

# A COMPARISON BETWEEN DIENOGEST CONTAINING ORAL CONTRACEPTIVE PILLS AND TRANEXAMIC ACID IN DYSFUNCTIONAL UTERINE BLEEDING

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## Introduction

Heavy menstrual bleeding (HMB) has been traditionally defined as an excessive amount of uterine bleeding (>80 mL per cycle) that occurs at either regular or irregular intervals. It can have an impact on a woman's physical, mental, and emotional well-being. Its etiology can be local, systemic, or iatrogenic. No specific etiology was identified in half of all cases, and such cases are classified as dysfunctional uterine bleeding. It is reported that, the prevalence and incidences of HMB varies in different populations, with the overall prevalence fluctuating between 10% and 30%, necessitating the use of a number of medical resources. Owing to the confusion in and inconsistency of nomenclature, the lack of research and classification methods of various etiological criteria has hindered the research and management of HMB for quite a long time. The FIGO Systems of Nomenclature of Terms and Classification of Causes of AUB in the Reproductive Years.

## Aim of the work

The aim of this study is to compare the efficacy of dienogest containing combined contraceptive pills and Tranexamic acid in the control of dysfunctional uterine bleeding.

## Subjects and methods

This study was a randomized clinical trial conducted upon 169 patients complaining of dysfunctional uterine bleeding who were recruited from gynaecology clinic and ultrasound unit at El-Shatby Maternity University Hospital during the period from September 2022 to April 2023. This study was conducted on 180 women who complain about DUB. The 180 women will be randomly classified into 2 groups, a group I (90 cases) was receive dienogest containing oral contraceptive pills, 1 tablet per day for 21 days then a pill-free week for 3 successive menstrual cycles, and group II (90 cases) will receive tranexamic acid through, 3 tablets per day during menstrual flow for 3 cycles. The 2 groups were assessed and compared before and after the end of the period.

## Results

Table (1): Comparison between before and after receiving treatment according to amount of menstrual blood in the number of pads and Hb in group I (n=90)

	Before receiving treatment	After receiving treatment	p
Amount of menstrual blood in the number of pads	7.42 ± 1.14	4.83 ± 1.0	<sup>t</sup> p<0.001*
Hb	9.23 ± 0.56	10.16 ± 0.55	<sup>t</sup> p<0.001*
Duration of menses in the number of days	8.29 ± 1.10	5.13 ± 0.94	<sup>t</sup> p<0.001*
Rhythm of the cycle			
Regular	32 (35.6%)	74 (82.2%)	<sup>McN</sup> p<0.001*
Irregular	58 (64.4%)	16 (17.8%)	

SD: Standard deviation      t: Paired t-test      McN: McNemar test  
p: p value for comparing between before and after receiving treatment  
\*: Statistically significant at p ≤ 0.05

Table (2): Comparison between before and after receiving treatment according to amount of menstrual blood in the number of pads and Hb in group II (n=90)

	Before	After	p
Amount of menstrual blood in the number of pads	7.19 ± 1.14	4.74 ± 0.92	<sup>t</sup> p<0.001*
Hb	9.23 ± 0.56	10.03 ± 0.56	<sup>t</sup> p<0.001*
Duration of menses in the number of days	8.18 ± 1.14	4.97 ± 0.88	<sup>t</sup> p<0.001*
Rhythm of the cycle			
Regular	35 (38.9%)	58 (64.4%)	<sup>McN</sup> p=
Irregular	55 (61.1%)	32 (35.6%)	0.003*

SD: Standard deviation      t: Paired t-test      McN: McNemar test  
p: p value for comparing between before and after receiving treatment  
\*: Statistically significant at p ≤ 0.05

## Conclusion

- 1- no statistically significant difference between 2 groups regarding drug impact on duration and amount at the end of last cycle.
- 2-Dienogest containing oral pills are statistically better than tranexamic 3-acid regarding its effect on cycle rhythm
- Both drugs are effective in management of DUB.
- 4- no statistically significant difference between 2 groups regarding CBC parameters as Hb level, MCV, MCH, and serum ferritin level.

