

GGynaecolog management

1. WHITE DISCHARGE : = Vaginitis - Trichomonas vaginitis /Candidiasis/Bacterial vaginosis.

- a. T.Metronidazole(400) 1tab BD x 7d
- b. T.Doxycycline (100) 1tab BD x 10d/7d
- c. T.Fluconazole (150) 1tab on D1,D4,D7 or once wkly x 4 wks.

.....ete na komle.....

- a. T. Azithromycin(500) 1tab OD x 5d
- b. T.Itraconazole(100) 1tab BD x 10d

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Candid CL vaginal gel

Candid CL vaginal suppository/Pessary 1 P/v odhs x 6 night.

Cansoft CL vaginal gel / Pessary

* Suppository = Pessary.

* Pessary dbo jodi Khub chulkay or foul smelling.

* ekathe metro r doxy na die metro te kaj na hole tokhn doxy or Azithro dite hbe (by Nur da)

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#Antibiotics can be used in pregnancy :

T.Cefixime (200)

T.Cefuroxime (500)

T.Azithro(500)

T.Metrogyl (400) if >16wks in low dose.

T.Coamoxyclav (625)

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* common pathogen : Clamydia... Azithro & Doxy act on this pathogen.

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Case 1 : 55yr Old female, c/o - White discharge

Adv :

USG LA & Pelvis

Pap Smear (Cervical)

T.Doxycycline (100) 1tab BD x 5d

T.Metrogyl (400) 1tab TDS x 5d

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KIT :

Kit 2 & 6 ---Commonly used in White Discharge.

SAF kit : = Secnidazole (2tab) 1gm + Azithro(1tab) 1gm + Fluconazole (1tab) 150mg

2. CONTRACEPTION :

A) Inj.Depo Provera (150) im... Every 3mnths.

or

Inj. Antara[150] im.....Every 3 months.

(150/1ml/vial)

[DMPA/MPA = Depo Medroxy Progesterone Acetate]

[IM = Deltoid / Gluteus muscle]

B) Emergency Contraception / Post-Coital Contraception :

a. T.UNWANTED 72 (1.5) 1tab stat.

b. T.Ezy pill (1.5) 1tab stat.(Govt. of India Supply)

[LNG= Levonorgestrel (1.5)]

- Should be taken within 72 hrs(3d) of intercourse...upto 120 hrs(5d).

C) OCP : spacing of birth/ Newly married couple.

Composition :

- Estrogen : Ethinyl Estradiol(EE)

- Progesterone : Levonorgestrel (LNG),Desogestrel(3rd gen), Nor Ethisterone,Gestodene(3rd gen),Nor-gestimate (3rd gen)

Brand Name :

T.Ovral L [LNG + EE]

T.Choice [LNG + EE]

T.Suvidha [LNG + EE]

T.Novelon [Desogestrel + EE]

T.Intimacy plus 2 [Desogestrel + EE]

T.Ovral G [Norgestrel + EE]

* T.Dronis 30 [Desiprenone + EE].... told by Asmi mam... Khub dami.

Missed pill :

* 1 pill missed - 24 hr r modhye jokhon e mone porbe 1 tab khye nite hbe...trpr as per schedule khete hbe.

* 2 or more pill missed :

- take 2pills on each of the next 2days & continue rest as per schedule.

- Extra precaution for next 7 days by using Condom/ avoiding sex.

Somp points :

- Pill should be started on... Day after abortion.

- Non lactating mother : pill start After 3wks of childbirth.

- Lactating mother : pill should be withheld fr 6 mnth

D) KIT :

SAF kit

3. AMENORRHEA :

A) 1° Amenorrhea :

Case :

14 yr old female, No menarche till now.

O/E : Breast buds,Nipple, Areola present but underdeveloped, No axillary & pubic hair

Adv :

USG - LA & Pelvis

.....at review.....

USG : Mild fluid in POD (uterus present)

Adv :

T.Valest (2mg) 1tab ODHS x 20d

T.Meprret(10) 1tab x 10d from D16 of Valest.

Blood for CBC,TSH, FSH.

B) 2° Amenorrhea :

UPT

TSH

Prolactin

Others [Hb%,FSH & LH(on D2 of Cycle)]

T.Medroxy Progesterone acetate (10) 1tab BDPC x 5d or 7d & wait for 14-21 d for withdrawal bleeding.

[T.Deviry(10)] or [T.Meprate(10)]

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If bleeding > PCOS/Anovulation.

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If bleeding occurs & Pt wants to concieve.... Give T.Folic acid(5) 1 tab OD x 1 mnth.

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★ if PRL increase : T.Cabergolin(2.5) BD wkly.

[T.Cabergoline (0.25) once wkly x 12 wks....Dibyendu Sir]

★ if TSH increase : T.L-Thyroxine () 1tab ODAC.

PCOS :
* Sunit Sir :
Hb%
TSH
USG uterus & Adnexa.
T.Deviry(10) 1tab BD x 7d.
.....trpr.....
T.Novolon 1tab OD x 21d.....7d gap x 3 cycles.

★ For Ovulation induction : jodi pt concieve korte chay.....
1.T.Letrozole(2.5) from D3 - D7 x 3 cycle Foliculometry on D10 (to detect ovulation) & Regular intercourse to be continue ... by Dibyendu sir.
2.T.Folic acid (5)
or
T.CCQ(25) 1tab x 30d
[Clomifene + Coenzyme Q10]
E1:E2 = 2:1 (in PCOD)
E1:E2 = : 1:2 (Normally)
E1 = Estradiol

4. DYSMENORRHEA : = Pain during Menstruation.
T. Drotin M 1tab BD x 3 days during menstruation.

[Mefenemic acid = NSAID + Drotin = Antispasmodic drug]
or
T.Meftal spas 1tab BD x 3d during menstruation.
[Mefenemic acid(250mg) + Dicyclomine/Dicycloverine 10mg (= Anticholinergics-- relieves muscle spasm)
T. Mala N 1tab ODHS from D1 x 3mnths.
(makes the cycles anovulatory bcz pain occur if ovulation occur)

5. AUB =
a) Menorrhagia :
T.Nor-ethisterone (5) 1tab TDS x 21d
T.Tranexa(500) 1tab TDS x 3d
USG L/A & Pelvis.
Blood fr TSH,FBS,PPBS.
case 2 :
41yr old female, c/o- Menorrhagia
Adv :
T.IFA 1tab OD x 1mnth.
USG LA & Pelvis with Endometrial Thickness
Pap Smear (Cervical)
Blood for Hb%,FBS,PPBS.

Case 3 :

45yr old female, c/o - Menorrhagia

Adv :

T.Nor-ethisterone (5) 1tab TDS x 21d

T.Tranexa (500) 1tab x 3d

T.IFA 1tab OD x 1month.

USG LA & Pelvis with Endometrial Thickness.

Pap Smear (Cervical)

b) Polymenorrhoea :

T.IFA 1tab OD x 30d

USG L/A & Pelvis

Blood for TSH

Review with reports.

c)

Endometrial thickness :

- Reproductive age gr : 10-11 mm

- Perimenopausal age gr : if 10-11 mm, then vabte hbe.

- Post menopausal : < 5 mm

6.Abortions : = Pregnancy loss < 20wks.

USG defn :

Drug schedule :

D1 - T.Mifepristone(200) 1tab stat.

D3 - T.Misoprostol(200) 2tab stat.

D15 - Visit fr Abortion or not.

[Mifegest kit, Unwanted kit]

A pregnant female, c/o - bleeding pv in 1st/ 2nd trimester.....

DD:

a) Abortion

b) Ectopic Pregnancy

c) Molar pregnancy

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Case 1 :

HO- 2month Amenorrhea & took Abortifecent, CO - Bleeding pv, USG - Embryonic Demise.

Adv :

T.Miso(200) 2tab Stat S/L &

T.Miso(50) 1tab 4 hrly S/L... 6 as such

.....if os not opened.....

Give Miso(200) P/V

.....
Cerviprime gel can be given

7. Infertility (Inv in FEMALE) :

B/F CBC, LFT, S. PRL, LH, FSH, AMH.

USG LOWER ABD + PELVIS

HSG

8. Ovarian cyst :

a) Reproductive age gr :

- size: 3-5cm... Wait & Watch.

- size: 5-7cm...f/u with USG.

- size: >7cm.. Surgery.

b) Extreme of age:

Postmenopausal: CA-125 > 35IU.... Surgery.

#Pre-pubertal if AFP,HCG,LDH raised... Surgery.

Case 1 :

21yr Female, usg: Ovarian cyst - 53mmx34mm,pain abd.

Adv :

T.Drotin(40) 1tab BDPC x 10d

T.Pan40 1tab ODAC x 10d

Inv:

Blood for AFP,LDH,B-HCG,CA-125

Case 2 :

Post menopausal woman,USG : Ovarian cyst

27mmx28mm.

T.Drotin(40) BD x 5d

CA 125

Case 3 :

55yr Female,usg- Complex ovarian cyst(11x4cm)

Adv :

Blood for CA-125

9. PID :

c/o - Pain abd

usg - PID

Adv :

T.Doxycycline (100) 1tab BD x 5d

T.Metrogyl (400) 1tab TDS x 5d

T.PCM(650) 1tab TDS x 5d

10. UTI :

c/o - Burning Micturition (*)

- Frequent Micturition

- Urgency of Micturition

Adv :

T.Nitrofurantoin (100) 1tab BD x 5d

T.Urispas 1tab BD x 7d [Flavoxate]

Syp. Alkasol 2tsf TDS x cont

Plenty of Water intake (3-4 L/Day) [Fr Hydration]

Clean Vulvar region daily.

Antibiotic should be continued for 7-10 d.

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* In reinfection appropriate Antibiotic to be continued fr 2 wks.....Followed by T.Norfloxacin(400) OD x 4-6 month... Or

T.Nitrofurantoin(50) OD x 4-6 month.
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Prevention :

- Perineal Hygiene [Cleansing vulvar area daily]
- Void Urine immediate after Coitus.

Causes :

- Sexual intercourse
- Full Bladder
- Catheterization
- Estrogen kom thakle (post menopausal woman)

11. FIBROID :

- a) Asymptomatic : Nothing to do
- b) Symptomatic : Heavy Menstrual Bleeding(Menorrhagia)
 - OCP
 - Progesterone
 - Tranezamic Acid

- T.Mala N 1tab ODHS x 21d fr 3 cycle

or

T.Nor-ethisterone (5) 1tab TDS/BD x 21d

- T.Tranexamic Acid(500) 1tab TDS x 5d

- T.IFA / Ferrikind 1tab OD x 30d

- BT

-check BP,Pallor.

Case 1

12. UTI :

c/o - Burning Micturition

Adv :

T.Nitrofurantoin (100) 1tab BD x 5d

T.Urispas 1tab BD x 7d

Syp. Alkasol 2tsf TDS x cont

12. FIBROID :

- a) Asymptomatic : Nothing to do
- b) Symptomatic : Heavy Menstrual Bleeding(Menorrhagia)
 - OCP
 - Progesterone
 - Tranezamic Acid

- T.Mala N 1tab ODHS x 21d fr 3 cycle

or

T.Nor-ethisterone (5) 1tab TDS/BD x 21d

- T.Tranexamic Acid(500) 1tab TDS x 5d

- T.IFA / Ferrikind 1tab OD x 30d

- BT

-check BP,Pallor.

13.Molar Pregnancy :

m/m : Suction Evacuation.

Adv :

Inj.TT(0.5 ml) IM stat.

Inj.Methergine 1 amp IM stat

Inj.Voveron 1amp IM stat & sos

Inj. CTX 1gm IV BD

Inj.Pan 40 IV OD

IVF with RL:NS (1:1] 8 hrly

Send to MGW

Specimen sent for HPE.

Blood for Beta HCG

14.Bleeding PV :

1st : UPT

T.NE(5) 1tab TDS x 21d or OCP

T.Tranexa(500) 1tab TDS x 5d

T.Cifran (500) 1tab BD

IVF with RL (if BP low)

USG for FPP (if UPT +)

USG LA & Pelvis (If UPT -)

BT(if pallor)

*check BP & Pallor

* Ask the pt any abortifient taken or not.

Abortifient :

15. VH + PFR : = Vaginal Hysterectomy + Pelvic Floor Repair = Done in Uterine Prolapse.(2° & 3°)

Adv :

IV Fluid with RL 6hrly.

Inj.CTX 1gm IV BD

Inj.Metrogyl 100ml IV TDS

Inj.GM(80) IV BD

Inj.Reglan

Inj.Rantac

Inj. F+C

Pack to be removed after 24 hrs

Send to recovery

BT - 1 unit at evening.

Uterine Prolapse :

1° = External os(EO) just inside the Vagina

2° = EO protrudes thru vaginal introitus, but body inside vagina.

3° = EO & Body of Uterus outside Vaginal introitus

= Complete Prolapse

Case 1 : 70yr old Female, 3° Prolapse with Decubitus Ulcer

Adv :

Plan - VH + PFR

Mupirocin oin L/A BD × 7d

Pre-Op investigation

Pre-Op adv :

- NPM from 11pm today.

- IVF with RL(500) 8 hrly

- Inj CTX 1gm IV BD

-Inj Pan 40 iv OD

- Inj.Ondem 4gm iv BD

- Send the pt to OT at....on....

16. Male Infertility :

Semen Analysis :

1. Volume : > 1.5 ml

2. PH: 7.2

3. Sperm concentration: > 15 million /ml

4. Sperm count: > 39 million/ejaculate

Average sperm count 60 -100 million / ejaculate

5. Sperm morphology

Strict eriteria > 4% normal

6. Total motility > 40%

7.ProgresSive Forward motility > 32%

8. Viobility > 58%

9.WBC count < 1 million/ml

[DOC: any intection in male qenital tract -- Doxycycline]

17.Labial Adhesion = Absence vaginal Opening.

Tt:

-Adhenolysis

- Estrogen Cream... Aplly BD x 7d

18.Adenomyosis :

Case: 24 yr female, P3+0, c/o - Polymenorrhea.

.....Adv :

Usg L/A & pelvis

T.IFA

T.Cefixime

.....,at Review after some days

USG : Adenomyosis.....

Adv :

T.Regesteron (5) 1tab ODHS from D5 - D25 of Menstrual cycle.

Blood for CBC,FBS,PPBS,TSH.LFT

.....at review after some days.....

LFT... Deranged, Rest - N

Adv :

Stop T.Regesteron (as it causes Liver damage)

T.Udiliv (150) 1tab BD x 2wks

Boiled diet

Rpt LFT