control group was more (p <0/001).

Conclusion: Education of hedging against stress on mental health and quality of life in pregnant women is effective.

Keywords: Education, hedging against stress, mental health, quality of life, pregnant women.

The Effect of Citrus Aurantium Capsule on Postpartum Depression in Women

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Backgrounds: Postpartum depression is a common public health problem in the first year after birth. Low mood, feeling guilty, loss of appetite, difficulty in falling asleep are some symptoms of this condition. Depression can cause serious problems for the child, mother and family. This study was performed with aim to determine the effect of Citrus aurantium on postpartum depression in women.
Material and Method: This randomized clinical trial was conducted on 49 mothers referred to the Sabzevar health and treatment centers in 2017. Participants had the score of 14-28 on the Beck Depression Inventory-Second Edition (BDI-II), and their depression was confirmed by a psychiatrist through interview. They were randomly (with random blocking method) assigned to the treatment group (orange blossom 500 mg/Bid+ fluoxetine 20 mg) and control group (fluoxetine 20 mg plus placebo). Treatment was started on week 8 after delivery and continued for 8 weeks. Data were analyzed using SPSS software (version 16) and Kolmogrov-Smirnov, Chi-square, Independent and paired t-test and Mann-Whitney test. P<0.05 was considered statistically significant.

Result: The mean score of depression after the intervention in Citrus aurantium group was 9.2±4.02 and in control group was 17.12±3.56; there was a significant difference between two groups (p<0.001). Also, after the intervention, 15 women (62.5%) in Citrus aurantium group and 14%(in control group were without postpartum depression.

Conclusion: The use of Citrus aurantium along with fluoxetine in the treatment of mild to moderate postpartum depression is more effective than fluoxetine alone. So, it can be used as an alternative in treatment of postpartum depression.


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Background: Body image altered is the most important psychosocial concern associated with breast cancer. Yet, there is a paucity of information regarding strategies for coping with this problem. This study aimed to explore Iranian breast cancer women’s strategies for coping with body image altered.

Methods: This qualitative study was conducted in 2017–2018. A purposive sample of 36 women with breast cancer was selected with maximum variation from three healthcare centers in Alborz province, Iran. Data were collected by semi-structured interviews and analyzed by performing conventional qualitative content analysis.

Results: The main theme of the study was “reconstruction of feminine identity” with the six main categories of physical appearance improvement, active information
seeking, self-care for managing limitations, psychological self-empowerment, maintaining maternal role, and maintaining wife role.  

**Conclusion:** Iranian breast cancer women’s strategies for coping with body image altered are multidimensional and are mainly based on personal resources. Breast cancer women use these strategies to reconstruction of their feminine identity. Health policy-makers can use the findings of the present study to develop interventions and programs for improving breast cancer women's body image care.  

**Keywords:** Breast cancer, Body image altered, Coping, Feminine identity, Qualitative study

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**Comparison of the Current Status of Caesarean Delivery in the Country's Hospitals with the Hospitals of East Azarbaijan Province In 2018**

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**Background:** Caesarean section has played an important role in decreasing mortality and maternal complications in najran and fetus during the last century and has become a global problem due to the increase in statistics, as the cesarean section has exceeded the standard of the global health organization (15%). This research The aim of this study was to compare the current causes of cesarean delivery in the country's hospitals with hospitals in East Azarbayjan province in 2018.

**Material And Method:** This study is a descriptive cross-sectional study. The data have been extracted and analyzed based on the information recorded in the Iman system (Maternal Baby System).

**Results:** Based on the results of the study, the age of childbirth under 16 years of age was 0.26 and in the province 0.39, the age of 17-16 years in the country was 0.48, 0.84, 18.58, 83.89, 83.30, and more than 35 years, 15.36 and 15.45 respectively. Cesarean section due to previous cesarean section or cervical scars in 54.03% of the country and 51.20% in the province, fetal distress in the country 12.55 in the province, 9.87 in the country, abnormal distress in the country 0.008, problems with the couples in the country 1.94 and in the province 3.13, 03 percent, and 0.66 percent, Dostouchi is 4.92 and 11.61 percent in the province, and 15.61 percent in the country, and 15.83 in the country.

**Discussion and conclusion:** Considering the high rates of previous cesarean section and uterine cataract, the first reason is high. Therefore, counseling and education of mothers in the last trimester of pregnancy and increasing awareness of families of complications of delivery by cesarean section during first pregnancy and improvement of related health services, involvement of midwives in labor The natural and emotional factors of women's physicians for non-performing cesarean section,
with the exception of indications, and the adoption and implementation of rules for dealing with people who work contrary to the guidelines, will have a more favorable outcome.

**key words**: Cesarean delivery, Relevant causes, Hospitals of the country, Hospitals in the East Azerbaijan province

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**Investigating Patient Safety in Women's Gynecological Surgery Room**

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**Background and Aim**: Women's operative room as one of the main units in the hospital is the most important stage in the treatment of patients. Due to the physical characteristics, available gases and the use of different electrical devices, observance of safety points is very important for patients and staff. The aim of this study was to investigate the safety of patients in the gynecological surgery room.

**Methodology**: The study was conducted as a review of several articles between 2010 and 2019. The review was published in the journal and databases pubmed, scincedirect, elsiver, proquest, willy, spinger, google scular with key words such as safety, operating room, standard, women. The results were analyzed and graded as a schematic.

**Results**: The results showed that the operating rooms were safe (84.9%) in terms of overall safety and there was a small percentage of errors due to human errors and equipment. Today, with increasing attention from the Ministry of Health and the issuance of safety instructions, this safety percentage has increased. The formation of immunity and infection control committees in health centers is one of the important factors preventing the occurrence of an error and danger. Also, through training and implementation of individual and collective guidelines, measures such as personal protection against risk, the proper handling of suspected and ill cases, proper identification of the correct patient and correct operation, and timely notification of the error and risk play an important role Has reduced the risk of the patient in the operating room. The establishment of the medical engineering unit in the treatment centers and in the delivery of calibration and standardization of the operating room equipment has played an important role in reducing the risk and error.

**Conclusion**: The results show that improving the level of safety care and risk and infection control has a very important role in reducing non-safe cases in the operating
rooms of the treatment centers. By continuation and improvement of the level of these care, the patient's safety coefficient in the operating room, women increased.

**Key words:** safety, operating room, standard, women

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**Effect Obesity on Cesarean Section**

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**Background and Aim:** Maternal BMI is one of the factors affecting cesarean section. Research shows that cesarean section rates in obese women are higher than in women with normal weight. The purpose of this study was to determine the effect of maternal obesity on cesarean rate.

**Methodology:** The study was conducted as a review of several articles between 2010 and 2019. Reviews in the journal and pubmed, scincedirect, elsiver, proqust, Willy, springer, google scular databases with key words such as obesity, pregnant women and cesarean section. The results were analyzed and graded as a schematic.

**Results:** The proportion of women with overweight and obese women with cesarean rate was significantly higher than that of normal women. Also, the results showed that adverse effects of neonate such as macrosomia, severe labor, delivery dystocia, hypertension and pre-eclampsia were higher in obese mothers, which increases the delivery of cesarean section. Also, complications of surgery such as postpartum hemorrhage and open hematoma and hematoma were higher in obese women.

**Conclusion:** According to the results of this study, maternal overweight and obesity are considered as a major risk factor for cesarean section. Due to increased complications during and after surgery, these consequences should be considered in health planning.

**Keywords:** Cesarean section, Obesity, Pregnant woman