



A STUDY OF HISTOPATHOLOGICAL SPECTRUM OF ENDOMETRIAL LESIONS IN ENDOMETRIAL BIOPSIES IN DEPARTMENT OF PATHOLOGY, SRI SIDDHARTHA MEDICAL COLLEGE, TUMKUR

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ABSTRACT

Background: Endometrial biopsies and curettage samples plays an important role in identifying the cause of abnormal uterine bleeding at the earliest. This study is done to know the histopathological spectrum of endometrial lesions in endometrial biopsies in patients who came with complaints of abnormal uterine bleeding, which helps in proper management of abnormal uterine bleeding cases. **Aim:** To study the histopathological spectrum of endometrial lesions in the endometrial biopsies received in the department of pathology of Sri Siddhartha Medical college, Tumkur.

Material and Methods: This was a retrospective study done to study the histopathological spectrum of endometrial lesions received in the department of Pathology, Sri Siddhartha Medical college, Tumkur. Hundred requests were collected and studied.

Results: Out of 100 cases, the most common findings was Secretory endometrium in 34 cases(34%) and Endometrial Hyperplasia in 33 cases(33%). Maximum number of cases of AUB were seen in the age group of 40-50 years (45 cases i.e.,45%). Incidence of Endometrial carcinoma was 1 in 100.

Conclusion: Histopathological examination plays a vital role in diagnosis and treatment of Abnormaluterine bleeding.

Keywords: Histopathological spectrum, endometrial lesions, endometrial biopsies.

RESEARCH ARTICLE

INTRODUCTION

Histopathological examination of endometrial biopsy is the gold standard for the diagnosis of abnormal uterine bleeding.

Abnormal uterine bleeding is very common problem seen in gynecology OPD in India. The reported prevalence of abnormal uterine bleeding is around 17.9%. It affects the quality of life and psychological condition of women who suffer from it. The cause of abnormal uterine bleeding differs in different age group. It can be caused by both organic and functional causes.

The International Federation of Gynecology and Obstetrics (FIGO) has developed a system called PALM-COEIN for classifying the etiology of AUB⁽¹⁾. It includes Polyp, Adenomyosis, Leiomyoma, Malignancy, Coagulopathy, Ovulatory dysfunction, Endometrium, Iatrogenic and Non-classified. Endometrial biopsies and subsequent histopathological examination remain the gold standard for diagnosis of the causes of AUB.

AIM AND OBJECTIVES

Aim: To study histopathological spectrum of endometrial lesions in endometrial biopsies received in Pathology department for the duration of two weeks.

Objectives:

- To collect request forms related to histopathology of Endometrial biopsy in Department of Pathology.
- To tabulate the parameters like age, presenting complaints and clinical diagnosis of endometrial biopsies.
- To collect the histopathological diagnosis given to biopsies.
- To analyse the histopathological spectrum of lesions with respect to age.

MATERIAL AND METHODS

Histopathological request forms of endometrial biopsies were collected from the files from the department of pathology SSMC Tumkur. Clinical details and histopathological diagnosis were noted and analysed. Hundred cases were studied for the duration of two weeks from 10th April 2023 to 22nd April 2023.

RESULTS

Table 1. Histopathological pattern of Endometrium in AUB

Histopathological diagnosis	Number of cases	Percentage (%)
Secretory Endometrium	34	34
Proliferative endometrium	19	19
Atrophic endometrium	1	1
Decidualized endometrium	3	3
Pill endometrium	2	2
Endometrial hyperplasia	33	33
Endometritis	3	3
Endometrial polyp	3	3
Adenomyosis	1	1
Adenosquamous carcinoma	1	1
Total	100	100

Table 2. Age wise distribution of cases

Age group (in years)	Number of cases	Percentage (%)
20-30	7	7
30-40	25	25
40-50	45	45
50-60	17	17
60-70	6	6
Total	100	100

Table 3. Age group of women with AUB

Age group	Number of cases	Percentage (%)
Reproductive (<40)	32	32
Perimenopausal (40-49)	45	45
Post-menopausal (>49)	23	23

The most common pattern in the histopathological examination of presenting cases is Secretory endometrium in 34% (34) and Endometrial hyperplasia in 33% (33). This was followed in frequency by Proliferative Endometrium 19% (19), Endometritis 3% (3), Endometrial polyp 3% (3), Decidualized endometrium 3% (3), Pill endometrium 2% (2), Atrophic endometrium 1% (1), Adenomyosis 1% (1), Adenosquamous carcinoma 1% (1). 1 in 100 women has Endometrial carcinoma.

The age group of patients in this study ranged from 20 to 70 years. Maximum number of cases were in the age group of 40-50 years of 45 cases (45%), followed by 25 cases (25%) in 30-40 years, 17 cases (17%) in 50-60 years, 7 cases (7%) in 20-30 years and 6 cases (6%) in 60-70 years age group.

The common group of women with Abnormal uterine bleeding is Perimenopausal women in the age group (40-49 years), followed by Reproductive age group (<40 years) and then the Postmenopausal women (>40 years).

DISCUSSION

In our study, the most common women presenting with AUB is in the age group of 40-50 years similar to S. Prasannalakshmi⁽³⁾, Nivedita Singh *et al.*⁽⁵⁾, Jyoti Brahmaiah *et al.*⁽⁴⁾ and Zothansangi *et al.*⁽¹⁾

The perimenopausal age group (40-49) accounted for 45% of AUB cases similar to Nivedita Singh *et al.*⁽⁵⁾ However, in Dwivedi SS *et al.*⁽²⁾ it is Reproductive age group (<40).

In our study, most common Histopathological findings are Secretory endometrium and Endometrial hyperplasia. However, in S. Prasannalakshmi⁽³⁾ and Zonthansangi *et al.*⁽¹⁾ Proliferative endometrium and Secretory endometrium are the common Histopathological findings.

In our study, Endometrial Carcinoma accounts for 1% cases similar to Jyoti Brahmaiah *et al.*⁽⁴⁾ however, in Nivedita Singh *et al.* and Zothansangi *et al.*⁽¹⁾ it accounts for 2% cases.

Secretary endometrium and Endometrial hyperplasia are the most commonly observed Endometrial lesion. They are predominantly seen in 40-50 years of age. Early diagnosis and proper treatment of Endometrial hyperplasia are essential to prevent Endometrial carcinoma, as Adenocarcinoma of endometrium is often preceded by Endometrial hyperplasia.

CONCLUSION

Variety of histopathological diagnosis were made out of which Secretary endometrium were majority (34%) and malignancy was least (1%). This helps in early diagnosis and treatment of endometrial lesions.

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