

number of natural killers and helpers was reduced. At lectinohistochemical research the change of protective properties of slimy covering of endometrium as hyperproduction of neutral slime and reduction of sialic acids contents was revealed. It could promote stagnation of slime in a womb cavity, persistence of microorganisms in structures of its internal environment, cause development of inflammatory, dystrophic and dysregenerating processes in endometrium. Also it could matter in infringement of synthesis of SIgA and formation of local immunopathological reactions. After the base treatment and local immunocorrection therapy including 0,25 % a solution of derinat in 1 month it was registered amplification of production of secretory component and increased level of SIgA in repeatedly taken of endometrial biopsy specimens. The parameter of a parity CD4/CD8 came nearer to norm, a level of IgG-producing cells and fixed immune complexes was considerably decreased. The revealed frustration in production and distribution of glycoproteins in epithelial structures of a mucous environment of womb allow to recommend measures on improvement of drainage of surplus neutral of womb-s slime from reproductive tract and to include preparations - immunomodulators in complex therapy of this suffering. Thus amplification synthesis of glycoproteins riched by syalic acids was marked. The proof clinical recovery was reached in 97,5% of the women. At 60 % fruitless women the pregnancy which has finished by sorts was developed.

## P-197

### Results of radiation therapy of andometrial adenocarcinoma according to tumour. Differentiation

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Mixed radiation therapy of endometrial adenocarcinoma was given to 68 patients. Among them 36 (52,9%) patients had Stage I – histologicall provenhighly differentiated adenocarcinoma was revealed in 9 (13,2%), moderately differentiated – in 20 (29,4%), and poor differentiated – in 7 (10,3%); 22 (32,4%) – Stage II – histologicall provenhighly differentiated adenocarcinoma was revealed in 4 (5,9%) , moderately differentiated – in 14 (20,6%), and poor differentiated – in 4 (5,9%) and 10 (14,7%) – Stage III disease – histologicall provenhighly differentiated adenocarcinoma was revealed in 2 (2,9%), moderately differentiated – in 7 (10,3%), and poor differentiated -in 1 (1,5%). Total dose for mixed radiation therapy was 78–80 Gy to Point A and 50–60 Gy to Point B depending on the disease stage. 5-year survival of patients was 87,3% (I stage – 89,5±5,7%; II stage – 91,3±8,3%; III stage – 63,6±20,5%. In this case 5 (97,4%) died from relapses occurred regardless the stage of the disease, distant metastases to lymph nodes caused death of 1 (1,5%). Among them histologicall provenhighly differentiated adenocarcinoma was revealed in 2, moderately differentiated – in 3, and poor differentiated – in 1 patient.

## P-198

### The morphological analysis of outcomes of CEA and ferritin determination in peritoneal liquid of the patients with various gynecological pathology

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There are publications about CEA and ferritin (F) determination in blood serum at cancer and non-cancer pathology and other pathology, including gynecological one. The datas on the CEA contents in blood serum at cancer and non-cancer ovarium pathology are useful to screening and differential diagnosis a little. It is easy to receive peritoneal liquid with a punction through back of vagina and at diagnostic laparoscopy, which has direct contact to a tumor tissue.

The purpose of a research was morphological analysis of the CEA and F contents in peritoneal liquid at various gynecological pathology for the differential diagnosis.

Peritoneal liquid was received with a punction through back of vagina, and at operating interferences concerning gynecological pathology, and at diagnostic laparoscopy. CEA (50 patients) and F (31) were determined with radioimmunological method.

For all 13 benign epithelial ovarian tumors (5 mucous and 8 serous cystadenomas) the CEA levels were uniformly low (54,4±31,3 ng/ml). At ovarian cancer the CEA levels were hardly variable (20–500 ng/ml). For serous carcinomas (9 cases) the average CEA level was 46,0±19,8 ng/ml. For mucous carcinomas (6 cases) it was much above (348,2±40,1 ng/ml). The CEA levels in 2 cases of borderline serous ovarian cystadenomas did not differ from an average level of the benigns. At inflammatory processes (14 cases: chronic adnexitis, pelvioperitonitis) the &Scy;EA level met average for benign tumors. In 6 cases &ocy;f uteral myoma &Scy;EA was not revealed. The low F levels were characteristic for benign epithelial ovarian tumors, both serous (5 cases), and mucous (3 cases) on the average 43,4±31,3 ng/ml and 52,3±22,7 ng/ml accordingly. On the contrary, in all 9 cases of ovarian cancer (3 mucous and 6 serous) the F contents was more than 200 ng/ml. In 11 cases of chronic adnexitis the F contents was also high, and did not differ from ovarian cancer group. In 2 of 3 researched cases of uteral myoma the F contents was lowest. Thus, the high F levels were detected at ovarian cancer of various histological structure, and at ovarian inflammations. The high &Scy;EA levels from all epithelial ovarian tumors were observed only at mucous cancers, that alongside with cytological diagnostics can help in cancer diagnostics after ultrasonic detection of mucous cysts.

## P-199

### Benign and malignant pigmented lesions of the female genital tract (FGT). Report of 15 cases.

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**Introduction:** Benign and malignant pigmented lesions (PL) of the FGT are uncommon, predominantly affecting the vulva.

**Methods:** We report the clinical and pathological features of the 15 PL of the FGT retrieved in a 12-year, retrospective analysis at our Department. Patient records and archival pathology specimens of 7 benign and 8 malignant PL of the FGT, were reviewed.

**Results:** The mean age of all patients was 47 (range, 28–67). Three patients had vulvar nevi (2 intradermal and 1 dysplastic), while blue nevi ranging 2–10 mm in diameter were accidentally discovered in the endocervix of the hysterectomy specimens in four other patients. Vulvar primary malignant melanomas (PMMs) were uncommon (4 cases), comprising 2.5% of female PMMs and 4.3% of all vulvar malignancies diagnosed between 1989 and 2000. Con-

trary to other studies, all vulvar PMM in our series were of nodular type, ranging 3–13 mm in depth according to Breslow and III-IV level according to Clark. Within the same period, two patients with malignant PL of the uterine cervix were detected, accounting for 0.13% of all females with malignant cervical neoplasms. One of them had a PMM diagnosed in advanced clinical stage (FIGO III), and the other patient had an unusual pigmented squamous cell carcinoma in IIB postoperative stage. There were also 2 cases of delayed unilateral ovarian metastases of cutaneous PMM. The diagnosis in all cases of non-vulvar pigmented lesions was confirmed by immunohistochemistry.

**Conclusions:** Although uncommon, PL especially those affecting rare localizations must be considered as diagnostic possibility in FGT.

## P-200

### Alteration of stromal-epithelial interaction in chronic endometritis associated with recurrent abortions

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The chronic endometritis (CE) is considered to be one of the reasons of the recurrent pregnancy loss. Currently pathogenesis of the fetal wastages in CE remains unclear.

**Aim:** To study the stromal-epithelial interaction in CE from patients with recurrent pregnancy loss.

**Methods:** Biopsies of endometrium from 25 women with recurrent abortions in anamnesis combined with CE were investigated with antibodies against the extracellular matrix components (ECM) (collagen types I (CoI), III (CoIII), IV (CoIV), VII (CoVII), merosin, fibronectin, tenascin (TN)), CD4, CD8, CD56, CD68, IgG, Ki67,  $\alpha$ SMA and cytokeratins 5/18 with streptavidin-biotin-peroxidase method.

**Results:** Expression of TN was decreased in the stroma of the functional region of the endometrium during the proliferative stage; distribution of TN was irregular. CoI and CoIII had a similar pattern of distribution in comparison with that of normal endometrium: CoI, CoIII were diffusely localized in the stroma and expression of CoIII was higher than that of CoI. However their density was increased around spiral arteries and glands. Expression of  $\alpha$ SMA was increased in wall of spiral arteries. Ki67 expression was decreased in the stromal cells, luminal and glandular epithelium in CE. The accumulation of IgG was augmented on the surface luminal and glandular epithelium. The leukocyte infiltration was significantly increased, but CD8+ lymphocytes were present in greater numbers than CD4+ lymphocytes.

**Conclusions:** Thus the lack of expression of TN and proliferative activity of the epithelium may result in implantation failure in women with CE. The high accumulation of IgG and the increase of the leukocyte infiltration in the endometrium demonstrated that the disorder of the local immune response in CE was significant.

## P-201

### Histological findings on cone specimens related to the residual neoplasia on hysterectomy

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Conisation may be one of the treatment options for cervical microinvasive carcinoma and may represent a good alternative for a group of women that would otherwise be submitted to hysterectomy.

The aim of the study is to evaluate which histological information should be obtained from the cervical cones that give the best possible assurance of presence of residual neoplasia in the hysterectomy specimens.

Nineteen patients with microinvasive carcinoma who underwent biopsy, conisation and hysterectomy were reviewed. The majority of the cases (N=13) were figo stage Ia1. The following histological features in cone specimens, relating them to the residual neoplasia in hysterectomies, were examined: depth of invasion, lateral extension, unifocal or multifocal lesion, vascular invasion, extension and grade of associated dysplasia (CIN, SIL), morphological signs of HPV infection, and free or involved surgical margins of cone.

Residual neoplasia on hysterectomy was more frequent when surgical margin on cone were involved and in cases with extensive and high grade dysplasia (CIN, SIL). However, these histological variables were not independent and the only important histological finding to predict residual neoplasia on hysterectomy was the presence of dysplastic epithelium in surgical margins of the cone.

The detailed study of the cone surgical margins supports a conservative conduct in microinvasive carcinoma of the uterine cervix.

## P-202

### Primary clear cell carcinoma of the broad ligament

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**Introduction:** Primary tumors of the broad ligament are very rare and, among them, carcinomas are exceptional. Hereby, we describe a case of clear cell carcinoma arising in an endometriotic cyst of the broad ligament.

**Methods:** A 79-year-old woman, was admitted to I.N.T. Pascale because of lower abdominal pain. A C.T. scan disclosed a 15x8 cm left paraovarian cystic mass, which displaced the bladder and the uterus on the right.

Additionally to routine methods, mucicarmine and PAS stains with diastase digestion were performed.

**Results:** At operation, because the resection en bloc of the tumor was unfeasable, two main fragments were removed. Both were composed of an hemorrhagic cystic wall, one covered by stretched ovary and fallopian tube, the other adherent to the left outer uterine margin and deeply penetrating into the isthmic and cervical myometrium. Right oophorectomy and omentectomy were also performed.

Microscopic examination showed, in both specimens, a fibrotic eroded cystic wall containing hemosiderin-laden histiocytes, consistent with endometriosis, in which a largely necrotic neoplasm had grown. The tumor was mainly composed of sheets of glycogen-rich clear cell with pleiomorphic nuclei; cells with abundant eosinophilic cytoplasm and some extracellular mucus were also found. The ipsilateral ovary was scleroatrophic, with fibrous tissue separating it from the cystic wall; endometrium was atrophic; omentum contained extravasated eritocytes and lymphocytic infiltrates.

**Conclusions:** Up to date, only fourteen cases of carcinomas of mullerian type of the broad ligament have been reported; at our