

## **MASTOPATHY: A NEW PERSPECTIVE ON AN OLD PROBLEM FROM A GYNECOLOGIST'S POINT OF VIEW**

***Sadullaeva Laziza Erkinjonovna***

*Asia International University*

**Abstract:** *Mastopathy is one of the most common benign breast disorders, affecting 30–70% of women, with higher prevalence in those with gynecological conditions. This study evaluates the clinical efficacy and safety of prolonged-use monophasic microdose gestodene-containing combined oral contraceptive (COC) in women with diffuse fibrocystic mastopathy. A total of 60 women aged 18–45 were observed; 30 received the COC in a 63/7 prolonged regimen, while 30 were treated without hormonal therapy. Assessment included ultrasound, mammography, clinical examination, and patient-reported symptoms.*

**Keywords:** *mastopathy, fibrocystic breast disease, hormonal therapy, gestodene, combined oral contraceptive, gynecology, proliferative breast changes*

**Results** demonstrated that after six months of therapy, 90% of patients in the COC group experienced clinical improvement, with significant reduction in mastalgia and breast tension. Palpatory evaluation showed decreased severity of fibrocystic changes in 30% of patients. The medication was well tolerated; only 3.3% reported minor menstrual irregularities. Findings support early initiation of hormonal therapy for diffuse mastopathy, particularly in women under 35. Prolonged regimen COC provides effective management of proliferative breast changes, representing a safe and targeted therapeutic approach.

### **Introduction:**

Mastopathy is characterized by disruption of the balance between epithelial and connective tissue components of the breast, leading to a wide spectrum of proliferative and regressive changes. The condition is hormonally sensitive, influenced by estrogen, progesterone, and prolactin receptors. It is often associated

with gynecological disorders, including uterine fibroids, endometrial hyperplasia, and adenomyosis, highlighting the interconnected nature of the reproductive system. Early identification and targeted therapy can prevent progression to malignancy.

### **Methods:**

A prospective study was conducted with 60 women with diffuse fibrocystic mastopathy. Patients were randomized into two groups:

- Group 1 (n=30): complex therapy including prolonged-use (63/7) microdose monophasic gestodene-containing COC, vitamins, adaptogens, and phytotherapy.
- Group 2 (n=30): similar therapy without hormonal correction.

Clinical evaluation included palpation scoring (0–6), ultrasound and mammography, and subjective symptom assessment (mastalgia, breast tension).

Treatment duration was six months.

### **Results:**

- In the COC group, 90% reported improvement in breast pain and tension.
- Palpatory scores decreased in 30% of patients; granulomatous and fibrous changes regressed significantly.
- No significant adverse effects were observed; menstrual cycle control was maintained in 96.7% of participants.
- Hormonal therapy was most effective in women under 35, emphasizing early intervention.

### **Conclusion:**

Prolonged-use microdose gestodene-containing COC is a safe, effective, and targeted therapy for diffuse fibrocystic mastopathy. Early hormonal intervention improves clinical outcomes, reduces breast tissue proliferation, and enhances quality of life. These findings underline the importance of a gynecological approach to breast disorders, integrating hormonal management with supportive therapies.

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