### 8 Obstetrics

The trophoblast has two layers, outer syncytiotrophoblast and inner cytotrophoblast. Syncytiotrophoblast grows rapidly, small cavities appear within it, which arrange themselves radially called lacunae, separated by partition of syncytium called trabecullae. Endometrium is eroded and blood is filled in lacunar space.

Cytotrophoblast multiplies and grows to enter trabeculus called primary villus. Extraembryonic mesoderm from inner side of mesoderm enters primary villus to produce secondary villus, when blood vessels are formed in villus, it is tertiary villus. Foetal blood thus circulates in villus and maternal blood in intervillous space. Cells of cytotrophoblast enter the full thickness, called cytotrophoblastic shell and syncytium from deciduas. The villi are attached to the embryonic mesoderm at foetal side and with cytotrophoblastic shell on maternal side are like pillars called anchoring villi. The mainstem of anchoring villi is called truncus chroii and its branches are called ramuli chroii.

Thus a placenta is subdivided by intervillous space. The subdivisions are called cotyledons.

### LAQ 10 What are the different types of placental abnormalities?

These may be grouped as following

### 1. Abnormal implantation in uterus (placenta previa).



1st degree



2nd degree

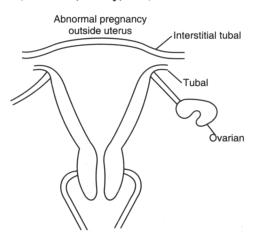


3rd degree



4th degree

### 2. Implanted outside uterus (viz. tube, ovary, etc.).



### SAQ 15 What is sarcoma cervicis botryoides?

The grape-like sarcoma of infancy from either cervix or vagina. Histologically, grape-like sarcoma in infancy shows myxomatous tissue with sarcoma cells with covered epithelium.

#### What are the clinical features of malignant uterine polyps? LAQ 16

It generally occurs in childbearing age rarely on menopause. Sarcomatous polyp may arise in infants.

### Clinical features Symptoms

- White discharge
- Metrorrhagia
- · Congestive dysmenorrhoea
- Menorrhagia
- Irregular vaginal bleeding in menopausal woman
- Something coming down P/V or retention of urine.

Polyp can be seen or palpable which is friable and prone to haemorrhage

### **SAQ 17** What is endometriosis?

It is functional ectopic endometrium, viz.(i) uterine endometriosis or adenomyosis, (ii) extrauterine endometriosis (ovary, peritoneum, laparotomy scar, appendix, bladder, urethra, umbilicus, hernia, fallopian tubes, lungs, pleura).

### **SAQ 18** What are the different theories of endometriosis for its ectopic location?

- Implantation theory of Sampson.
- · Direct extension theory of Cullen.
- Serosal metaplasia theory of Iwanoff.
- · Venous dissemination theory of Javert.
- Lymphatic dissemination theory of Halban.

### SAQ 19 What is chocolate cyst or tarry cyst or endometrial cyst?

It is ovarian endometriosis producing chocolate coloured cyst of  $1\frac{1}{2} - 2$ " in diameter adherent to surrounding structure containing menstrual blood. There may not be endometrial lining, but there is connective tissue, macrophages ingested blood pigments (pseudoxanthoma cells).

# 38

## Oestrogen and Progesterone Hormone Therapy

### SAQ 1 What are the sources of oestrogens?

Oestrogen induces oestrous in animals. In human being, oestradiol, secreted by ovary, is the major source of it. It is also synthesized by graafian follicles, corpus luteum and placenta.

### SAQ 2 How does oestrogen act?

It binds to cytoplasmic receptors in target cells to regulate protein synthesis via nucleus.

### SAQ 3 Name some oestrogen preparations.



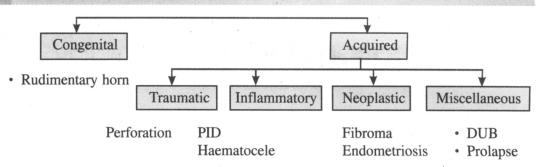
- Ethinyloestradiol
- Mestranol
- Tibolone

- Diethylstilbestrol (orally).
- · Hexesterol and divestrol (topically).

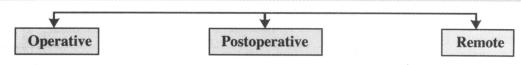
### LAQ 4 Mention some therapeutic uses of oestrogen.

- · Senile vaginitis
- · Hormone replacement therapy
- · Delayed puberty in girls
- Dysmenorrhoea
- Acne
- Hirsutism
- DUB
- · Suppression of lactation
- · Ca prostate
- OCP

### LAQ 4 What are the indications of hysterectomy?



### LAQ 5 What are the important complications of hysterectomy?



- Injury to bladder or rectum
- Haemorrhage
- · Anaesthetic hazard

- Shock
- Infection
- Vomiting
- · Paralytic ileus
- Bronchopneumonia
- Wound complications
- Vault prolapse
- Thrombosis

- Menopausal syndrome
- Arthralgia
- · Coronary disease

### LAQ 6 What are the indications of D/C operation?

# Indications for D/C Indications of only dilatation Indications of only curettage

- Dysmenorrhoea
- DUB
- Polyp
- Oligomenorrhoea
- Dysmenorrhoea (TB)
- · Infertility
- Endometrial carcinoma
- Choriocarcinoma.

- Spasmodic dysmenorrhoea
- · Insufflation for tubal patency
- · Cervical amputation
- Radium insertion
- Cautery
- · Draining pyometra
- · Cervical stenosis

• For endometrial biopsy.