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***EFFECT OF PREOPERATIVE DECAPEPTYL
ON ENDOSCOPIC ENDOMETRIAL RESECTION***

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of the M.D. Degree
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بسم الله الرحمن الرحيم

"و علمك ما لم تكن تعلم وكان

فضل الله عليك عظيما "

صدق الله العظيم

(سورة النساء الآية ١١٣)



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INTRODUCTION

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Although not life threatening, menorrhagia can cause discomfort and disruption to life for many women (*R.W. Shaw. 1994*).

It is estimated that up to 20% of women suffer of menorrhagia especially at the late part of their reproductive life (*R.W. Shaw 1994*).

Causes of menorrhagia can be divided into three groups:

- (1) pelvic diseases, such as myomata and adenomyosis.
- (2) systematic disorders as coagulopathies and hypothyroidism.
- and (3) dysfunctional uterine bleeding which is the commonest cause - a diagnosis of exclusion (*Jan S. Feaser 1994*).

Total abdominal and vaginal hysterectomy has been the standard treatment for intractable and unmanageable menorrhagia for many years. Out of the 625000 hysterectomies performed in U.S.A. on 1980 about 292000 hysterectomies were performed for menorrhagia (*A. Lalonde 1994*).
