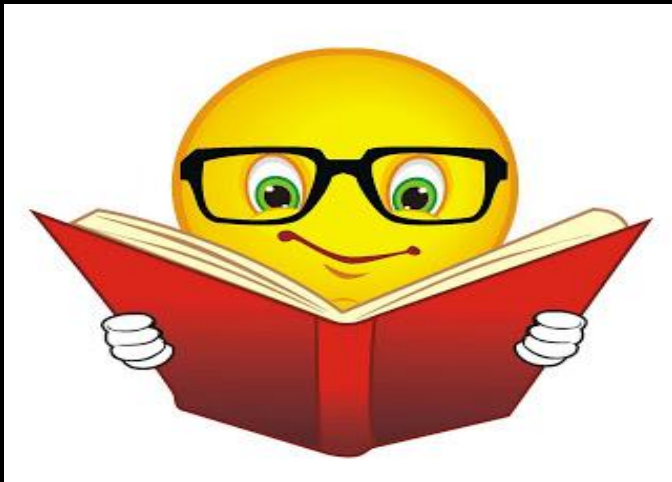


KAZAKH–RUSSIAN MEDICAL UNIVERSITY

Independent Work

Theme: General gynaecology



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◆ TOPICS

- Anatomy and Physiology of the Female Reproductive Organs
- The Menstrual Cycle
- Assessment of the Gynecological Patient
- Management of Gynecological Emergencies
- Specific Gynecological Emergencies



Anatomy and Physiology of the Female Reproductive Organs



Internal Genitalia
External Genitalia



External Genitalia

Perineum

Muscular tissue that separates the vagina and the anus.

Mons Pubis

Fatty layer of tissue over the pubic symphysis.

Labia

Structures that protect the vagina and the urethra.

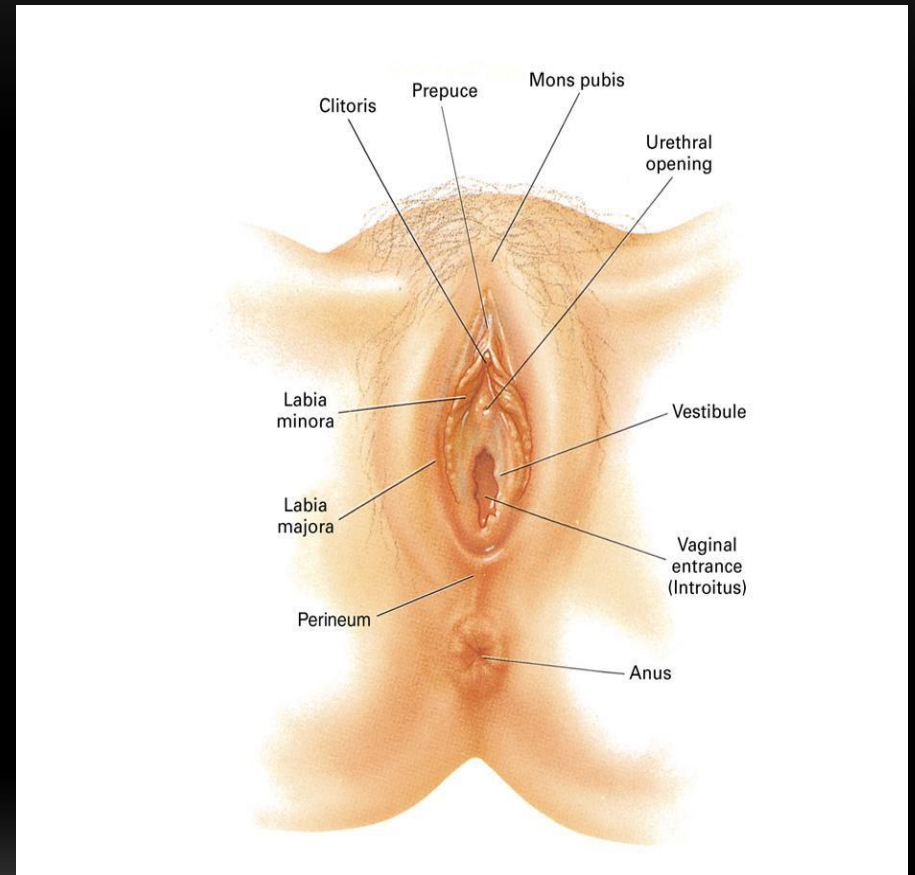
Clitoris

Vascular erectile tissue that lies anterior to the labia minora.

Urethra

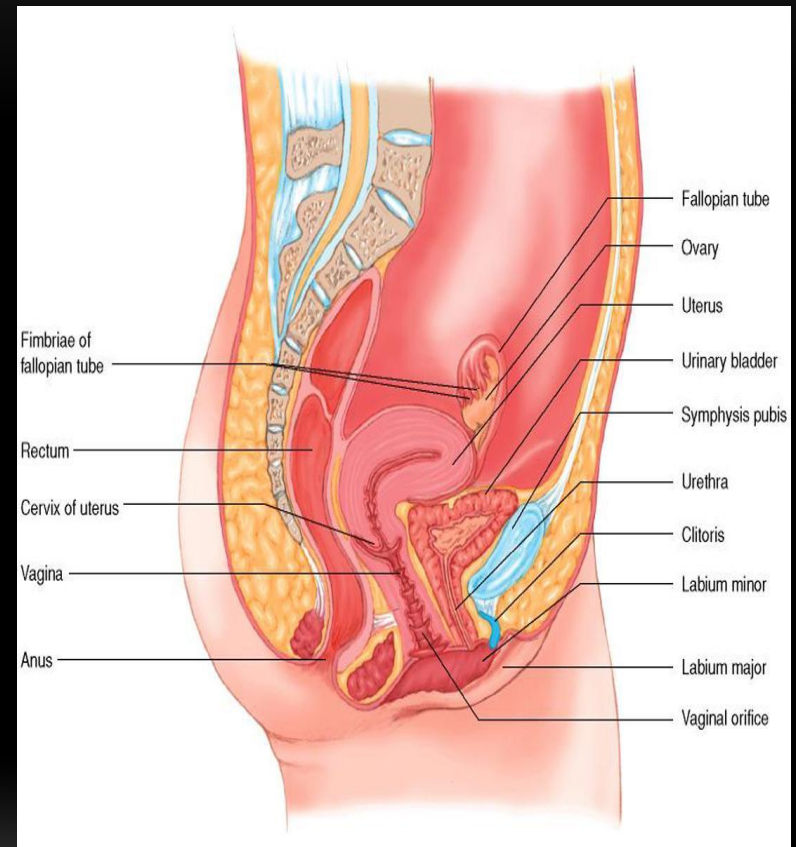
Urethra

Drains the urinary bladder.



INTERNAL GENITALIA

- **Vagina**
 - Female organ of copulation.
 - Birth canal.
 - Outlet for menstruation.
- **Uterus**
 - Site of fetal development.
- **Fallopian Tubes**
 - Transports the egg from the ovary to the uterus.
 - Fertilization usually occurs here.
- **Ovaries**
 - Primary female g



The Menstrual Cycle

- ◆ Monthly hormonal cycle, usually 28 days.
- ◆ Prepares the uterus to receive a fertilized egg.
- ◆ The onset of menses, known as menarche, usually occurs between the ages of 10 and 14
 - ❖ The Proliferative Phase
 - ❖ The Secretory Phase
 - ❖ The Ischemic Phase
 - ❖ The Menstrual Phase



- Proliferative Phase
- This is the first two weeks of the menstrual cycle.
- Estrogen causes the uterine lining to thicken and become engorged with blood.
- Secretion of LH day 14: ovulation takes place.
- If the egg is not fertilized, menstruation takes place.
- If the egg is fertilized, the corpus luteum produces progesterone until the placenta takes over.
- Cilia sweep the egg toward the uterus.
- A fertilized egg normally implants in the lining of the uterus.
- If the egg is not fertilized, it is expelled from the uterine cavity.

Secretory Phase

- The secretory phase is referred to as ovulation.
- Progesterone increases and estrogen drops if the egg is not fertilized.
- The uterus becomes more vascular in preparation for implantation of a fertilized egg.

The Ischemic Phase

- Estrogen and progesterone levels fall without fertilization.
- The endometrium breaks down

The Menstrual Phase

- The Menstrual Cycle
- Premenstrual Syndrome
- Menopause

Diseases

Examples of conditions dealt with by a gynaecologist are:

Cancer and pre-cancerous diseases of the reproductive organs including ovaries, fallopian tubes, uterus, cervix, vagina, and vulva

Incontinence of urine

Amenorrhoea (absent menstrual periods)

Dysmenorrhoea (painful menstrual periods)

Infertility

Menorrhagia (heavy menstrual periods); a common indication for hysterectomy

Prolapse of pelvic organs

Infections of the vagina (vaginosis), cervix and uterus (including fungal, bacterial, viral, and protozoal)

Other vaginal diseases

There is some crossover in these areas. For example, a woman with urinary incontinence may be referred to a urologist.



Examination

The historic taboo associated with the examination of female genitalia has long inhibited the science of gynaecology. This 1822 drawing by Jacques-Pierre Maygnier shows a "compromise" procedure, in which the physician is kneeling before the woman but cannot see her genitalia. Modern gynaecology no longer uses such a position.

In some countries, women must first see a general practitioner (GP; also known as a family practitioner (FP)) prior to seeing a gynaecologist. If their condition requires training, knowledge, surgical procedure, or equipment unavailable to the GP, the patient is then referred to a gynaecologist. In the United States, however, law and many health insurance plans allow gynaecologists to provide primary care in addition to aspects of their own specialty. With this option available, some women opt to see a gynaecological surgeon for non-gynaecological problems without another physician's referral.

References

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- ❖ <http://www.health.gov.au/internet/main/publishing.nsf/content/chronic-cardio>
- ❖ <http://www.world-heart-federation.org/cardiovascular-health/heart-disease/different-heart-diseases/>
- ❖ <http://www.nhs.uk/conditions/cardiovascular-disease/Pages/Introduction.aspx>

Glossary

- ◆ **Menstrual cycle: (менструальный цикл)** The monthly cycle of changes in the ovaries and the lining of the uterus (endometrium), starting with the preparation of an egg for fertilization. When the follicle of the prepared egg in the ovary breaks, it is released for fertilization and ovulation occurs. Unless pregnancy occurs, the cycle ends with the shedding of part of the endometrium, which is menstruation. Although it is actually the end of the physical cycle, the first day of menstrual bleeding is designated as "day 1" of the menstrual cycle in medical parlance.
- ◆ **Proliferative phase(пролиферативная фаза)**The early/preovulation half of the menstrual cycle, which is initiated by a small peak in serum FSH and histologically characterised by short glands with increased mitotic activity.
- ◆ **Implantation (Насаждение)**The process by which a blastocyst attaches itself to the lining of the uterus.

◆ **Amenorrhea(Аменорея)** Absence or cessation of menstruation.
Amenorrhea is conventionally divided into primary and secondary amenorrhea.

✧ **Dislodged (удалять):** to forcefully remove (something or someone) from a place or position

✧ **Harmful (вредно для здоровья):** causing or capable of causing damage or harm

✧ **Estrogen (эстроген)** is the key hormone that solidifies protein in bones.

✧ **Ovulation(овуляция)** the discharge of a mature ovum from the ovary

- ✓ Erectile(способный выпрямляется) of, relating to, or capable of undergoing physiological
- ✓ `Surgical procedure (хирургическая процедура) that performed in an environment so free from microorganisms that significant infection or suppuration does not supervene.