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**Cover artwork:**
Paola di Annalena by Beato Angelico  
(1430 - Museo nazionale di San Marco, Firenze)
Changing Face of HRT

Oestrogel® is a topical gel of natural body identical estrogen providing effective relief from vasomotor symptoms commonly associated with menopause. With a neutral effect on metabolic parameters, Oestrogel® works with your body allowing you to get back to enjoying life.

Prescribing Information: Oestrogel® Pump-Pack.

1 NAME: Oestrogel® Pump-Pack.

2 ACTIVE INGREDIENTS: Contains estradiol, 0.06% w/w.

3 INDICATION: Hormone replacement therapy (HRT) for oestrogen deficiency symptoms in postmenopausal women.

4 DOSAGE AND METHOD OF ADMINISTRATION: Menopausal symptoms: Transdermal application of two measures (2.5 g once daily (1.5 mg estradiol). Increase if necessary after one month to a maximum of four measures (5 g) once daily (3.0 mg estradiol).

5 COMMON SIDE EFFECTS: Please consult the full Summary of Product Information about side effects. Side effects include irritation, reddening of the skin or mild and transient erythema at the site of application, headache, migraine, mood changes, nausea, increase in size of uterine fibromyomata, transient increase in thyroid hormone and menstrual disorders. Other adverse effects reported in association with estrogen/progestagen treatment include estrogen-dependent neoplasms, venous thromboembolism, myocardial infarction, stroke, probable dementia, gynaecological disease, skin and subcutaneous disorders including chloasma, erythema multiforme, erythema nodosum and vascular purpura.

6 CONTRAINDICATIONS: Breast cancer, oestrogen-dependent malignant tumours, undiagnosed genital bleeding, untreated endometrial hyperplasia, venous thromboembolism, arterial thromboembolic disease, acute liver disease, or a history of liver disease as long as liver function tests have returned to normal. Sexual hyperandrogenism on the active substance or explants or progestins.

7 PRECAUTIONS: HRT should only be initiated for symptoms that adversely affect quality of life. Appraisal of the risks and benefits of HRT should be undertaken at least annually. Before initiating HRT and at regular intervals, a complete medical history should be taken and appropriate physical examinations performed. Patients should be closely supervised if there is a history or risk factor for: venous fibromyomata or endometriosis, venous thromboembolism, arterial thromboembolic disease, acute liver disease, or a history of liver disease as long as liver function tests have returned to normal. Sexual hyperandrogenism on the active substance or explants or progestins. Consider discontinuing HRT 4-6 weeks before elective surgery requiring immobilisation. Long term use of estrogens in hysterectomised women has been associated with an increased risk of ovarian cancer. Estrogens may cause fluid retention. Estrogens may lead to a rise in circulating thyroid hormone and patients on thyroid treatment should have their thyroid function monitored more frequently.

8 FULL PRESCRIBING INFORMATION: This Information does not replace the official SmPC approved in each country please consult the full Prescribing Information for more details. Not all indications are approved in all countries.

9 CONTACT DETAILS: Besins Healthcare, 283/92 Soi Thonglor 13, Sukhumvit 55 Rd, Home Place Office Bldg., 18th Floor, Bang Ton Nua, Wattana, Bangkok, 10110, Thailand. info@besins-healthcare.com

www.besins-healthcare.com
Dear Friends,

Welcome at our 16th World Congress of the International Society of Gynecological Endocrinology (ISGE). The Executive Committee of our Society is particularly proud of the impressive scientific and quality level achieved by this International Event.

The Congress, preceded by a course on “Estrogen receptors ligands and their effects”, starts with an opening symposium devoted to the Hormonal Contraception and an opening lecture on HRT, to underline the engagement of our Society in some of the most important issues of women health in any age.

On Friday we will have a lunch symposium devoted to the Emergency Contraception, “Latest outcomes in oral emergency contraception “ where a statement from our Society on this topic will be disclosed.

The Congress presents 31 Plenary Sessions, 10 Plenary Lectures, 4 Meet the Experts, 10 Oral presentations, 1 Teaching Course, 6 Sponsored Symposia, 1 poster session, and is enriched by 11 Plenary Sessions directly organized by other National, Regional and International Scientific Societies.

Our Event will also include the 4th Congress of the Italian Association of Gynecological Endocrinology -AIGE-, and on Friday one room will be dedicated to Sessions in the Italian language.

To reinforce the importance for the achieved targets, our Society (ISGE), the Italian Association of Gynecological Endocrinology (AIGE) and the International Federation of The Societies of Gynecological Endocrinology (FISGE), will also organize administrative sessions.

In addition, we will also present the new series of ISGE Books edited by Springer, in collaboration with the International School of Gynecological and Reproductive Endocrinology (ISGRE), the educational branch of our Society, the expression of the data presented during the winter and summer school courses. The first volume is dedicated to the Malta 2013 summer course, and soon the 2nd book on the Madonna di Campiglio 2014 winter course will be released.

I want to thank all our sponsors for the engagement in the Scientific Programme with Courses, Sessions and Plenary Lectures, and for the impressive participation in the exhibition area, that I invite everyone to visit.

My greatest thanks and my warmest welcome in Florence to all of you.

A.R. Genazzani
President of ISGE

YOUR ISGE MEMBERSHIP

Now you are an ISGE Member: registering to the World Congress you have automatically become a member of the Society for 2 years. You will have free access to the ISGE Members area on the official website of the society and you can have discounts on courses and activities.

See all the details on the next page.
The International Society of Gynecological Endocrinology is a non-profit organisation established in 1986 for the purpose of promoting science and research into all aspects of gynecological endocrinology and communication between scientists interested in these subjects. The Society operates through the monthly Journal of Gynecological Endocrinology, the monthly newsletter GynEndo News and the biannual World Congress, a major scientific event which allows a perfect integration of renowned faculty members with talented young scientists presenting innovative research.

YOUR ISGE MEMBERSHIP

Now you are an ISGE Member: registering to the World Congress you have automatically become a member of the Society for 2 years. You will have free access to the ISGE Members area on the official website of the society as well as the following services:


Great discounts on all courses organized by the International School of Gynecological and Reproductive Endocrinology.

Online access the book of abstracts of the 16th world congress + Discount on the next ISGE World Congress

Additional contents from previous congresses and courses (congress lectures with audio and slides, abstracts, course materials)

How to access to all your ISGE members services

1. Visit the Members area on the society’s official website
   www.isgesociety.com

2. Log in with the email and password you used to register to the 16th ISGE world congress.
The International School of Gynecological and Reproductive Endocrinology (ISGRE) fosters education and clinical application of modern gynecological endocrinology throughout the world by organizing high-level, highly focused residential courses twice a year, the Winter and the Summer Schools. World renowned experts are invited to provide their clinical experience and their scientific update to the scholars, creating a unique environment where science and clinical applications melt to provide the definitive update in this continuously evolving field.

The International Federation of the Societies of Gynecological Endocrinology (FISGE) unites all the societies of gynecological endocrinology interested in the study and the research of all aspects of gynecological endocrinology, aiming to improve the communication and the exchange of information related to the activities of each society all over the world.

List of FISGE Societies:
- Aige (Associazione Italiana di Ginecologia Endocrinologica)
- Sobrage (Sociedade Brasileira de Ginecologia Endócrina)
- Saeger (Sociedad Argentina de Endocrinología Ginecológica y Reproductiva)
- Polish Society of Gynecological Endocrinology
- Socheg (Sociedad Chilena de Endocrinología Ginecológica)
- Swiss Society of Gynecological Endocrinology

Frontiers in gynecological endocrinology
Since 2013 the ISGRE is also managing the “Frontiers in Gynecological Endocrinology” project. This is a new publishing project expression of the partnership between the International Society of Gynecological Endocrinology and Springer. The book series includes single monographs devoted to gynecological endocrinology relevant topics as well as the contents stemming from educational activities run by ISGRE, the educational branch of the society. This series is meant to be an important tool for physicians who want to advance their understanding of gynecological endocrinology and master this difficult clinical area. Key review papers are published in the Series, thus providing a broad overview over time on the major areas of gynecological endocrinology

ISGE BOARD (2010-2014)

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
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<tr>
<td>President</td>
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**WINTER SCHOOL 2015**

The course will cover the following topics:
- Genomics and ovarian response
- Ovulation induction and new compounds
- Endocrine factors and reproductions
- Amh/ovarian aging
- Pcos
- Contraception
- Premature ovarian insufficiency
- Healthy female aging (menopause)

There will be 32 lessons (4 in the morning and 4 in the afternoon), each lesson will last 35/40 minutes plus discussion.

Chairmen of the course:
Tarlatzis Basil (GR) Genazzani Andrea R. (IT)


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**SUMMER SCHOOL 2015**

The course will cover the following topics:
- Disorders of sex differentiation (DSD)
- Central Precocious Puberty / Peripheral Precocious Puberty
- The hypothalamo-pituitary - ovarian axis during pubertal maturation
- Endocrine glands: effects on pubertal maturation
- Primary amenorrhea due to gonadal dysgenesis and primary ovarian failure
- Functional hypothalamic amenorrhea as stress induced defensive system
- Anorexia nervosa in adolescence
- Abnormal menstrual bleeding
- Dysmenorrhea and pre-menstrual disorders in adolescence and young adults
- Impaired bone development during adolescence
- Adrenarche and hyper-androgenism
- Decreased insulin sensitivity
- Premature ovarian failure in adolescence and young adults
- Mullerian duct abnormalities
- Contraception and abortion
- Pregnancy in adolescents and young adults

Chairmen of the course:
Sultan Charles (FR) Genazzani Andrea R. (IT)

La AIGE, filiale italiana della International Society of Gynecological Endocrinology (ISGE), è nata per l’esigenza di raccordare e collegare tra loro i tanti membri italiani della ISGE internazionale. Molte delle attività delle società internazionali possono non rendere facile la realizzazione delle finalità di divulgazione scientifica, didattica e di formazione all’interno dei singoli paesi per questo l’Associazione Italiana di Ginecologia Endocrinologica è stata fondata con lo scopo di sviluppare la ricerca, la didattica e la formazione scientifico-professionale in tema di ginecologia endocrinologica tra i ginecologi, gli endocrinologi, i medici italiani in genere.

MEMBRI AIGE
Per tutti i partecipanti italiani al IV Congresso AIGE (congiunto al 16th World Congress of Gynecological Endocrinology) è inclusa la quota associativa all’AIGE della la durata di due anni.

♦

Come accedere all’area riservata ai soci Aige
1. Accedi al sito della società: www.ginendo.it
2. Clicca su “Membri AIGE” ed entra con le stesse credenziali usate per registrarsi al 16 ISGE World congress - IV Congresso AIGE

CON L’ISCRIZIONE ALL’AIGE

IV CONGRESSO AIGE

Accesso alla versione PDF della rivista “Gynecological Endocrinology”
Sconto sui corsi organizzati dall’AIGE
Accesso agli abstract del congresso e sconto sul prossimo congresso.
Contenuti aggiuntivi e dispense da corsi e congressi precedenti
I CORSI
A partire dal 2012 la AIGE ha deciso di intraprendere una serie di corsi di accreditamento in Endocrinologia Ginecologica, integrati ed articolati fra di loro sì da rappresentare parte di un percorso che promuova l’aggiornamento costante dello specialista e che si configuri nella Scuola Italiana di Endocrinologia Ginecologica e Riproduttiva. I corsi sono basati su lezioni formali e sulla possibilità offerta ai discenti di interagire direttamente con i docenti tramite l’opportunità offerta da tre momenti specifici: dopo i pasti i discenti, in gruppi di non più di 10/15 persone, presentano all’esperto i propri casi clinici o i propri dubbi in tema di clinica, diagnosi e terapia per discuterne con lui e gli altri colleghi. A ciascun partecipante al corso è data la possibilità di selezionare direttamente i docenti con cui interagire, a seconda degli argomenti che ciascun docente renderà disponibili per discuterne.
Il Corso di quest’anno si terrà a Firenze il 21 e 22 Novembre 2014 presso il Grand Hotel Mediterraneo e tratterà temi rilevanti quali: Disordini del ciclo tra pubertà e adolescenza e Anovulazione e funzione riproduttiva.
Per maggiori informazioni: www.ginendo.it/corsi/3

IL BOLLETTINO DI GINECOLOGIA ENDOCRINOLOGICA
Il Bollettino con la sua cadenza bimestrale (6 numeri ogni anno) offre l’opportunità a tutti coloro che lo visitano o che ricevono le Newsletters, di aggiornarsi e di arricchire la propria raccolta bibliografica sia con gli abstracts dei lavori più rilevanti appena usciti sulle riviste internazionali sia scaricando, gratuitamente, delle mini reviews.
Le mini reviews sono la grande attrattiva del Bollettino. Scritte da esperti italiani, affronzano dalla A alla Z ogni aspetto sia clinico che diagnostico che terapeutico relativamente alla problematica clinica oggetto della mini review. Le mini reviews sono facilmente scaricabili dal sito come files pdf, stampabili o salvabili sul proprio PC, sempre pronte quindi per la consultazione e la lettura. Possono essere anche stampate per offrire informazione alle proprie pazienti, al fine di migliorare la compliance e il gradimento delle scelte clinico-diagnostiche oltre che quelle terapeutiche.
Lo scopo delle mini reviews è quello di offrire in poche pagine una overview clinico-pratica che possa essere di aiuto per l’attività professionale del ginecologo ma anche della paziente.
I temi trattati sono sempre molto vari, spesso lontani tra loro ma sempre destinati a focalizzare l’attenzione sulla salute della donna, lungo tutto il percorso della sua esistenza da quando è bimba fino a quando sarà una anziana.
Il Bollettino e le sue mini reviews sono una iniziativa che riteniamo possa essere sempre di grande gradimento ed utilità non solo per il ginecologo ma per tutti medici che in qualche modo sono dediti alla cura e alla salute della donna.

www.bollettinoginendo.it

CONSIGLIO DIRETTIVO

Presidente
A.R. Genazzani (Pisa)

Tesoriere
S. Luisi (Siena)

Resp. scientifico
A.D. Genazzani (Modena)

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N. Biglia (Torino)
V. Bruni (Firenze)
A. Lanzone (Roma)
S. Lello (Roma)
C. Nappi (Napoli)

R. E. Nappi (Pavia)
S. Palomba (Catanzaro)
M. Palumbo (Catania)
M. Stomati (Brindisi)
H. Valensise (Roma)
GIOVEDÌ, 6 MARZO

HALL AFFARI 2

15:45/16:15 LETTURA PLENARIA (SPONSORIZZATO DA HRA ITALIA)
Moderatori: Palumbo Giuseppe (IT), Volpe Annibale (IT)
Cagnacci Angelo (IT) Lo standard della contraccezione d’emergenza

VENERDÌ 7 MARZO

HALL AFFARI 2

08:30/09:30 SIMPOSIO ORGANIZZATO DA SOCIETÀ SCIENTIFICA (ORGANIZZATO DA FISS - FEDERAZIONE ITALIANA DI SESSUOLOGIA SCIENTIFICA)
LA CLASSIFICAZIONE DELLE DISFUNZIONI SESSUALI FEMMINILI NEL DSM V
Moderatori: Boncinelli Vieri (IT), Giommi Roberta (IT)
Barbero Giuseppina (IT) Il desiderio sessuale femminile nella revisione del DSM V
Trotta Domenico (IT) Il disordine dell’orgasmo femminile
Bernorio Roberto (IT) La revisione dei disturbi da dolore coitale

09:45/13:15 COURSO (ORGANIZZATO DA AIGE)
COUNSELING IN CONTRACCEZIONE. SIGNIFICATO E GESTIONE DEI SANGUINAMENTI E DELLE MESTRUAZIONI, UNA OCCASIONE DA NON PERDERE PER EVITARE ABBANDONI ED... ECCESIVE TELEFONATE
Moderatori: Bruni Vincenzina (IT), Paoletti Anna Maria (IT)
Bruni Vincenzina (IT) L’adolescenza: tra crisi di identità, necessità di sicurezza e controllo del ciclo
Paoletti Anna Maria (IT) Mestruazioni e perdite intermestruali: le nuove esigenze personali ed i nuovi concetti di salute riproduttiva
Nappi Rossella (IT) Sessoalità: un mondo da scoprire, un obiettivo da gestire
Benedetto Chiara (IT) La transizione menopausale: nuove possibilità e certezze per una donna che evolve

15:45/16:15 LETTURA PLENARIA (SPONSORIZZATO DA AG PHARMA)
Moderatori: Brandi Maria Luisa (IT)
Lello Stefano (IT) Il ruolo della vitamina K2 nel metabolismo osseo
ORGANIZING SECRETARIAT
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www.biomedicaltechnologies.com
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CONGRESS VENUE
Firenze fiera
Piazza Adua, 1 Firenze, Italy
www.firenzefiera.it

WWW
isge2014.isgesociety.com
www.isgesociety.com

CONGRESS SECRETARIAT DESK
The Congress Secretariat is located in exhibition area in Palazzo dei Congressi.
The Secretariat observes the following opening hours:
Wednesday March 5th 08.00 - 19.30
Thursday March 6th 08.00 - 18.00
Friday March 7th 08.00 - 18.00
Saturday March 8th 08.00 - 13.30

ON SITE REGISTRATION FEES (VAT INCLUDED)
Delegate €850
Isge Member Delegate €750
Developing countries €750
Isge Member from developing countries €700
Residents, nurses and technicians (with official certificate) €600
Isge Members residents, nurses and technicians (with official certificate) €550
Daily registration €300

Delegates fee includes
◆ Congress kit
◆ Two years ISGE Membership
◆ Access to all sessions and exhibition area
◆ Abstract Book (in CDROM)
◆ CME credits and/or ECM Credits
◆ Opening and closing Ceremonies

Insurance
The Congress Organizers cannot accept liability for personal injuries, loss or damage to property belonging to Congress delegates (or their accompanying persons), either during or as a result of the Congress or during their stay in Florence. It is therefore recommended that delegates arrange their own personal health, accident and travel insurance.

Badges
All registrants including registered accompanying persons will receive a badge. Your personal badge allows you access to all Sessions, Exhibition Area and Social Events. Please remember to always wear your badge, also during social events. If you have lost your badge, a new one can be purchased at the Congress Secretariat.

Personal Data Protection Law no. 196/2003
Personal data collected directly and/or through third parties by controller and processor Biomedical Technologies. Main Office in Cagliari Via Cugia 1, are processed in printed, computing and telematic form for fulfilling contractual and lawful obligations as well as for the effective handing of business relations. The email addresses provided may be used by Biomedical Technologies to send advertising materials on events similar to those subject of the present business relations. The non-submittal of data, where no compulsory, will be evaluated from case to case by the controller and the resulting decisions to be made will take into account the importance of the required data in respect of the business relations, management. Data may be disclosed in Italy and/or abroad, strictly in accordance with the above-mentioned purposes, and consequently processed, only in relation to the mentioned purpose, by other persons: professionals and consultants as well as by persons allowed to access to your personal data according to National or Community regulations. If necessary, for the above-mentioned reasons, your data may be disclosed to third parties. For the same reasons, our partners and/or employees may process your data in their capacity of executors or processors. The persons concerned may exercise all the rights set forth in art. 7 of L. n. 196/2003 (including the rights of data access, corrections, updating, objects to data processing and cancellation). The processor “pro tempore” is the legal representative of the company.
Official Language
Official language of the 16th World Congress of Gynecological Endocrinology is English. Italian is the official language of the 4th Congress of the Italian Society of Gynecological Endocrinology (AIGE).

Coffee
Get free coffee or hot drinks at any time during the congress from the automatic beverage dispensers located in the Exhibition Area.

Lunches
Lunch boxes will be distributed from 13.10 to 13.30 before the symposium starts and must be eaten inside the congress hall. You will not be allowed to leave the congress room during the symposium.

- March 6 - 13.15 - 14.15
  - Poster Session with lunch
- March 7 - 13.15 - 15.15
  - Affari 0 Emergency contraception to reduce unwanted pregnancy and abortion (Sponsored by HRA Pharma)
  - Affari 1 Endocrine disorders and female infertility (Sponsored by IBSA)

Certificate of attendance
Get your certificate of attendance at the ISGE booth in the exhibition area starting to Thursday. In order to receive the certificate you are required to show your badge.

CME CREDITS

16 UEMS credits

UEMS Credits (Europe)
The 16th World Congress of the Gynecological Endocrinology was granted 16 European CME credits (ECMEC) by the European Accreditation Council for Continuing Medical Education (EACCME). These credits are valid for all European Community Countries and are recognized by the American Medical Association toward the Physician’s Recognition Award (AMA) for Canada and North American Countries.

How to obtain the UEMS Certificate
1. Starting from March 17th visit the congress website www.isge2014.com
2. Log-in with user and email you used for congress registration
3. Click on the UEMS Certificate link and complete the questionnaire.

AMA conversion
Physicians may apply to convert European credit into AMA credit by completing and returning the EACCME application, along with the appropriate application processing fee and documentation of the meeting Physicians have attended. Please check the UEMS website (www.uems.net) to ensure the activity attended is listed and marked as “Approved” before submitting the application. The credits are one-to-one.
OPENING CEREMONY, CONCERT AND WELCOME COCKTAIL

On Wednesday March 5th, the Opening Ceremony of the Congress with the Opening Lecture will take place starting at 18.00. The opening Ceremony will be followed by the Opening Concert.

THE LYRICAL CONCERT
The congress Opening Concert will take place in Hall Auditorium starting from 19.30. Arias selected from famous Operas and popular songs from the Italian tradition will be performed by a duo (Tenor and Soprano) accompanied by a string quartet. The Concert will be followed by the Welcome Cocktail in the Exhibition area.

RULES FOR SPEAKERS AND POSTER PRESENTERS

Preview rooms
All the speakers are kindly requested to hand over their Powerpoint presentation at the preview room near hall Auditorium. Presentations must be brought at least one hour before their session. Speakers presenting in the early morning sessions should ensure that they have handed over their slides during the previous afternoon.

Oral presentations
Oral Presentations will last about 8 minutes each plus 2 minutes discussion. The presenters are kindly requested to respect the time allotted for each presentation.

Poster session
The Poster Session will take place on Friday March 6th at lunch time. Posters can be mounted starting from March 5th from 16.00 and must be unmounted before March 6th 18.00: the organizers cannot be held responsible for posters not removed on time. During the Poster Session, Poster Authors are requested to stand by their Posters for presentation and discussion. The maximum size of the posters is 90cm x 90cm.

The Poster award
Three posters will be awarded each with a free registration to the 17th ISGE World Congress (Firenze, March 2-5 2016) including a free accommodation for one person (overnight stay in a 3 stars hotel, double room). The awards will be given during the Closing Ceremony of the congress.
Epitech Group’s **micronized** and **ultramicronized** Palmitoylethanolamide - also combined with Polydatin - acts modulating mast cell hyper reactivity and microglial activation, reducing pain associated with Chronic Pelvic Neuroinflammation.

An extensive International Patent Protection covers a range of **micronized** and **ultramicronized** Palmitoylethanolamide based formulations available on the market.

---

**adolene**

In the control of the Tissue Mechanisms inducing and sustaining the adolescent Dysmenorrhea

**pelvilen**

In the management and control of Chronic Pelvic Pain, associated, among other pelvic diseases, with Endometriosis

---

Contact for International Licensing: Prismic Pharmaceutical Inc

info@epitech.it
THE UNDER 34 COMPETITION

The Scientific Contest held for the third time this year has allowed 100 excellent young scientist of under 34 years to be supported by the Society to join us in Florence, by providing free registration and accommodation.

The contest has been extremely tight, and although the scientific committee could select only 100 winners, the scientific level was so high that ISGE decided to support anyway those who did not get through, by providing a reduced registration rate to the congress. This is the first of a series of moves to help the young and the brightest to contribute to ISGE and to its lively Congress.

THE FIRST 4 RANKED ABSTRACTS

The first 4 ranked abstracts will be presented in Plenary Sessions of the congress

**The long-term effects of bilateral salpingo-oophorectomy on memory**

April Au (CA), Schwartz D. (CA), Tierney M. (CA), Hampson E. (CA), Narod S. (CA), Einstein G. (CA)

Hall Verde Sat March 8th 08:30/10:00

Plenary Session - New perspectives on premature ovarian insufficiency DETAILS AT PAGE 72

**Effects of life-style interventions on the expression of GPER, PGMC1 and PGMC2 in the endometrium of obese PCOS patients**

Hulchiy M. (SE), Nybacka A. (SE), Calaby A. (SE), Sahlin L. (SE), Hirschberg A. (SE)

Hall Auditorium March 8th 11:45/13:15

Plenary Session – Endometrium and menorrhagia DETAILS AT PAGE 73

**Placental volume and vascularization flow indices by 3D Power Doppler during the first trimester: predictive value for placental vascular disease in low risk population.**


Hall Affari 1 March 7th 16:30/18:00

Plenary Session – Understanding and treating fetal growth restriction DETAILS AT PAGE 60

**C677T polymorphism of the methylenetetrahydrofolate reductase gene in postmenopausal women screened for the metabolic syndrome**

Salazar-Pousada D. (EC), Chedraui P. (EC), Escobar G. (EC), Espinoza-Caicedo J. (EC), Hidalgo L. (EC), Pérez-López F. (ES), Genazzani A. (IT), Simoncini T. (IT)

Hall Affari 0 March 7th 16:30/18:00

Plenary session – Menopause, ageing and cardiovascular risks DETAILS AT PAGE 61

DID YOU MISS THIS EDITION OF THE UNDER 34 COMPETITION?
PARTICIPATE TO THE NEXT ONE.

MORE INFO AND ON WWW.ISGESOCIETY.COM/ISGE2016
Blood loss and transfusion requirements in myomectomy patients at Mater Dei Hospital Malta
Borg E. (MT), Brincat M. (MT), Grixti S. (MT), Pavia N. (MT), Mamo J. (MT)

Raw red onion consumption induces androgen overproduction in overweight or obese women with polycystic ovary syndrome: a randomized controlled-clinical trial
Saghafi-Asl M. (IR), Pirouzpanah S. (IR), Ebrahimi-mamaghani M. (IR), Asghari-Jafarabadi M. (IR)

Aberrant expression of the classical and G-protein-coupled estrogen receptors in endometrial cancer
Hevir Kene N. (SI), Šmuc T. (SI), Šinkovec J. (SI), Lanišnik Rižner T. (SI)

Investigating hypoglycaemia awareness in type 1 diabetes during pregnancy
Vermont L. (GB), Hussain S. (GB), Lam S. (GB), Jarvis S. (GB), Cheng F. (GB), Jairam C. (GB), Jones B. (GB), Dornhorst A. (GB)

Opportunity of application of aromatase inhibitors in combined therapy of endometriosis
Molotkov A. (RU), Yarmolinskaya M. (RU), Bezhenar V. (RU)

Polycystic ovary syndrome (PCOS)– comparison of different phenotypes in patients with and without overweight or obesity

Serum Levels of Inhibin B in women with polycystic ovary syndrome compared with normal women in China
Tian X. (CN), Ruan X. (CN), Mueck A. (CN)

The severity of the cardiovascular risk factors among patients diagnosed with polycystic ovary syndrome (PCOS)
Paczkowska K. (PL), Podkowa N. (PL), Ignaszak N. (PL), Slawek S. (PL), Czyzyk A. (PL), Meczekalski B. (PL)

The efficacy of isoflavone vaginal gel in postmenopausal women evaluated by morphometry and estrogen receptors expression in vaginal epithelium
Bernardo B. (BR), Lima S. (BR), Reis B. (BR), Silva G. (BR), Silva M. (BR)

Expression of estrogen and progesterone receptors in endometriosis
Denisova V. (RU), Yarmolinskaya M. (RU), Rulev V. (RU), Kvetnovy I. (RU), Polyakova V. (RU), Durnova A. (RU)

Plasminogen activator inhibitor - 1 in maternal plasma of overweight and nonoverweight pregnant women and its relationship to labor complications
Elksne K. (LV), Paunija Z. (LV), Jurka A. (LV), Marksa I. (LV), Rezeberga D. (LV), Tretjakovs P. (LV)

Hashimoto disease transformation in Graves’s disease in a pregnant woman with hyperthyroidism
Brichtang G. (BE), Petrossians P. (BE), Nisolle M. (BE), Pintiaux A. (BE)

Poor absorbance of levothyroxine in a pregnant woman
Brichtang G. (BE), Petrossians P. (BE), Nisolle M. (BE), Pintiaux A. (BE)

Patient Experiences of Endometriosis: Simply Chronic Pelvic Pain?
Griffith V. (GB)

Cushing’s syndrome during pregnancy
Darocas M. (ES), Ruiz N. (ES), Bergoglio M. (ES), Cano A. (ES)

Irisin plasma concentration in PCOS and healthy subjects is connected with NFLD – preliminary report
Pukajło K. (PL), Kolackov K. (PL), Łaczmański Ł. (PL), Kuliczkowska-Plaksej J. (PL), Lenarcik-Kabza A. (PL), Milewicz A. (PL), Daroszewski J. (PL)

Impact of Estetrol, a new natural estrogen, on mammary gland
Gérard C. (BE), Blacher S. (BE), Pequeux C. (BE), Noel A. (BE), Mestdagt M. (BE), Gompel A. (FR), Foidart J. (BE)

Serum Estradiol as a Predictor of Success of In Vitro Fertilization
Gupta P. (IN)

Hepatitis B prevalence in pregnant women and newborns in Albania
Qirko M. (AL), Qirko R. (AL), Leli S. (AL)

The Effects of soy isoflavones on the urethra and bladder of castrated rats
Silva G. (BR), Rolim Lima S. (BR), Reis B. (BR), Francisco A. (BR), Rechdan V. (BR), Coutinho L. (BR), Archangelo S. (BR)
Metabolic syndrome and sexual function in postmenopausal Brazilian women
Dutra G. (BR), Rosa Lima S. (BR), Reis B. (BR), Bernardo B. (BR)

Postmenopausal osteoporosis and atherosclerosis: Is dyslipidemia a common link?

Marginal importance of aromatase in local estrogen formation in endometrial cancer – new evidence

Placental HSP 27 and 70: Spatial change during Labour and FGR
Abdulsid A. (GB), Hanretty K. (GB), Lyall F. (GB)

Evaluation of estrogenic pathway genes in the vagina of rats treated with genistein or estrogen immediately or later after castration
Carbonel A. (BR), Calió M. (BR), Maganhin C. (BR), Sasso G. (BR), Santos M. (BR), Simoes R. (BR), Bertoncini C. (BR), Baracat M. (BR), Baracat E. (BR), Soares Jr J. (BR)

Change in antimüllerian hormone levels in patients that underwent assisted reproductive technique
Zabala A. (AR), Campostrini B. (AR), Stechina M. (AR), Pessino T. (AR), Asch R. (AR)

Prevalence of metabolic syndrome in girls and adolescents
Sierra S. (UY), Sanchez J. (UY), Lima S. (UY)

Evaluation of the body mass index in users of the levonorgestrel-releasing intrauterine system
Macruz C. (BR), Tamanaha S. (BR), Aldrighi J. (BR)

Expression of Ki-67 in adrenal cortex of female mice exposed to pollution during pregnancy
Fuchs L. (BR), Soares Jr J. (BR), Silva J. (BR), Maganhin C. (BR), Sasso G. (BR), Carvalho K. (BR), Maciel G. (BR), Veras M. (BR), Saldiva P. (BR), Baracat E. (BR)

Assessment of the quality of life in afro-descendant and indigenous Colombian women in climacteric who present hypoactive sexual desire disorder
Arteta-Acosta C. (CO), Portela-Buelvas K. (CO), Monterrosa-Castro A. (CO)

Efficacy and quality of life after 10 years with transobturator suburethral tape in women with stress urinary incontinence

Sexual dysfunction in patients with PCOS
Pérez Funey Y. (VE), Fernández J. (VE), Fermín M. (VE), Torres F. (VE), Pizzi R. (VE), Centeno I. (VE), Mendoza A. (VE)

Follicular development after xenotransplantation of cryopreserved and thawed human ovarian tissue in SCID mice
Ayauandari S. (AT), Winkler K. (AT), Hofer S. (AT), Mikerevic S. (AT), Paulitsch M. (AT), Rosenfellner D. (AT), Wildt L. (AT), Ziehr S. (AT)

Mthfr gene (C677T) heterozygous mutation and Recurrent pregnancy losses

Effects of estriol vaginal cream on urogenital disorders in postmenopausal women with type 2 diabetes mellitus
Pogorelova A. (RU), Berketova T. (RU), Melnichenko G. (RU), Kasyan G. (RU)

The change from Abdominal Burch colposuspension procedure to Laparoscopic Burch colposuspension procedure
Pavia N. (MT), Grixti S. (MT), Tsar O. (MT), Brincat M. (MT), Knyazev I. (MT), Mamo J. (MT)

Adolescent PCOS patients: Evaluation of lipid profile and its contributing factors
Giannouli A. (GR), Deligeoroglou E. (GR), Athanasopoulos N. (GR), Tsimaris P. (GR), Dimopoulos K. (GR), Stergioli E. (GR), Vatopoulou A. (GR), Karountzos V. (GR), Creatsas G. (GR)

Innovations in endometrial hyperplasia treatment with micronized progesterone
Asaturova A. (RU), Dumanovskaya M. (RU), Chernuha G. (RU), Kogan E. (RU), Fayzullina N. (RU)

Differential expression of nuclear and membrane bound progesterone receptors in endometrial cancer
Sinreih M. (SI), Lanišnik Rižner T. (SI)

The value of preoperative preparation in surgical treatment of vaginal prolapse
Ashurova U. (UZ), Sadikova D. (UZ)
Transcriptional expression of kisspeptin, neurokinin B, dynorphin (KNDy), sex steroids and their receptors in the hypothalamus of polycystic ovary syndrome rat models induced by estradiol or testosterone
Marcondes R. (BR), Carvalho K. (BR), Duarte D. (BR), Giannocco G. (BR), Amaral V. (BR), Baracat E. (BR), Maciel G. (BR)

The value of apoptosis markers in the blood in benign tumors of the ovary
Ashurova U. (UZ), Abdullayeva L. (UZ)

Biglycan: a new biomarker candidate for ovarian endometriosis

Effects of Unilateral Ovariectomy on Fertility Outcome
Gasparri M. (IT), Ruscito I. (IT), Pernice M. (IT), Antonilli M. (IT), Berloco P. (IT), Chirletti P. (IT), Benedetti Panici P. (IT), Bellati F. (IT)

The additive value of HE4 novel tumor marker to the IOTA simple rules in the management of ovarian masses
Erdodi B. (HU), Krasznai Z. (HU), Ördög L. (HU), Balla H. (HU), Maka E. (HU), Tóth Z. (HU), Jakab A. (HU)

Does embryo biopsy affect the timing of implantation?
Segal T. (US), Tong S. (US), Alikani M. (US), Rausch M. (US), Hershlag A. (US)

Application of sentinel node technique with blue patent for Breast Cancer in a public hospital of a developing country with a developed country demographics.
Varela Belzarena M. (UY)

Reduced expression of Calcium sensing receptor in the human placenta of mothers with gestational diabetes mellitus associated with early postnatal hypocalcemia in their newborns
Gole E. (GR), Sfikas C. (GR), Nicolaidou P. (GR), Papadopoulou A. (GR)

Polycystic ovary syndrome (PCOS) – comparison of biochemical and clinical features among patients with and without insulin resistance
Podkowa N. (PL), Ignaszak N. (PL), Paczkowska K. (PL), Sławek S. (PL), Czyżyk A. (PL), Meczekalski B. (PL)

Calcium and phosphate metabolism in patients with polycystic ovary syndrome
Czyżyk A. (PL), Podkowa N. (PL), Podfigurna-Stopa A. (PL), Meczekalski B. (PL)

Breast cancer cell invasiveness regulated by HS3ST2: A molecular mechanism mediated by protease expression via MAP kinase and WNT pathways.
Vijaya Kumar A. (DE), Gassar E. (DE), W.Yip G. (DE), Kiesel L. (DE), Götte M. (DE)

The effect of therapy with EE/Cyproterone Acetate in depressive symptoms and overall quality of life in adolescents with PCOS: Hormonal and ultrasonographic correlations
Athanassopoulos N. (GR), Deligeorgiou E. (GR), Dimopoulos K. (GR), Tsimaris P. (GR), Giannouli A. (GR), Evgenia S. (GR), Panagopoulos N. (GR), Karountzos V. (GR), Ftoulis D. (GR), Bacopoulou F. (GR), Creatsas G. (GR)

Uteroplacental blood flow and placentome morphology alteration in a polycystic ovary syndrome-like phenotype sheep model
Duan J. (FR), Tarrade A. (FR), Morel O. (FR), Padmanabhan V. (US), Chavatte-Palmer P. (FR)

Hysteroscopic sterilization with Essure: a cumulative experience with 412 cases

A comparison between two-dimensional, three-dimensional ultrasonography and hysteroscopy in the diagnosis of uterine pathology
Pristavu A. (RO), Flavius I. (RO), Mihaela G. (RO)

Endometrial Carcinoma & IUD- Mirena©
Carrasco A. (ES), Tamarit S. (ES), Izquierdo D. (ES), Cano A. (ES)

Hyperprolactinemia syndrome in children in Belarus
Zagrebaeva O. (BY), Solntsava A. (BY)

Transobturator suburethral tape in the treatment of stress urinary incontinence: efficacy and quality of life after 10 year follow up (preliminary study)

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Estrogen Receptor Beta Gene Polymorphism as a Risk Factor for Recurrent Pregnancy Loss
Mahdavipour M. (IR), Rajaei F. (AU), Zarei S. (IR), Fatemi R. (IR), Jeddi-Tehrani M. (IR), Idali F. (IR)
Effect of the Great East Japan Earthquake on the behavior of infertile patients

The correlation between dysfunctional uterine bleeding (DUB) and polycystic ovarian syndrome (PCOS) in female adolescents, as well as a review of the clinical experience of 8-year follow up.
Karountzos V. (GR), Deligeoroglou E. (GR), Dimopoulos K. (GR), Stergioti E. (GR), Tsimaris P. (GR), Deligeoroglou E. (GR), Creatsas G. (GR)

Subclinical atherosclerosis and arterial stiffness in asymptomatic nondiabetic postmenopausal women with a polycystic ovary syndrome phenotype
Armeni E. (GR), Stamatelopoulos K. (GR), Rizos D. (GR), Georgiopoulos G. (GR), Kazani M. (GR), Kazani A. (GR), Kolyviras A. (GR), Stellos K. (GR), Panoulis K. (GR), Alexandou A. (GR), Creatsas M. (GR), Papamichael C. (GR), Lambrinoudaki I. (GR)

Increased expression of the pluripotency marker SOX2 and NANOG in ovarian endometriosis
Xiao L. (CN)

Knowledge, Attitude and Practice of Breastfeeding in Rawalpindi: A Cross-sectional Study
Bhatti W. (PK), Riaz A. (PK), Aslam N. (PK), Saba N. (PK), Jabeen M. (PK)

Prenatal management of an intrauterine fetal growth restriction caused by trisomy 2 confined placental mosaicism
Delcominette S. (BE), Chantraine F. (BE), Gaillez S. (BE), Delbecque K. (BE), Nisolle M. (BE)

Ultrasound-guided embryo transfer – an updated meta-analysis
Sallam N. (EG), Ezzeldin F. (EG), Sallam H. (EG)

A Role for Androgens in the Regulation of Endometriosis?
Simitisidellis I. (GB), Greaves E. (GB), Horne A. (GB), Saunders P. (GB)

Rosiglitazone effect on the insulin signaling in granulosa cells of patients with PCOS
Salinas S. (CL), Kohen P. (CL), Muñoz A. (CL), Godoy A. (CL), Orge F. (CL), Devoto L. (CL)

Dyspareunia and less lubrication in women with Premature Ovarian Failure using hormonal therapy: correlation with vaginal aspects
Giraldo H. (BR), Benetti-Pinto C. (BR), Yela D. (BR), Pacello P. (BR), Giraldo P. (BR)

TGFB1 regulates IDs together with VEGF in the peritoneal environment of endometriosis
Young V. (GB), Brown J. (GB), Collins F. (GB), Esnal-Zufiurre A. (GB), Saunders P. (GB), Duncan W. (GB), Horne A. (GB)

Mammographic breast density in women with premature ovarian failure: a prospective analysis
Brancalion . (BR), Benetti-Pinto C. (BR), Cabello C. (BR), Tinoi E. (BR), Yela D. (BR)

Estradiol Promotes uNK-mediated Endometrial Angiogenesis via ERβ-dependent Secretion of CCL2
Gibson D. (GB), Critchley H. (GB), Saunders P. (GB)

A role for oestrogen-receptor dependent cross-talk in the interplay between macrophages and nerves in endometriosis
Greaves E. (GB), Arnold J. (DE), Horne A. (GB), Barcena de Arellano M. (DE), Saunders P. (DE)

Increased CFTR expression and decreased ENaC- expression in decidua of the first trimester miscarriage of human and abortion model of CBA×DBA/2 mice
Zhou M. (CN), Fu J. (CN), Huang W. (CN), Shen L. (CN), Xiao L. (CN), Song Y. (CN)

Reduction of Mouse Oocyte Surface Integrin Alpha9, Beta1, AlphaV, Beta3 could be Reduces the Fertilization Abedpourn . (IR), Rajaei F. (IR), Salehnia M. (IR)

An Integrative mRNA-Transcription Factor Analysis Reveals Important PCOS Hallmarks
Krishna B M. (IN), Laloraya M. (IN), Pillai S. (IN)

Association of common polymorphisms in H19 gene with birth weight in a Sri Lankan cohort of mother-baby pairs
Hewage A. (LK), Jayanthiny P. (LK), Tennekoon K. (LK), Karunanyake E. (LK), Kumarasiri J. (LK), Wijesundere A. (LK)

Integrin α5β3 expression is regulated by Müllerian inhibition substance during the endometrial window in infertile women.

The crucial role of semaphorins in the pelvic pain genesis of women with endometriosis
Arellano Estrada C. (DE)

Effects of life-style interventions on the expression of GPER, PGMC1 and PGMC2 in the endometrium of obese PCOS patients
Hulchyi M. (SE), Nybacka A. (SE), Calaby A. (SE), Sahlin L. (SE), Hirschberg A. (SE)
A Novel Approach of Understanding The Relationship Between CGG Repeats on The FMR1 Gene and Anti-Müllerian Hormone in Women Without the Premutation

Peyser A. (US), Singer T. (US), Hershlag A. (US)

Clinical and biochemical markers for cardiovascular disease and their correlation with vasomotor symptoms in postmenopausal patients.

Flores C. (MX), Marín I. (MX), Rodríguez J. (MX)

Experimental validation of terlipressin administration to prevent complication progression of ovarian stimulation

Aizyatulova D. (UA)

Sexual behaviour and contraceptive use as bacterial vaginosis (BV) trigger , in young albanean women

Kosturi E. (AL), Bylykbashi E. (AL), V. Bylykbashi I. (AL), Janushaj O. (AL)

The index of quality of life in women who delivered small-for-gestational age infants

Kovalev E. (BY), Trubkina T. (BY)

Endometrium as a first step in developing endometriosis – did we get to the truth?

Szubert M. (PL), Kowalczyk-Amico K. (PL), Suzin J. (PL), Duechler M. (PL), Szulawska A. (PL), Czyz M. (PL)

The role of estrogen and its receptors in the sensory and sympathetic nerve fibre imbalance in peritoneal endometriotic lesions

Arnold J. (DE), Barcena de Arellano M. (DE), Schneider A. (DE), Mechsner S. (DE)

Regulation of cyclin G2 degradation in ovarian cancer cells

Bernaudo S. (CA), Honarpaspar E. (CA), Peng C. (CA)

Inflammatory markers and reproductive success in women undergoing controlled ovarian hyperstimulation

Rodrígues A. (PT), Couto D. (PT), Carvalho M. (PT), Peixoto A. (PT), Silvestre M. (PT), Santos A. (PT)

Comparison of laparoscopy alone and laparoscopy combined with medication in women with infertility associated with minimal or mild endometriosis: a prospective randomized controlled trial

Zhu S. (CN), Liu D. (CN), Huang W. (CN), Wang Q. (CN), Wang Q. (CN), Zhou L. (CN), Feng G. (CN)

Prevalence of sexual dysfunction in Colombian women who expressed to have anxiety

Duarte-Osorio L. (CO), Monterrosa-Castro A. (CO), Portela-Buelvas K. (CO)

Hormonal therapy and sexual dysfunction in postmenopausal women from the Colombian Caribbean. Assessment with the brief Female Sexual Function Index

Portela-Buelvas K. (CO), Monterrosa-Castro A. (CO), Ulloque-Caamaño L. (CO), Paternina-Caicedo A. (CO)

IGFR1 receptor and GLUT 1 are associated with STAT3 in human primary invasive ductal breast cancers.

Sulkowska U. (PL), Wincewicz A. (PL), Sulkowski S. (PL)

Reduction of cellular activity in lacrimal glands as a consequence of increased apoptotic cell death (cleaved caspase-3) in female mice of hyperprolactinemic mice female

Leal A. (BR), Gomes R. (BR), Simões R. (BR), Simões M. (BR), Soares Júnior J. (BR), Verna C. (BR)

Comparative citogenetic analysis in two tissues with different lineage in turner's syndrome patients. Correlation with phenotype

Ros C. (ES), Serra A. (ES), Margarit E. (ES), Balasch J. (ES), Castelo-Branco C. (ES)

The predominance of Th17 lymphocytes and decreased number and function of Treg cells are present in preeclampsia

Darmochwal-Kolarz D. (PL), Kludka-Sternik M. (PL), Kolarz B. (PL), Oleszczuk J. (PL)

Prolactin and prolactin receptor protein expression in the uterus of mice with metoclopramide-induced hyperprolactinemia

do Amaral V. (BR), Soares-Júnior J. (BR), Carvalho K. (BR), Maciel G. (BR), Garcia N. (BR), Marcondes R. (BR), Hideki T. (BR), Baracat E. (BR)

C3420T polymorphism of the DRD2 gene in the childbearing age Uzbek women.

Adkhamova N. (UZ), K. Najmutdinova D. (UZ)

Impact of estrogen and Fulvestrant on induction of ovarian surface epithelial stem cells to Primordial follicles

Majdi Seghinsara A. (IR), Soleimani Rad J. (IR), Niknafs B. (IR), Azadi E. (IR)

Interleukin-1β and Tumour Necrosis Factor α in relationship with Bone Mineral Density in Menopausal Women

Malutan A. (RO), Costin N. (RO), Ciortea R. (RO), Mocan R. (RO), Mihiu D. (RO)

Diagnosis of endometrial polyp by ultrasound in patients with abnormal uterine bleeding: Power Doppler versus Saline Infusion Sonography

Nematian S. (PH), Rivera L. (PH)
Breast density by mammography and its relationship with characteristics of patients with breast cancer
Canizares D. (EC), Andino M. (EC)

Surgical Menopause Alters Neuroprotective Estrogen Signaling: Potential Role for Estrogen Receptor Co-Regulator PELP1

What do women know about Pap smear?
Basto C. (PT), Neves A. (PT), Reis B. (PT), Cancela M. (PT), Mateus A. (PT)

Endometriosis Patient-to-Patient Consults: Use of Online Support Groups to Circumvent Medical Professionals
Griffith V. (GB)

Sperm DNA Fragmentation as one of the reasons of the IVF/ICSI treatments failure
Khmil M. (UA)

Extra uterine in Kermanshah city 2012-2013
Veisimiankali M. (IR), Gholami A. (IR)

Cell free fetal DNA test evaluation as diagnostic or screening method
Qirko M. (AL), Qirko R. (AL), Koroveshi E. (AL)

Predicting the chances of a live birth for infertile couples using scientifically validated models
Chausiaux O. (GB), Hayes J. (GB), Husheer S. (GB)

Subclinical hypothyroidism and cardiovascular risk factors in postmenopausal women

Antimicrobial peptides in forming of microbiocenosis of female reproductive tract at late pregnancy.
Ivashova O. (RU), Olga L. (RU), Pakhomov S. (RU), Churnosov M. (RU), Tsuverkalova J. (RU)

Modulatory role of D-chiro-inositol (DCI) on LH and insulin secretin in obese PCOS patients with or without familiar diabetes
Santagni S. (IT), Rattighieri E. (IT), Chierchia E. (IT), Ricchieri F. (IT), Prati A. (IT), Despini G. (IT), Marini G. (IT), Genazzani A. (IT)

Association of Type 2 diabetes with hypothyroidism in menopausal and postmenopausal women
Gulyamova K. (UZ)

TLRs Expression in the Placenta during Labour and Preeclampsia
Abdulsid A. (GB), Fletcher A. (GB), Lyall F. (GB)

Endometriosis in Tunisian women: vascular endothelial growth factor +936 C/T gene polymorphism and serum interleukin-33 levels
Henidi B. (TN)

Evaluation of genes involved in the signaling pathway of estrogen in the uterus of rats treated with estrogen or genistein immediately or later after castration
Carbonel A. (BR), Caliò M. (BR), Maganin C. (BR), Sasso G. (BR), Santos M. (BR), Simoes R. (BR), Baracat M. (BR), Bertoncini C. (BR), Baracat E. (BR), Soares Jr J. (BR)

Struma Ovarii - A case Report
Duarte C. (PT), Mesquita M. (PT), Oliveira P. (PT)

The metabolic syndrome and its components in premenopausal and postmenopausal women.
Bozdemir Ozel C. (TR), Demirta R. (TR), Arıka H. (TR), Celer O. (TR), Akali A. (TR)

Pro-inflammatory M1/Th1 type immune network and increased expression of TSG-6 in the eutopic endometrium from women with endometriosis
Marrocchella S. (IT), Cicinelli E. (IT), Neri M. (IT), Ficarelli V. (IT), Storelli P. (IT), Garlanda C. (IT), Levi Setti P (IT), Vendemiale G. (IT), Serviddio G. (IT), Greco P. (IT), Matteo M. (IT)

The effects of posterior tibial nerve stimulation on woman with Overactive Bladder Syndrome on the frequency, urge incontinence and on the wall bladder thickness.
Russo E. (IT), Mannella P. (IT), Matula I. (IT), Palla G. (IT), Simoncini T. (IT)

IVF pregnancy after transcranial tumor removal from the patient with hypopituitarism
Barmina I. (RU), Vitiazeva I. (RU), Razina O. (RU), Dzeranova L. (RU), Melnichenko G. (RU)

Subsequent menopause does physical activeness alleviates the severity of menopausal symptoms?
Sharma P. (IN), Kapoor S. (IN)

The pregnancy course in patient with PCOS- case report.
Tomczyk K. (PL), Ropacka-Lesia M. (PL), Bręborowicz G. (PL)

Pregnancy in a patient with acromegaly after transsphenoidal partial resection of pituitary macroadenoma-a case report
Tomczyk K. (PL), Rzynski P. (PL), Wozniak J. (PL), Opara T. (PL)

Hysterectomy for Postpartum Haemorrhage
Pavia N. (MT), Mamo N. (MT), Debattista C. (MT), Tsar O. (MT), Vella M. (MT), Sant M. (MT), Mamo J. (MT)
Different profiles of progesterone metabolites in endometrial cancer cell lines Ishikawa and HEC 1A
Sinreih M. (SI), Zukunft S. (DE), Prehn C. (DE), Adamski J. (DE), Lanišnik Rižner T. (SI)
The role of the nitric oxide during labour and delivery
Bernacchi G. (IT)
Synthetic progestins differently modulate plasminogen activator inhibitor-1 in endothelial cells
Cecchi E. (IT), Montt-Guevara M. (IT), Palla G. (IT), Spina S. (IT), Bernacchi G. (IT), Simoncini T. (IT)
The awareness and attitudes of women toward breast cancer risk factors breast cancer symptoms and screening methods
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EnDoCeutics
EndoCeutics, Inc.
2795 Laurier Boulevard, Suite 500, Quebec (Quebec), G1V 4M7
www.endoceutics.com
• Dr Fernand Labrie
  President, CEO and CSO
  Tel (418) 653-0055 Fax. (418) 653-4784
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• Jonathan Bertin, Ph.D.
  Postdoctoral Fellow, Research & Development
  Tel. (418) 580-7942 Fax. (418) 651-4847
  jonathan.bertin@endoceutics.com

EndoCeutics’ cGMP/GLP-compliant Analytical/Bioanalytical unique facilities offer high-throughput, high quality and mass spectrometry-based steroid assays and compound analyses.

Our Bioanalytical Services department can analyze serum and tissue samples obtained from clinical studies in humans as well as investigations in experimental animals. Our staff members keep their skills at the forefront of science through the development of new analytical methods, in agreement with regulatory guidelines (FDA, EMA, TPD) using the most advanced technology and equipment.

Our analytical laboratories perform method development and validation for pharmaceutical compounds, in accordance with compendia procedures, including USP and ICH, as well as in-house developed methods, including those for steroid hormones and metabolites.

Epitech Group’s core activity is focused on a biological approach to modulation pharmacology. Epitech’s products are mainly based on original bioactive principles, covered by owned worldwide patents, able to regulate (in application of the ALIA mechanism) the mast cell hyper-reactivity through a biological modulation similar to what is done by physiological mechanisms.

Epitech’s Pelvic System Project is conceived for the creation of pharmacological instruments able to control and/or restore the homeodynamic tissue balance in the Pelvic region, with systemic and topical administration.

Farmitalia Srl, based in Catania (Italy), Via A. De Gasperi n. 165/B, was founded in 1995 after a brilliant intuition of its founder Mr Fabio Scaccia.

Today Farmitalia Srl is one of the industry Italian leaders on gynaecology. With its portfolio of more than twenty products (medical devices and pharmaceutical products), Farmitalia Srl takes care of woman during all the phases of her life, from adolescence to menopause, without neglecting any of the possible daily problems and also remaining close to her during pregnancy.

Ferring è una società biofarmaceutica impegnata nella identificazione, sviluppo e commercializzazione di prodotti innovativi nell’area della infertilità, ostetricia, urologia, gastroenterologia, endocrinologia e osteoartrite. Ferring, la cui sede è situata a Saint-Prex, Svizzera, opera in più di 55 Stati con oltre 4.500 dipendenti nel mondo ed assicura la disponibilità delle proprie specialità in più di 100 Paesi.

Ferring è fortemente coinvolta in prodotti di Ricerca e Sviluppo per la messa a punto di nuove generazioni di farmaci innovativi, rispetto alle specialità medicinali attualmente in commercio, collaborando anche con istituti accademici.
Headquartered in Hungary, Gedeon Richter Plc. is an innovation-driven specialty pharmaceutical multinational company well established in Central Eastern Europe and with an expanding presence in Western Europe in the field of gynaecology. Richter's consolidated sales were approximately EUR 1.1 billion in 2012. The product portfolio covers almost all therapeutic areas, including gynaecology, central nervous system and cardiovascular. The Company has the largest R&D unit in CEE. Original research activity focuses on CNS disorders with main clinical targets being schizophrenia, anxiety, chronic pain and depression. With its widely acknowledged steroid chemistry expertise Richter is also a significant player in female healthcare.

HRA Pharma
15 rue Beranger 75003 Paris, France
Contact. Ahlem Sifi
Tel. +33(0)140331130 Fax. +33(0)140331231
www.hra-pharma.com

HRA Pharma is an emerging European pharmaceutical company that designs products, devices and supporting services in niche areas of health and makes them available to doctors and patients worldwide. A pioneer in emergency contraception since the launch of its first product in 1999, NorLevo®, HRA Pharma has engineered a robust portfolio and pipeline in the fields of reproductive health and endocrinology which it maximizes through in-licensing and out-licensing agreements. The company targets and tackles therapeutic gaps and uses innovative marketing solutions and socially-conscious programs to promote healthy management of drug and diseases worldwide.

Headquartered in Paris, France with local teams based at subsidiaries in Germany (Bochum), the United Kingdom (London), Italy (Roma), Spain (Madrid) and France (Paris), HRA Pharma is privately-owned with consolidated sales over 54 M€ in 2012. The company has forged a strong network of R&D, manufacturing, distribution and NGO partners which enables it to satisfy critical patient needs and improve patient health in over 50 countries across the globe.

IBSA Institut Biochimique SA
Via del Piano, P.O. Box 266,
6915 Pambio-Noranco, Lugano, Switzerland
Tel. +41 58 360 10 00 Fax. +41 58 360 16 47
info@ibsa.ch - www.ibsa-international.com

IBSA is an international pharmaceutical company with headquarters in Lugano, Switzerland. IBSA has developed an entirely new purification process in order to obtain a full range of highly purified, human gonadotrophins (hFSH, hMG and hCG). This patented process ensures both a high level of purity and the full respect of the natural glycosylation of these molecules. Recently IBSA has marketed a novel ingenious system to deliver progesterone subcutaneously in an aqueous solution.

IBSA has managed to guarantee the highest quality of its products over the years due to the advantages of having a complete in-house manufacturing process in company-owned plants and thanks to a global quality system. The company's other franchises include osteoarthritis, pain-management, dermatology and thyroid diseases.

Italfarmaco S.p.A.
Viale Fulvio Testi, 330 _ Milano
Tel./Fax. +39 0264431
info@italfarmaco.com - www.italfarmaco.com

Italfarmaco, one of the leading Italian pharmaceutical groups, operates in both the pharmaceutical and the fine chemical industries. The Italfarmaco Group now markets ethical products in Italy, Switzerland, Spain, Portugal, Greece, Russia, Turkey, Chile, Peru, Morocco and also for the subsidiary Chemi SPA in USA and Brazil. Total employees is over 2100 and total turnover exceeds 500 million euros.

Its products, all of which have a high therapeutic content, are mainly used in the cardiovascular, immuno-oncological, gynaecological, dermatological, orthopaedic and neurological areas.

The group owns modern, sophisticated industrial plants at which it manufactures its proprietary drugs to the highest quality standards. The first plant, at which injectables and solid oral drugs are manufactured, is situated in Milan, and a second manufacturing unit, for the production of liquid oral drugs, located in Madrid.

The Italfarmaco Group is particularly active in the field of research, mainly oriented towards the cardiovascular area and diseases associated with alterations of the immunological system.

Product portfolio expansion of the entire group and consolidation in international markets represents priority objectives.
Product portfolio expansion is pursued through:
increased investments in R&D in order to develop
innovative products in already established therapeutic
areas;
commercial partnerships with pharmaceutical companies
in the field of therapeutic areas with an established
presence.
Further expansion worldwide and foundation of new
affiliates in foreign markets represent the goal which the
company pursues through the creation of new subsidiaries
and joint ventures with other pharmaceutical firms.

**LJ PHARMA SRL**

Zona Industriale Piano Tavola Contra. Pantano s.n.
95032 – Belpasso (CT)
Tel. 095 7223908/ 7132349 Fax. 095 386640
ljpharma@ljpharma.com - www.ljpharma.it

LJ Pharma is an independent pharmaceutical group of
private ownership, with a long experience in the national
market of nutraceutical, medical device, cosmetic and
pharmaceutical products. Our mission is to achieve a
greater involvement at the present to make a better
future. To accomplish this, we offer products of a high
scientific standard to fit patients’ needs and contribute
to the knowledge of the medical community about new
improvements in medicine and pharmacology, while
keeping in touch with health professionals and patients. LJ
Pharma distributes women’s health products. Our aim is to
support woman during all life’s stages offering innovative
and effective solutions for minor daily disorders and for
high social impact diseases.

**LO.LI PHARMA**

Via dei Luxardo, 33- 00156 Rome
Tel./Fax. +39 0622442074/ +39 0622442072
info@lolipharmainternational.com
www.lolipharmainternational.com

LO.LI. Pharma INTERNATIONAL is a branch of LO.LI.
Pharma Srl, a growing pharmaceutical company, based
in Rome, dedicated to the research, development and
distribution of Medical Devices and Functional Dietary
Supplements.
Lo.Li. Pharma has been present in the Italian
pharmaceutical market for 10 years, developing and
commercializing successful and revolutionary products
which have changed the attitude of specialist medical
practitioners towards several different diseases.
The company's key success factor is the continuous effort
in developing new products while responding to the needs
of patients and of new treatments and prevention tools for
the medical class.

The innovative formulations of Lo.Li. Pharma have
attracted the attention of many foreign Companies and
private citizens alike, all looking forward to have Loli’s
products available in their own countries.
After the first International partnership signed in 2007
with a South African Company, LO.LI.Pharma has gained
the interest several multinational companies, thus
establishing licensing agreements in many countries all
around the world: Bulgaria, Hungary, The Netherlands,
Cyprus, Turkey, Spain, Portugal, USA, France, Lebanon,
Pakistan, Greece, Chile and Perú.
We believe in our Products and in their beneficial effects,
as much as we believe that these effects should be made
available to as many people as possible.
LO.LI.Pharma INTERNATIONAL mission is to spread LO.LI.
Pharma’ research and innovation worldwide.
Therapeutic area
· Fertility
· Obstetrics
· Gynecology
· Andrology
· Dermatology
· Endocrinology
· Neurology

**MANETTI & ROBERTS**

Via Baldanzese 177 50041 Calenzano Firenze

In 1921 Lorenzo Manetti and Henry Roberts founded
Manetti & Roberts by merging their respective
pharmaceutical laboratories based in Florence. Thanks to
its advanced knowledge base, Manetti & Roberts develops
products leader in their market. Thus in the Italian mass
market, M&R is first in the deodorant segment and is
leader in the personal hygiene category with brands such
as Neutro Roberts, Borotalco and Chilly.
In pharmacy, Manetti & Roberts is leader on the
European market of slimming products, with brands like
Somatoline and Somatoline Cosmetics. Somatoline is an
OTC medicine, specific to cellulite treatment, Somatoline
Cosmetics is a range of slimming products whose efficacy
and safety is demonstrated by many scientific clinical
tests carried out vs. placebo in independent institutes.
NAMED S.P.A.
Via Lega Lombarda, 33 - 20855 - Lesmo (MB) Italy
Tel. +39 (0) 39 6985 067 - +39 (0) 39 5788100
Fax. +39 (0) 39 6985 030

NAMED (acronym of Natural Medicine), is a privately-held Italian pharmaceutical company, engaged in the development, marketing and sale of natural remedies, food and dietary supplements, in different therapeutic areas. NAMED has several license and distribution agreements with different International pharmaceutical companies, leaders in natural medicine from Germany, Austria, UK, Denmark, Japan, Australia and New Zealand. NAMED is always focused to the health of patients; for this reason most of products are gluten-free, non-genetically modified and free from BSE / TSE. NAMED in recent years has completed an important phase of development that yield the company a leading position in the Italian field of natural medicine. NAMED today ranks among the first 3 companies in the Italian market of natural medicine.

PANTARHEI BIOSCIENCE (PRB)
Boslaan 11 P.O. Box 464 3700 AL Zeist Netherlands
Tel. +31(0)306985020 Fax. +31(0)306985021

Pantarhei Bioscience (PRB) is a Pharma Company, founded in 2001 which specialises in clinical development of innovative, patent protected new medical uses of existing biologicals, hormones, drugs and combinations thereof in the area of Women’s Health and Endocrine Cancer. The Company operates as a virtual clinical research and project management organisation. Pantarhei’s management team combines extensive and outstanding expertise in the areas of management, drug development and business development with many years of experience in relevant pharmaceutical and biotechnology industries. Pantarhei’s offices, which encompass the Company’s administrative and business operations, are located in Zeist, The Netherlands. Prioritised projects at PRB are the new natural estrogen Estetrol (E4) for several applications, normalisation of testosterone during oral contraception by adding DHEA and zona pellucida antigen immunisation to treat metastasised ovarian cancer. The oral contraceptive application of E4 has been obtained by Actavis for final phase 3 development.

PFIZER
Via Valbondione, 113 – 00188 Roma
www.pfizer.it

Pfizer is dedicated to better health and greater access to healthcare for people. Its purpose is helping people live longer, healthier, happier lives and the route to that purpose is through discovering and developing breakthrough medicines; providing information on prevention, wellness, and treatment; consistent high-quality manufacturing of medicines; and global leadership in corporate responsibility. Pfizer products are available in more than 150 countries. The company presence in Italy dates back to 1955.

ROTTAPHARM SPA
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Tel. +39.0397390.1
email: info@rottapharm.com
Sito web: www.rottapharm.it

Founded in 1961 by Prof. Luigi Rovati, Rottapharm|Madaus is today a multinational pharmaceutical group operating in around 85 different countries worldwide. Rottapharm|Madaus can boast a full portfolio of original drugs and molecules, discovered and patented by their in-house R&D division in the areas of rheumatology, gynaecology, cardiology and gastrointestinal sciences. The work of Rottapharm|Madaus has extended to cover the field of prevention and general personal wellbeing. Today the Company is proud to boast an undisputed leadership position in personal care products sold in the pharmacy, in hygiene care (Saugella, Babygella) and in dermocosmetics (Biomineral, Biothymus). The role played by Rottapharm|Madaus in the nutraceutical product sector is worthy of separate mention: in 2001 launched Estromineral, for treating the symptoms of menopause, Armolipid for natural cardiovascular protection and Fortilase, a supplement with excellent anti-inflammatory and anti-oedema properties.
In 2012, Shionogi Limited established our company in Europe with country offices opened in 2013, including Italy, to get first hand understanding of patients within Europe and the health care professionals that treat them and expand our research and commercial operations. Over 135 years ago, Shionogi was founded by Gisaburo Shiono SR. in Doshomachi, Osaka, Japan and the company has grown to become a major research-driven pharmaceutical company dedicated to placing the highest value on patient care. At Shionogi, we prioritise listening, speaking to and interacting with healthcare professionals in order to better understand the needs of their patients. Collaboration is at the heart of what we do. This has helped us discover innovative and much needed treatment options in areas including Women’s Health, Pain and Oncology. We look forward to co-operating with you to continue this in Europe.

Teva is committed to providing access to high-quality healthcare by developing, producing and marketing affordable generic, innovative and specialty products, as well as active pharmaceutical ingredients. Teva Women’s Health has an impact on women’s lives across their lifespan, with a wide range of products including contraceptives and treatments for menopause and perimenopause. Teva is an important contributor to improvements in women’s health, with multiple products currently marketed and additional products being developed across the spectrum of women’s healthcare. Women’s needs change over time, and Teva Women’s Health is positioned to support women at every stage of their life.

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### PLENARY LECTURES

**MARCH 6**

15.45/16.15

**Auditorium**

Emerging Science & Technology for Contraception, an answer to decreasing maternal mortality?

**Hall Affari 0**

Breast stem cells and breast cancer stem cells

**Hall Affari 1**

Innovative drugs: new perspectives and health system sustainability

**Hall Affari 2**

Lo standard della contraccezione d’emergenza

**Sponsored by HRA Pharma**

**Hall Verde**

Vulvo-vaginal atrophy: impact on sex and relationship

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**MARCH 7**

15.45/16.15

**Auditorium**

What we learned from the recent referral procedure concerning combined hormonal contraceptives – conclusions for CMA/EE

**Sponsored by Gedeon Richter**

**Hall Affari 0**

The optimal time to stop hormone therapy

**Hall Affari 1**

Ovarian stimulation of patients in risk of OHSS

**Hall Affari 2**

Il ruolo della vitamina K2 nel metabolismo osseo

**Sponsored by AG Pharma**

**Hall Verde**

Women’s health and women’s rights

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### SPONSORED SYMPOSIA AND LECTURES

**MARCH 5**

09.30/10.30

**Hall Verde**

Course The estrogen receptors ligands and their effects - dedicated to: the Estrogens and SERMs clinical benefits and risks throughout reproductive life

**Sponsored by Actavis**

**MARCH 6**

11.45/13.15 **Auditorium**

Oral contraception with estradiol: a step forward

**Sponsored by Teva**

15.45/16.15 **Hall Affari 2**

**PL** Lo standard della contraccezione d’emergenza

**Sponsored by HRA Pharma**

16.30/18.00 **Hall Affari 2**

Based phytotherapy in gynecology

**Sponsored by Bionorica**

**MARCH 7**

09.45/11.15 **Hall Affari 1**

Myo-inositol: from the evidence-based medicine to the international consensus conference

**Sponsored by Lo.Li Pharma**

13.15/15.15 **Hall Affari 0**

ISGE special symposium: latest outcomes in oral emergency contraception

**Sponsored by HRA Pharma**

13.15/15.15 **Hall Affari 1**

Endocrine disorders and female infertility

**Sponsored by IBSA**

15.45/16.15 **Auditorium**

**PL** What we learned from the recent referral procedure concerning combined hormonal contraceptives – conclusions for CMA/EE

**Sponsored by Gedeon Richter**

15.45/16.15 **Hall Affari 2**

**PL** Il ruolo della vitamina K2 nel metabolismo osseo

**Sponsored by AG Pharma**
SCIENTIFIC SOCIETY SYMPOSIA

MARCH 6
08.30/09.30
Auditorium
International Menopause Society  What does the future look like – therapies in development
Hall Affari 0
Federacion Iberoamericana de Ginecologia Endocrinologica  Prevention-treatment in women during perimenopause and early menopause
Hall Affari 1
European Society of Gynecology  Estrogens: coagulation and beyond
Hall Affari 2
Associazione Italiana di Ginecologia Endocrinologica  Adrenal androgens
Hall Verde
Società Italiana di Ginecologia della Terza Età  Menopause: the metabolic mystery

MARCH 7
08.30/09.30
Hall Auditorium
European Menopause and Andropause Society  Healthy aging in women, from lifestyle to medical intervention
Hall Affari 0
Asociación Latinoamericana de Endocrinología Ginecológica  Situation of obesity and the metabolic syndrome in Latin American women
Hall Affari 1
International Academy of Human Reproduction  Emergency conditions in reproductive medicine
Hall Affari 2
Federazione Italiana di Sessuologia Scientifica  La classificazione delle disfunzioni sessuali femminili nel DSM V
Hall Verde
Polish Society of Gynecological Endocrinology  Session of Polish Society of Gynecological Endocrinology
Hall Onice
Sociedade Brasileira de Ginecologia Endocrina  Controversial Topics in Gynecological Endocrinology
11.45/13.15
Hall Auditorium  European Progestogen Club  Progestogens from adolescence to menopause

MEET THE EXPERT SESSIONS

MARCH 8
10.15/11.15
Hall Auditorium
Selecting the right contraceptive strategy
Hall Affari 0
Ultrasound in early pregnancy
Hall Affari 2
Infertility: from genes to proteomic
Hall Verde
Polycistic ovary: from inflammation to ageing
WEDNESDAY, MARCH 5TH

HALLS ► AUDITORIUM
09.30-13.00

15.30-17.30 Opening Symposium
Hormonal contraception: from the past to the future, always for women health protection

18.00-18.45 Opening Ceremony

18.45-19.45 Opening Lecture
HRT: is the circle complete?

VERDE
Precongress Course
The estrogen receptors ligands and their effects
dedicated to: The Estrogens and SERMs clinical benefits and risks throughout reproductive life
(Sponsored by Actavis)

HALL AUDITORIUM
◆ HRT: is the circle complete?
J. Stevenson (GB)

12 years ago, hormone replacement therapy (HRT) was widely used for relief of menopausal symptoms and prevention of postmenopausal osteoporosis. There was suggestive evidence for prevention of coronary heart disease (CHD) but not stroke, for an increase in venous thrombo-embolism (VTE), and a possible increase in breast cancer risk. But following the initial publication from the Women’s Health Initiative (WHI) and subsequently the Million Women Study (MWS), it was claimed that HRT increased the risks of CHD, stroke, VTE and breast cancer. This led to new recommendations from regulatory authorities restricting the use of HRT, resulting in a 50% decline in use. However, following critical evaluation of these studies, the publication of more complete data, further post-study follow-up, re-interpretation of the findings, and the emergence of data from new studies, it is obvious that the initial safety concerns for HRT were misleading. HRT is the most effective and safe option for relief of menopausal symptoms and prevention of osteoporosis.

When given appropriately, HRT reduces CHD risk, does not increase stroke risk, increases VTE risk dependent on dose and route of administration, and may or may not be associated with a small increased risk of breast cancer. The circle is complete.

Dr John Stevenson is Reader in Metabolic Medicine in the National Heart and Lung Institute, Imperial College London, and Consultant Physician at the Royal Brompton Hospital, London. His research has included studies of metabolic risk factors for coronary heart disease. sex hormone deficiency and replacement, and metabolic bone diseases. He has over 400 publications in journals and books, including 11 textbooks. He is Chairman of the charity Women’s Health Concern, Trustee of the British Menopause Society, Fellow of the European Society of Cardiology, Foundation Member of the Faculty of Sports and Exercise Medicine (UK), and Editor of Maturitas. He is a past Chairman of the British Menopause Society and past Executive Committee Member of the International and European Menopause Societies.
VERDE

09:30/13:00 PRE-CONGRESS COURSE
THE ESTROGEN RECEPTORS LIGANDS AND THEIR EFFECTS
DEDICATED TO: THE ESTROGENS AND SERMS CLINICAL BENEFITS AND RISKS THROUGHOUT REPRODUCTIVE LIFE
Chairmanship: Berga Sarah (US)
Bouchard Philippe (FR) Comparative clinical safety and efficacy of estrogens in oral, vaginal and transdermal Combined Contraception
Simoncini Tommaso (IT) Estrogens or SERMs in healthy post menopausal women?
Arnal Jean Francois (FR) Estrogen Receptor and their ligands
Foidart Jean Michel (BE) Estetrol: An unique, new, natural Estrogen with SERMs activity

AUDITORIUM

15:30/17:30 OPENING SYMPOSIUM
HORMONAL CONTRACEPTION: FROM THE PAST TO THE FUTURE, ALWAYS FOR WOMEN HEALTH PROTECTION
Chairmanship: Genazzani Andrea R. (IT), Bitzer Johannes (CH)
Gemzell Danielsson Kristina (SE) Effective contraceptive methods-a prerequisite for reproductive health
Sitruk-Ware Regine (US) Applying Emerging Science to Contraception Research
Nappi Rossella (IT) Impact on women’s sexual health
Vujovic Svetlana (RS) Contraception in climacterium

18:00/18:45 OPENING CEREMONY

18:45/19:15 OPENING LECTURE
Chairmanship: Simoncini Tommaso (IT)
Stevenson John (GB) HRT: is the circle complete?
# Thursday, March 6th

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<td>18.00-19.00</td>
<td>ISGE Gen Assembly</td>
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HALL AUDITORIUM

- Emerging Science and technology for Contraception. An answer to decreasing maternal mortality?
  Sitruk-Ware Regine (US)

Rapid population growth has significant individual, family, societal and environmental effects and contributes to high maternal and infant mortality and morbidity in many developing countries. The contraceptives available today are not suitable to all users and the need to expand contraceptive choices still exists. Concerns over the adverse effects of hormonal contraceptives have led to developing new formulations with improved metabolic profile. Progesterone receptor modulators are highly effective for blocking ovulation and are undergoing investigation. Future developments also include the combination of a contraceptive combined with an antiretroviral agent for both contraception and protection against sexually transmitted infection. Non-hormonal methods are still at an early stage of research, with the identification of specific targets in the testis and ovary, as well as interactions between spermatozoa and ova. It is hoped that the introduction of new methods with additional health benefits would improve access to a wider range of improved contraceptives. Improved access to safe and effective methods will help decrease unsafe abortions, unscheduled pregnancies and maternal mortality.

HALL AFFARI 0

- Breast stem cells and breast cancer stem cells
  Foidart Jean-Michel (BE)

Professor Foidart has been the president of the Belgian Society of Gynaecology and of the Belgian College for the Mother and Newborn. He has published over 618 publications, which were cited more than 14,585 times and his H factor is 65. He is an expert at the FNRS and FWO. He also serves as Jury member of the Prestigious Interbrouw Baillet Latour Prize. He is member of the Academies of Medicine of Belgium and France. He was nominated Doctor Honoris Causae of the Universities of Paris 5, Pierre et Marie Curie-La Sorbonne in 2010 and of the University Paul Sabatier in Toulouse in 2012. In 1999, he created with F. Fornieri a spin-off at the University of Liege, Mithra, to develop the patents granted to his Biology and Research Lab. Mithra has now grown up and has more than 200 scientists and employees. In 2012, he has become an Extraordinary professor at the University of Liege and presently he is consultant of Uteron and conducts medical research at the GIGA at the University of Liege.

HALL AFFARI 1

- Innovative drugs: new perspectives and health system sustainability
  Pecorelli Sergio (IT)

HALL AFFARI 0

- Lo standard della contraccezione d’emergenza
  Cagnacci Angelo (IT)

HALL VERDE

- Vulvo-vaginal atrophy: impact on sex and relationship
  Nappi Rossella (IT)

Associate Professor of Obstetrics and Gynecology, Research Center for Reproductive Medicine and Director of the Gynecological Endocrinology & Menopause Unit, IRCCS San Matteo Foundation, University of Pavia (Italy)

MD, PhD Gynecologist, Endocrinologist, Sexologist Dr Nappi’s major interest is focused on psychoneuroendocrinology of female reproductive life and women’s sexuality.

She has published more than 200 scientific articles in peer-reviewed journals and international books. She is a well known speaker on women’s health from adolescence to menopause and has been featured in many international meetings. She is past president of the International Society for the Study of Women Sexual Health (ISSWSH) (2007-2008) and member of the advisory board of the International Menopause Society (IMS) (2008-2014).
THURSDAY, MARCH 6TH

AUDITORIUM

08:30/09:30  SCIENTIFIC SOCIETY SYMPOSIUM  (ORGANIZED BY IMS - INTERNATIONAL MENOPAUSE SOCIETY)

WHAT DOES THE FUTURE LOOK LIKE – THERAPIES IN DEVELOPMENT
Chairmanship: De Villiers Tobias (ZA)

Gompel Anne (FR) Breast in the menopausal women: where do we go from here?
Archer David (US) New approaches to the management of hot flushes
Nappi Rossella (IT) Pharmacogenomics for female sexual health: a vision of the future
Chedraui Peter (EC) Nutrition and health during mid-life: searching for solutions and meeting challenges for the aging population
De Villiers Tobias (ZA) The future of bone therapies

09:45/11:15  PLENARY SESSION

METABOLIC SYNDROME AND OBESITY: IMPACT ON REPRODUCTION AND AGEING
Chairmanship: Lunenfeld Bruno (IL), Milewicz Andrzej (PL)

Naftolin Frederick (US) A developmental basis for the metabolic syndrome
Lanzań Antonio (IT) Impact of PCOS phenotypes on metabolic and reproductive function
Genazzani Alessandro (IT) Obesity and metabolic syndrome: impact and relationship with menopausal transition
Vartej Ioana (GR) Metabolic syndrome, Type II Diabetes and Vitamin D in postmenopausal women

11:15/11:45  BREAK

11:45/13:15  SPONSORED SYMPOSIUM  (SPONSORED BY TEVA)

ORAL CONTRACEPTION WITH ESTRADIOL: A STEP FORWARD
Chairmanship: Nappi Rossella (IT)

Lobo Paloma (ES) Natural balance estroprogestin pill: a new concept is born
Rietzschel Ernst (BE) Arterial and venous impact of combined oral contraception
Lete Inake (ES) Estradiol pills are suitable for starters

13:15/15:45  POSTER SESSION WITH LUNCH  SEE PAGE 78

15:45/16:15  PLENARY LECTURE

Chairmanship: Serfaty David (FR), Gemzell-Danielsson Kristina (SE)

Sitruk-Ware Regine (US) Emerging science and technology for contraception. An answer to decreasing maternal mortality?

16:30/18:00  PLENARY SESSION

ENDOMETRIOSIS: NEW CHALLENGES FROM BASIC SCIENCE
Chairmanship: Fedele Luigi (IT), Mueck Alfred (DE)

Kiesel Ludwig (DE) Regulation of endometriosis by miRNA
Petraglia Felice (IT) Molecular aspects of deep infiltrating endometriosis
Taylor Robert (US) Mechanisms of Inflammation and Pain in Endometriosis
Pluchino Nicola (IT) Effects on sexual function of medical and surgical therapy for endometriosis
**BELARA® ethinylestradiol/chlormadinone acetate 0.03 mg / 2 mg film-coated tablets. ATC code: G03AA12.**

**Presentation:** Each round, light-pink, film-coated tablet contains 0.03 mg ethinylestradiol and 2 mg chlormadinone acetate. 

**Indication:** One oral contraceptive. **Dosage:** One tablet daily for 21 consecutive days followed by a 7-day tablet-free interval, starting on the first day of the month for the day after the usual tablet-free or placebo tablet interval of a previous combined oral contraceptive, or changing from a progestogen-only pill any day, or changing from an injection, implant, vaginal ring, transdermal patch or the IUS on the day of its removal or at the latest when the next application would be due. Each subsequent pack is started after a 7-day tablet-free interval.

**Contraindications:** Past or present thrombotic disorders or prothrombin conditions; scheduled surgery; past or present cerebrovascular accident; anorexia; in order multiple risk factors for arterial thrombosis, diabetes mellitus with vascular changes or uncontrolled; uncontrolled hyperlipidaemia; severe dyslipoproteinaemia; hereditary or acquired predisposition to thrombosis; hepatitis, jaundice, liver function disorders until liver function have returned to normal; generalised pruritus, cholestatic; previous or existing liver tumours; severe epigastric pain, engorgement of the liver or symptoms of intra-abdominal haemorrhage; pregnancy; male or present malignant lymphoma; bone or bone marrow transplant; severe uncontrolled hypertension; severe unexplained genital bleeding; hypersensitivity to chlormadinone acetate, ethinylestradiol or to any of the excipients.

**Warnings:** In case of the following conditions/risk factors the benefit of combined oral contraceptive use should be individually weighed against the possible risks. In the event of aggravation, exacerbation or first appearance of any of these conditions or risk factors, the woman should contact her physician. 

Risk factors for venous or arterial thromboembolism are: increasing age; a positive family history; prolonged immobilisation; major surgery; any surgery to the legs, or major trauma; obesity; smoking; dyslipoproteinaemia; hypertension; migraine; valvular heart disease; arterial fibrillation. Medical conditions associated with adverse vascular events include: diabetes mellitus; systemic lupus erythematosus; haemolytic uraemic syndrome and chronic inflammatory bowel disease; Crohn’s disease or ulcerative colitis and sickle cell disease. In case of suspected or confirmed thrombosis, combined oral contraceptive use should be discontinued. Some studies suggest increased risk of cervical and breast cancer. Hepatic tumours have been reported with isolated cases of life-threatening haemorrhage. Women with hypertriglyceridaemia, or a family history thereof, may be at an increased risk of pancreatitis. The following conditions may occasionally occur or deteriorate with combined oral contraceptive use: hypertension; jaundice and/ or pruritus related to cholestasis; gallstones; porphyria; systemic lupus erythematosus; haemolytic uraemic syndrome; Sydenham’s chorea; herpes gestationis; otosclerosis; increased hearing loss; hereditary angioedema; disturbances of liver function; endogenous depression; epilepsy; Crohn’s disease and of ulcerative colitis; chloasma. 

**Precautions:** A medical history should be taken and physical examination including blood pressure measurement performed prior to treatment. Pregnancy must be ruled out. It is recommended to check serum potassium in patients with renal insufficiency and serum potassium in the upper reference range, particularly during concomitant use of potassium-sparing drugs. Diabetic women should be carefully observed, particularly during initial treatment. Patients with hereditary problems of galactose intolerance, the Lapp lactase deficiency or glucose-galactose malabsorption should take the amount of lactose in the drug into consideration. Incorrect administration, gastrointestinal upset or interaction with specific drugs will necessitate additional non-hormonal contraceptive measures. Irregular bleeding or lack of withdrawal bleeding should be investigated to exclude malignancy or pregnancy.

**Interactions:** Drugs that induce hepatic enzymes (e.g. phenytoin, barbiturates, primidone, carbamazepine, rifampicin, bosentan and HIV-medication (e.g. ritavirine, nevirapine) and possibly also exenatide, topiramate, felbamate, griseofulvin and products containing the herbal remedy St. John’s Wort [Hypericum perforatum]); antibiotics, such as penicillins and tetracyclines; colchicine; lamotrigine; alostanol antagonists or potassium-sparing diuretics; 

**Undesirable effects:** Very common: nausea, vaginal discharge, dysmenorrhoea, amenorrhoea. Common: depressed mood, nervousness, irritability, dizziness, migraine, visual disturbance, increase in blood pressure, vomiting, acne, sensation of heaviness, lower abdominal pain, fatigue, pruritus, increased weight. Uncommon: hypertension, changes in blood lipids including hypertriglyceridaemia, decreased HDL, abdominal pain or distension, diarrhoea, pigmentation disorder, chloasma, alopecia, dry skin, back pain, muscle disorders, gallstones, fibroadenomas of the breast, vaginal candidiasis. Rare: increased appetite, conjunctivitis, contact lens intolerance, sudden hearing loss, tinnitus, hypertension, hypotension, cardiovascular collapse, varicose veins, venous thrombosis, urticaria, eczema, erythema, pruritus, aggravated psoriasis, hypertrichosis, breast enlargement, vulvovaginitis, menorrhagia, premenstrual syndrome. Very rare: erythema nodosum. For the full list of reported side-effects see the SmPC. Refer to the Summary of Product Characteristics (SmPC) before prescribing.

**Depositato presso AIFA in data 30/07/2012.**
AFFARI 0

08:30/09:30 SCIENTIFIC SOCIETY SYMPOSIUM

PREVENTION-TREATMENT IN WOMEN DURING PERIMENOPAUSE AND EARLY MENOPAUSE
Chairmanship: Palacios Santiago (ES), De Melo Nilson R. (BR)
Siseles Nestor (AR) Contraception in the perimenopause
Pizzi Rita (VE) Prevention and treatment of vulvovaginal atrophy

09:45/11:15 PLENARY SESSION

BRAIN, MOOD, COGNITION AND PELVIC PAIN: THE HORMONAL IMPACT
Chairmanship: Berga Sarah (US), Kiesel Ludwig (DE)
Hirschberg Angelica (SE) Effects of testosterone and estrogen treatment on the serotonin system in the brain of postmenopausal women
Rocca Walter (US) Oophorectomy, estrogen, and cognitive aging: a 2014 update
Maki Pauline (US) Effects of Stellate Ganglion Block on Vasomotor Symptoms: Findings from a Randomized, Controlled Clinical Trial in Postmenopausal Women
Graziottin Alessandra (IT) Pain in gynecology and neuroinflammation: the evil twin

11:15/11:45 BREAK

11:45/13:15 PLENARY SESSION

HYPERTENSIVE DISORDERS IN PREGNANCY: FROM THE BENCH TO THE BEDSIDE
Chairmanship: Petraglia Felice (IT), Maruo Takeshi (JP)
Chedraui Peter (EC) The utility of biochemical markers in the prediction of preeclampsia
Valensise Herbert (IT) Long term effects of preeclampsia on maternal health
Lyall Fiona (GB) Placental stress and hypertensive disorders of pregnancy
Kimura Tadashi (JP) Oxytocin-oxytocin receptor regulation during pregnancy

13:15/15:45 POSTER SESSION WITH LUNCH

15:45/16:15 PLENARY LECTURE
Chairmanship: Gompel Anne (FR), Benedetto Chiara (IT)
Foidart Jean-Michel (BE) Breast stem cells and breast cancer stem cells

16:30/18:00 PLENARY SESSION

OVARIAN CANCER: THE ULTIMATE CHALLENGE
Chairmanship: Pecorelli Sergio (IT), Tilly Jonathan L. (US)
Cibula David (CZ) New paradigm in surgical treatment of ovarian cancer
Morice Philippe (FR) Fertility and borderline ovarian tumor: conservative management, risk of recurrence and alternative options
Gadducci Angiolo (IT) Fertility after conservative treatment of malignant germ cell tumors of the ovary
Konishi Ikuo (JP) Ovarian Cancer in Endometriosis: Clinical and Molecular Aspects
AFFARI 1

08:30/09:30 SCIENTIFIC SOCIETY SYMPOSIUM

ESTROGENS: COAGULATION AND BEYOND
Chairmanship: Serfaty David (FR)
Gaspard Ulysse (BE) Potential mechanism for increased risk of Venous Thromboembolism with use of Combined Oral Contraceptives
Simoncini Tommaso (IT) Interference with coagulation and fibrinolysis at the endothelial level: actions of estrogens and progestogens
Foidart Jean Michel (BE) E4 effects on coagulation and fibrinolysis markers: usefulness in contraception and menopause treatment

09:45/11:15 PLENARY SESSION

STEM CELLS IN OVARY, ENDOMETRIUM AND BONE
Chairmanship: De Villiers Tobias (ZA), Taylor Robert (US)
Tilly Jonathan L. (US) Oocyte-producing stem cells in adult human ovaries: biology and clinical implications
Simon Carlos (ES) Endometrial Reconstruction from Stem Cells
Al-Azzawi Farook (GB) Sexual dimorphism of stem cell behavior: the gonads and the brain

11:15/11:45 BREAK

11:45/13:15 PLENARY SESSION

NEUROENDOCRINE REGULATION OF THE GONADAL AXIS
Chairmanship: Naftolin Frederick (US), Devoto Luigi (CL)
Meczekalski Blazej (PL) Functional hypothalamic amenorrhea: current view on neuroendocrine aberrations
Castelo-Branco Camil (ES) Sensineural changes in congenital hypogonadism
Berga Sarah (US) Stress, Rank, and Obesity: Understanding the Reproductive Consequences of Obesity
Lunenfeld Bruno (IL) 100 years from the discovery of the hypothalamic- pituitary gonadal axis - what did we learn?

13:15/15:45 POSTER SESSION WITH LUNCH

15:45/16:15 PLENARY LECTURE
Chairmanship: Morice Philippe (FR), Kenemans Peter (NL)
Pecorelli Sergio (IT) Innovative drugs: new perspectives and health system sustainability

16:30/18:00 PLENARY SESSION

MEDICALLY-ASSISTED PROCREATION: THE CLINICAL IMPACT
Chairmanship: Simon Carlos (ES), Fauser Bart (NL)
Barri Pedro N. (ES) Use of androgens in ART: fiction or reality
Artini Paolo G. (IT) Change of gene expression profiles of cumulus cells obtained during different IVF protocol of stimulation
Tarlatzis Basil (GR) The role of pre-ovulatory progesterone rise in hyper- and hypo-responders
Hurvitz Ariel (IL) Understanding In-Vivo Oocyte Maturation-Improving In Vitro Maturation (IVM)
AFFARI 2

08:30/09:30  SCIENTIFIC SOCIETY SYMPOSIUM  (ORGANIZED BY AIGE - ASSOCIAZIONE ITALIANA DI GINECOLOGIA ENDOCRINOLOGICA)

ADRENAL ANDROGENS
Chairmanship: Genazzani Alessandro (IT), Lanzone Antonio (IT)
Bruni Vincenzina (IT) Adrenarche and Puberal maturation
Pluchino Nicola (IT) Adrenal androgens supplementation in menopause
Artini Paolo G. (IT) DHEA and Fertility

09:45/11:15  PLENARY SESSION

MOLECULES AND RECEPTORS FOR BONE HEALTH AND OSTEOPOROSIS PREVENTION
Chairmanship: Panay Nick (GB), Sultan Charles (FR)
Smetnik Vera (RU), Smetnik Antonina (RU) Hormonal and genetic status in amenorrheic and postmenopausal patients with low bone mineral density
De Viliers Tobias (ZA) The revival of estrogen as an agent in the prevention of osteoporotic fractures
Palacios Santiago (ES) Osteoporosis: Sequential Treatment
Pickar James (US) Bazedoxifene/CE Compared with Estrogen and Estrogen/Progestin for Osteoporosis Prevention

11:15/11:45  BREAK

11:45/13:15  PLENARY SESSION

ABNORMAL UTERINE BLEEDING
Chairmanship: Sciarra John (US), Konishi Ikuo (JP)
Marie-Scemama Lidya (FR) Heavy menstrual bleeding: the gynecologists, their patients... their fears
Scarselli Gianfranco (IT) Abnormal Uterine Bleeding: the diagnosis
Nappi Carmine (IT) Dysfunctional uterine bleeding: the treatments

13:15/15:45  POSTER SESSION WITH LUNCH  SEE PAGE 78

15:45/16:15  PLENARY LECTURE  (SPONSORED BY HRA ITALIA)
Chairmanship: Palumbo Giuseppe (IT), Volpe Annibale (IT)
Cagnacci Angelo (IT) Lo standard della contraccezione d’emergenza

16:30/18:00  SPONSORED SYMPOSIUM  (SPONSORED BY BIONORICA)

EVIDENCE - BASED PHYTOTHERAPY IN GYNECOLOGY
Chairmanship: Birkhaeuser Martin (CH), Seidlova-Wuttke Dana (DE)
Wuttke Wolfgang (DE) Plant derived alternatives for the treatment of climacteric complaints
Birkhaeuser Martin (CH) Cimicifuga racemosa – a valid alternative to Menopausal Hormone Therapy
Efimenko Olga (UA) Latent hyperprolactinemia and reproductive health
VERDE

08:30/09:30 SCIENTIFIC SOCIETY SYMPOSIUM
(ORGANIZED BY SIGITE - SOCIETÀ ITALIANA DI GINECOLOGIA DELLA TERZA ETÀ)

MENOPAUSE: THE METABOLIC MYSTERY
Chairmanship: Lello Stefano (IT), Nocera Francesca (IT)
Nocera Francesca (IT) The significance of the Metabolic Mystery
Guaschino Secondo (IT) Menopause and the Vaginal Microbiome
Becorpi Angelamaria (IT) The natural approach to Dyslipidemia
Maffei Silvia (IT) The Metabolic Syndrome nowadays

09:45/11:15 ORAL PRESENTATION
(OP4) HOT TOPICS IN ENDOMETRIORIS
Chairmanship: Luisi Stefano (IT), Pluchino Nicola (IT)

Konrad Lutz (DE) Endometriosis – Settings of the Stromal Stage
Oge Tufan (TR) Vaginal Tru-Cut Biopsy Like Da Vinci’s Giant Crossbow for the Management of Adnexal Masses
Szubert Maria (PL) Endometrium as a first step in developing endometriosis – did we get to the truth?
Marrocchella Sonia (IT) Pro-inflammatory M1/Th1 type immune network and increased expression of TSG-6 in the eutopic endometrium from women with endometriosis
Giannini Andrea (IT) Brain-derived neurotrophic factor in plasma of women with endometriosis
Arellano Estrada Claudia (DE) The crucial role of semaphorins in the pelvic pain genesis of women with endometriosis
Barcena de Arellano Maria Luisa (DE) Peritoneal fluid of women with endometriosis modulates the cannabinoid receptor 1 expression in neural tissue
Young Vicky (GB) TGFβ1 regulates IDs together with VEGF in the peritoneal environment of endometriosis
Greaves Erin (GB) A role for oestrogen-receptor dependent cross-talk in the interplay between macrophages and nerves in endometriosis.
Simitsidellis Ioannis (GB) A Role for Androgens in the Regulation of Endometriosis?

11:15/11:45 BREAK

11:45/13:15 PLENARY SESSION
NEW POSSIBILITIES FOR MENOPAUSE
Chairmanship: Archer David (US), Guaschino Secondo (IT)

Zullo Fulvio (IT) A new algorithm to predict ovarian age combining clinical, biochemical and 3D-ultrasonographic parameters. Preliminary results
Goldstein Steven (US) Safety of Oral Ospemifene in Phase 2/3 Placebo-controlled Clinical Trials
Constantine Ginger (US) Efficacy of Oral Ospemifene 60mg: Comparison in Subpopulations
Pickar James (US) TSEC-How We Got There
13:15/15:45 POSTER SESSION WITH LUNCH

15:45/16:15 PLENARY LECTURE
Chairmanship: Constantine Ginger (US), Zullo Fulvio (IT)

Nappi Rossella (IT) Vulvo-vaginal atrophy: impact on sex and relationship

09:45/11:15 ORAL PRESENTATION

(OP2) MENOPAUSE
Chairmanship: Becorpi Angelamaria (IT), Marie-Scemama Lydia (FR)

Palacios Santiago (ES) A Pooled Analysis of the Effects of Conjugated Estrogens/Bazedoxifene (CE/BZA) on Bone Loss from the Selective Estrogens, Menopause, And Response to Therapy (SMART) Trials

Taavoni Simin (IR) Usual sleep habit in menopausal women and uncomfortable breathing, coughing and snoring: effect of lemon balm, and starch, a randomized placebo- controlled clinical trial

Komm Barry (US) TSECs: A Novel Mechanism of Action for the Treatment of Menopausal Symptoms

Komm Barry (US) Effects of Conjugated Estrogens/Bazedoxifene on Bone and Quality of Life in a European Subpopulation of Postmenopausal Women: A Pooled Analysis of Randomized Controlled Trials

Pinkerton JoAnn (US) Pooled Analysis of the Effects of Conjugated Estrogens/Bazedoxifene on Vasomotor Symptoms (VMS) in the Selective Estrogens, Menopause, And Response to Therapy (SMART) Trials

Bertin Jonathan (CA) Androgen and estrogen formation from dehydroepiandrosterone in the monkey vagina: possible implications for the treatment of postmenopausal vulvovaginal atrophy (VVA) and sexual dysfunction

Stute Petra (CH) Vaginal and systemic cytokines in postmenopausal women with and without symptoms of vulvovaginal irritation

Chedraui Peter (EC) Angiogenesis, inflammation and endothelial function in postmenopausal women screened for the metabolic syndrome

Al-Saqi Shahla (SE) Effect of locally applied vaginal oxytocin on postmenopausal vaginal atrophy

Armeni Eleni (GR) Thyroid function within the reference range is associated with arterial stiffness in healthy postmenopausal women
Actavis: An Emerging Global Leader in Women’s Health

- Generic, branded generic, Over-the-Counter (OTC), brand and biosimilar products
- Commercial footprint of 62+ countries
- Industry leading global supply chain and customer service
- 19,000 employees committed to quality, service and value in pharmaceuticals

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16th World Congress of Gynecological Endocrinology - Firenze, 5-8 March 2014

ONICE

11:15/11:45 BREAK

11:45/13:15 ORAL PRESENTATION

(OP1) GYNECOLOGIC ONCOLOGY
Chairmanship: Del Pup Lino (IT), Biglia Nicoletta (IT)

Bernaudo Stefanie (CA) Regulation of cyclin G2 degradation in ovarian cancer cells
Di Luigi Gianluca (IT) Can ovarian stimulation increase the risk for invasive ovarian cancers?
Pequeux Christel (BE) Estradiol promotes the growth of Estrogen Receptor (ER)-negative tumors through host ERα driven angiogenesis
Vijaya Kumar Archana (DE) Breast cancer cell invasiveness regulated by HS3ST2: A molecular mechanism mediated by protease expression via MAP kinase and WNT pathways.
Goncharenko Vadym (UA) Endometrial hyperplasia in women of fertile age: personalized diagnosis and therapeutic strategy
Hevir Kene Neli (SI) Aberrant expression of the classical and G-protein-coupled estrogen receptors in endometrial cancer
Hevir-Kene Neli (SI) Marginal importance of aromatase in local estrogen formation in endometrial cancer – new evidence
Rhim Chae Chun (KR) Evaluation of HPV DNA Typing in Sentinel Lymph Node and Primary Lesion of Cervix in Patients with Cervical Cancer
Phelan Catherine (US) Whole exome sequencing in a founder population identifies novel ovarian cancer susceptibility loci

13:15/15:45 POSTER SESSION WITH LUNCH

SEE PAGE 78

16:30/18:00 ORAL PRESENTATION

(OP7) PCOS AND FERTILITY
Chairmanship: Bruni Vincenzina (IT), Vartej Ioana (GR)

Laganà Antonio Simone (IT) Preliminary data on ovarian function and metabolic factors in women affected by polycystic ovary syndrome after treatment with D-Chiro-Inositol
Kamenov Zdravko (BG) Antisperm antibodies and infertility in PCOS patients
Coviello Andrea (US) Black Women with PCOS are Disproportionately affected by Reproductive Dysfunction compared to other Race-ethnic Groups
Mancini Antonio (IT) Oxidative stress in normal weight women with polycystic ovary syndrome: evaluation of coenzyme Q10 and malondialdehyde.
Gullo Giuseppe (IT) Myo-inositol and FSH: from the induction of ovulation to the management of menopausal disorders.
Santagni Susanna (IT) Modulatory role of D-chiro-inositol (DCI) on LH and insulin secretion in obese PCOS patients with or without familiar diabetes
Pérez Funez Yohana Carolina (VE) Antimullerian hormones levels in patients with polycystic ovarian syndrome
Sallam Nooman (EG) Effect of obesity on assisted reproduction – a meta-analysis of controlled trials
Salinas Soledad Abril (CL) Rosiglitazone effect on the insulin signaling in granulosa cells of patients with PCOS
14th World Congress of Gynecological Endocrinology - Firenze, 5-8 March 2014

ADVANCING GLOBAL HEALTH FOR WOMEN AT MIDLIFE

May 1–4, 2014 Cancun, Mexico
Cancun Center Conventions & Exhibitions

Pieter van Keep Lecture

de Villiers Tobie (ZA) Estrogen and osteoporosis: have we completed a full circle?

Plenary Lectures

Tilly Jonathan L. (US) Adult stem cell biology: a tale of menopause and ovaries
Lobo Rogerio A. (US) The menopause, what the future holds
Fraser Ian S. (AU) Inflammation and endometrial bleeding
Shulman Gerald I. (US) Mechanisms and consequences of insulin resistance
McEwen Bruce (US) Novel mechanisms for estrogen effects on the brain
Henderson Victor (US) Alzheimer’s disease: strategies for prevention
Scarabin Pierre-Yves (FR) Hormones and thrombosis
Cardozo Linda (UK) Managing urinary incontinence: what works?
Lindsay Robert (US) Can we rebuild the skeleton?
Yip Cheng-Har (MY) Breast health in developing countries
McDonnell Donald (US) Biology of breast cancer

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## FRIDAY, MARCH 7TH

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<td>Healthy aging in women, from lifestyle to medical intervention (organized by EMAS)</td>
<td>Situation of obesity and the metabolic syndrome in Latin American women (organized by ALEG)</td>
<td>Emergency conditions in reproductive medicine (organized by IAHR)</td>
<td>La classificazione delle disfunzioni sessuali femminili nel DSM V (organized by FISS)</td>
<td>Session of the Polish Society of Gynecological Endocrinology</td>
<td>Controversial Topics in Gynecological Endocrinology (organized by SOBRAGE)</td>
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<td>09.45-11.15</td>
<td>Plenary Session</td>
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<td>Sponsored Symp.</td>
<td>Teaching Course</td>
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<td>Intracrinology, progesterone and allopregnanolone</td>
<td>Ovarian function and ageing</td>
<td>Mio-inositol: from the evidence-based medicine to the international consensus conference (sponsored by L.O. L.I Pharma)</td>
<td>Counseling in contraccezione. Significato e gestione sanguinamenti e delle mestruazioni, una occasione da non perdere per evitare abbandon ed... excessive telefonate (organized by AIGE)</td>
<td>Hormones and breast cancer</td>
<td>Infertility</td>
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<td>11.15-11.45</td>
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<td>11.45-13.15</td>
<td>Scientific Soc.</td>
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<td>Progestogens from adolescence to menopause (organized by European Progestogen Club - Sponsored by Abbott)</td>
<td>Old and new strategies for contraceptive care</td>
<td>Placental development: pathophysiology and clinical impact</td>
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<td>Catamenial headache, premenstrual syndrome, and post traumatic disorders: the dark side of the moon</td>
<td>Female hormones: from physiology to treatment</td>
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<td>13.15-15.15</td>
<td>Lunch Session</td>
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<td>ISGE special symposium: Latest outcomes in oral emergency contraception (sponsored by HRA Pharma)</td>
<td>Endocrine disorders and female infertility (sponsored by IBSA)</td>
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<td>What we learned from the recent referral procedure concerning combined hormonal contraceptives - conclusions for cma/ee (sponsored by Gedeon Richter)</td>
<td>The optimal time to stop hormone therapy</td>
<td>Ovarian stimulation of patients in risk of OHSS</td>
<td>Il ruolo della vitamina K2 nel metabolismo osseo (sponsored by AG Pharma)</td>
<td>Women’s health and women’s rights</td>
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<td>16.30-18.00</td>
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<td>New challenges in breast cancer management</td>
<td>Menopause, ageing and cardiovascular risks</td>
<td>Understanding and treating fetal growth restriction</td>
<td>Vitamin D: a new hormone in reproductive medicine</td>
<td>Fertility preservation and endometriosis surgery</td>
<td>PCOS</td>
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HALL AUDITORIUM

What we learned from the recent EU referral procedure concerning combined hormonal contraceptives - conclusions for CMA/EE

Winkler Ulrich (US)

The 1995 pill scare over the allegedly lower risk of venous thromboembolism (VTE) in users of levonorgestrel-ethynilestradiol (LNG/EE) containing -combined oral contraceptives (COC’s) ended in a hefty debate of the quality of observational research and the appropriateness of early ‘warnings’ by the authorities.

The EU-wide review included all of the known progestin – estrogen combinations and concluded as the benefits of COCs in preventing unwanted pregnancies continue to outweigh their risks, and that the well-known risk of VTE with all CHCs is small. Moreover, there is no reason for any woman to stop using her current contraceptive. Even today, there is no consensus as prospective studies consistently find no differential risk among COCs.

In its recent referral procedure, the European Medicines Commission Agency (EMA) choose to disqualify prospective studies (postmarketing, active surveillance) as ‘not trustworthy’ (‘sponsored by the industry’) and non-contraceptive benefits and their impact on compliance as ‘unproven’.

LNG-EE combination is regarded as a reference product for all comparisons and EMA’s is now requesting proof from each of the Marketing Authority Holders (MAH) that users of their products carry no higher risk of VTE than users of LNG-COCs. This remarkable change of its policy has done considerable damage to small companies and is likely to reduce the variety of different COC preparations significantly. Particularly CMA/EE-containing -COCs have never been suspected to carry higher risks of VTE than LNG-COCs according to the results coming from the long and documented clinical experience. Body of evidences for CMA/EE has included as high exposure as it was evaluated by large-scale post-authorization safety studies, eg. EURAS.. Their safety and Aanti-androgenic benefits of CMA/EE and its consequent positive contribution to the high satisfaction among women have been proven in the past are appreciated in the market for several decades clearly indicating the need for CMA/EE in our COC portfolio more than 30 years now. The collateral damage done to CMA containing COCs is not justified.

HALL AFFARI 0

Hormone Therapy Indefinite Use in the Postmenopausal Woman

Archer David (US)

The risk benefit ratio for women during long term use of hormone therapy (HT) is not known, but ageing increases chronic diseases. The most prominent effect of estrogen therapy is on the relief of hot flushes. Estradiol (E2) inhibits the progression of carotid intimal media thickness. Vaginal symptoms can be reversed by continued estrogen use along with prevention of bone loss. Endometrial cancer was reduced with HT. An increase in probable senile dementia was found in Women’s Health Initiative Memory Study (WHIMS). The prevention of myocardial infarction or other cardiac events by long term HT has not been proven. The incidence of breast cancer is controversial due to the differences between the EPT and ET arms. Thrombotic stroke was increased in all ages. Chronic disease and their interaction with long term HT is unknown. The Physician must weigh the risks and benefits and with counseling select the best option for their patient.

Dr. Archer is Professor of Obstetrics and Gynecology and Director of the Clinical Research Center located in the Jones Institute for Reproductive Medicine at Eastern Virginia Medical School in Norfolk, Virginia, U.S.A. Dr. Archer has several book chapters and numerous papers in peer review journals. Dr. Archer has been a featured speaker at both national and international meetings. He has received the Eastern Virginia Medical School Deans Award for Outstanding Research in 2007 and the Association of Reproductive Health Professionals, Alan F. Guttmacher Award in 2011. Dr. Archer is a Board Member of the International Menopause Society and Co-Chair of the Scientific Program for 14th World Congress in May 2014 in Cancun, Mexico.
HALL AFFARI 1

◆ Ovarian stimulation of patients in risk of OHSS
Schenker Joseph (IL)

President of International Academy of Human Reproduction. Professor of Obstetrics and Gynecology at The Hebrew University of Jerusalem. Chairman of the Department of Obstetrics and Gynecology (Emeritus), Hadassah-University Hospital, Jerusalem. His research has involved experimental and clinical studies in the endocrinology of human reproduction, development of methods for contraception, and development of technologies in practice of assisted reproduction. He is interested in the ethical aspects of reproduction and gynecological and obstetric practice, and has chaired the Ethical Committee of IFFS and the FIGO Committee for the Study of Ethical Aspects on Human Reproduction. He has produced publications in medical journals and several books in the field of obstetrics & gynecology and reproduction.

HALL AFFARI 2

◆ Il ruolo della vitamina K2 nel metabolismo osseo (Sponsored by AG Pharma)
Lello Stefano (IT)

HALL VERDE

◆ Women’s Health and Women’s Rights
Kenemans Peter (NL)

Human rights are essential preconditions for health. Globally, Women’s Health is promoted fundamentally and substantially by the protection of Women’s Rights, especially when working in an environment with differing religious and social values.

The concept of Women’s Health refers not only to the classical health issues of female reproductive organs, or to specific female reproductive health issues (such as birth control, abortion, pregnancy, childbirth and lactation, fertility issues and postmenopausal health), it includes also female sexual functioning and gender specific aspects of sexual transmitted diseases, eating disorders, violence, sexual abuse and genital mutilation, as well as gender specific manifestations of common diseases like osteoporosis, diabetes, heart disease and stroke.


The United Nations’ 4th World Conference on Women (Beijing, 1995) stated that human rights include, also for women, the right to full access to health care services, health care information and education, in addition to the right to body integrity and self determination in health issues, including birth control and family planning. Human rights are thoroughly defined by a large variety of international treaties (that are legally binding upon parties), and by declarations and resolutions (that carry only moral force). This provides a firm basis for action. As one of the human rights is the right to the highest attainable standard of physical and mental health, women’s health care issues can well be addressed globally within a gender sensitive human rights framework. Not the healthcare providers, the doctors, but the healthcare client, the woman, should be central in this approach. Worldwide, women must be empowered, via modern communication techniques, to claim and execute their rights, and formulate their needs.

Peter Kenemans (1942) was Professor of Obstetrics and Gynecology at the VU University Medical Center, Amsterdam, The Netherlands, from 1987 until his retirement in 2007. Between 1989 and 2003 he was Chairman of this department and head of numerous training and research programs. He was Editor-in-Chief of various Journals. His legacy includes 302 scientific publications in peer-reviewed journals and 30 PhD students, 7 of whom now hold academic chairs themselves. Currently, he is Chairman of the African Woman Foundation, that aims to reduce maternal and child mortality in Africa by empowering African women to use modern ICT-based women’s healthcare services.
HALL AFFARI 1 16:30/18:00

Plenary session – Understanding and treating fetal growth restriction

**Placental volume and vascularization flow indices by 3D Power Doppler during the first trimester: predictive value for placental vascular disease in low risk population. A prospective and multicentric cohort study**

1, 2E. Perdriolle-Galet (FR), 3, 4, 5 V. Tsatsaris (FR), 5, 6 P. P. Chavatte-Palmer (FR), 3, 5 G. Grangé (FR), 7 E. Azria (FR), 8 J. Nizard, 9 E. Vicaut (FR), 2 J. Felblinger (FR), 1, 2, 5 O. Morel (FR) (1 Maternité Université Régionale de Nancy – Université Nancy, 2 Unité INSERM U 947 – Nancy, 3 Maternité Port-Royal – Université Paris V, 4 Unité INSERM U 767 – Paris, 5 PREMUP foundation, 6 IRNA, 7 Maternité de l’Hôpital Bichat – Université Paris VII, 8 Maternité de l’Hôpital La Pitié-Salpêtrière – Université Paris VI, 9 Unité de Recherche Clinique de l’Hôpital Lariboisière – Paris)

**Objective:** The aim of our study was to confirm the hypothesis that placental hypoperfusion in women who secondary develop placental vascular diseases (PVD) occurs as soon as the first trimester.

**Materials and Methods:** Acquisition of utero-placental volume was performed prospectively in 67 low risk patients, between 11 and 14 weeks, using an abdominal probe and 3D power Doppler (3D PD) angiography with standardised parameters. Thanks to VOCAL software, we quantified separately, placental and myometrial vascularization. Values obtained from patients with PVD were compared with those with favourable outcome.

**Results:** PVD occurred in 6 cases (1 preeclampsia, 1 gestational hypertension associated to IUGR and 4 isolated IUGR). All 3D PD indices (VI, FI and VFI) in placenta significantly decreased in patients who developed PVD (p<0.01) {mean VI: 1,73 vs 6,9; VFI: 0,59 vs 2,81 and FI 33,41 vs 41,49} whereas in myometrium, only VI and VFI were reduced (p<0.05) {mean VI: 12,97 vs 20,97; VFI: 5,6 vs 10,27}. In contrast, placental volumes were not different.

**Conclusion:** In PVD, utero-placental vascularization is impaired very soon in pregnancy. This technique could be a way to detect patients at high risk of PVD in general population and to select patients needed preventive treatment and increased medical monitoring.

Perdriolle-Galet Estelle (FR)
Age: 33 years old
French Obstetrician in the University Maternity of Nancy (type 3 center), France
Speciality: Prenatal diagnosis, fetal ultrasonography
Research topics: Placental vascularization, Placental vascular diseases, Fetal diseases and malformations.
Laboratory Affiliation: Laboratoire IADI (Imagerie Adaptative Diagnostique et Interventionnelle) INSERM Unit U 947 – Nancy

THE UNDER 34 COMPETITION

The Scientific Contest held for the third time this year has allowed 100 excellent young scientist of under 34 years to be supported by the Society to join us in Florence, by providing free registration and accomodation. The first 4 ranked abstracts will be presented in Plenary Sessions of the congress.

Are you a young researcher? Take part to the Under 34 competition for the 17th ISGE World Congress, more info at www.isgesociety.com/isge2016
**C677T polymorphism of the methylenetetrahydrofolate reductase gene in postmenopausal women screened for the metabolic syndrome**

Salazar-Pousada D. (EC), Chedraui P. (EC), Escobar G. (EC), Espinoza-Caicedo J. (EC), Hidalgo L. (EC), Pérez-López F. (ES), Genazzani A. (IT), Simoncini T. (IT)

The metabolic syndrome (METS) is a cluster of lipid and non-lipid factors that increases cardiovascular risk. Prevalence increases after the menopause with 52.7% of postmenopausal women (median age 56 yrs) presenting the syndrome (according to modified ATP-III criteria). Single-nucleotide polymorphisms (SNPs) of the methylenetetrahydrofolate reductase (MTHFR) gene have been linked to cardiovascular risk. We recently tested the C677T SNP of the MTHFR gene in two hundred and three postmenopausal women screened for the METS. Overall the TT genotype (homozygous) prevailed in 12.8% (n=203) with no prevalence difference observed when METS women were compared to non METS ones. Same trend was observed when the prevalence of the C677T SNP genotypes were compared among women presenting or not each of the composing items of the METS except for those with high triglyceride levels who displayed a higher rate of the CT genotype (heterozygous). The present lecture will discuss genetic alterations of the MTHFR gene in relation to the METS and cardiovascular risk in postmenopausal women.

Danny Salazar Pousada (EX) MD, studied medicine at the Catholic University of Santiago of Guayaquil, Ecuador, obtained is medical degree in 2005. Completed in 2013 an OBGGYN residency programme at the Enrique C. Sotomayor Obstetrics and Gynecology Hospital. During his residency, he participated actively in several research efforts under the supervision of Prof. Peter Chedraui. In 2012, he participated actively in the 15th World Congress of Gynecological Endocrinology with various oral and poster presentations regarding preeclampsia and the menopause. Currently he is now staff attending at the labor unit at Sotomayor hospital and principal investigator for Women’s Health at the Institute of Biomedicine of Catholic University of Santiago of Guayaquil. He is eager in collaborating in investigations related to the genetic aspects in women’s health.

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Capri

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AND

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AUDITORIUM

08:30/09:30 SCIENTIFIC SOCIETY SYMPOSIUM (ORGANIZED BY EMAS - EUROPEAN MENOPAUSE AND ANDROPAUSE SOCIETY)

HEALTHY AGING IN WOMEN, FROM LIFESTYLE TO MEDICAL INTERVENTION
Chairmanship: Rees Margaret (GB), Simoncini Tommaso (IT)
Cano Antonio (ES) New strategies to implement healthy lifestyle in aging women
Perez-Lopez Faustino (ES) Diet to promote healthy aging
Chedraui Peter (EC) Ethnic and environmental differences in aging: how should we translate dietary recommendations to Latin America?

09:45/11:15 PLENARY SESSION

INTRACRINOLOGY, PROGESTERONE AND ALLOPREGNANOLONE
Chairmanship: Soederqvist Gunnar (SE), Pasqualini Jorge (FR)
Labrie Fernand (CA) Intracrinology, the exclusive source of sex steroids after menopause
Genazzani Andrea R. (IT) Sex steroids impact on brain allopregnanolone
Brinton Diaz Roberta (US) Allopregnanolone as a Regenerative Therapeutic for Alzheimer's Disease

11:15/11:45 BREAK

11:45/13:15 SCIENTIFIC SOCIETY SYMPOSIUM (ORGANIZED BY THE EUROPEAN PROGESTOGEN CLUB - SPONSORED BY ABBOTT)

PROGESTOGENS FROM ADOLESCENCE TO MENOPAUSE
Chairmanship: Schindler Adolf (DE), Druckmann René (FR)
Soederqvist Gunnar (SE) Progestogen, progesterone and the normal breast: Proliferative, anti-proliferative or indifferent effects and concomitant gene expressions
Pasqualini Jorge (FR) Biological effects of duphaston (dydrogesterone) and of progesterone metabolites in normal and cancerous human breast
Zainul Rashid (MY) Dydrogesterone for prevention of pregnancy hypertension
Gompel Anne (FR) Progestogens, progesterone and endometrial cancers

15:15/15:45 BREAK

15:45/16:15 PLENARY LECTURE (SPONSORED BY GEDEON RICHTER)
Chairmanship: Bitzer Johannes (CH), Sitruk-Ware Regine (US)
Winkler Ulrich (DE) What we learned from the recent EU referral procedure concerning combined hormonal contraceptives – conclusions for CMA/EE

16:30/18:00 PLENARY SESSION

NEW CHALLENGES IN BREAST CANCER MANAGEMENT
Chairmanship: Cibula David (CZ), Simpson Evan (AU)
Biglia Nicoletta (IT) Fertility preservation and pregnancy after breast cancer. When and how?
von Schoultz Bo (SE) Can we minimize the risks of HRT after Breast cancer?
Gompel Anne (FR) Glucocorticoid receptor and breast cancer
Sismondi Piero (IT) Androgen receptor and breast cancer
AFFARI 0

08:30/09:30  SCIENTIFIC SOCIETY SYMPOSIUM  
(OSGANIZED BY ALEG - ASOCIACIÓN LATINOAMERICANA DE ENDOCRINOLOGÍA GINECOLÓGICA)

SITUATION OF OBESITY AND THE METABOLIC SYNDROME IN LATIN AMERICAN WOMEN

Chairmanship: Chedraui Peter (EC), Corrales Fanny (PY)

Lima Selva (UY)  Obesity and the metabolic syndrome during adolescence
Montano Rene (CL)  Vitamin D and female cardiovascular risk
Witis Silvina (AR)  The metabolic syndrome and obesity during the menopause
Andrino Rodolfo (GT)  Management and impact of obesity and the metabolic syndrome during female reproductive years

09:45/11:15  PLENARY SESSION

OVARIAN FUNCTION AND AGEING

Chairmanship: Tarlatzis Basil (GR), Ng Ernest Hung Yu (CN)

Devoto Luigi (CL)  Neuroendocrinology of ovarian aging
Fauser Bart C. (NL)  AMH: implications of ovarian reserve assessment
Benedetto Chiara (IT)  Ovarian tissue cryo-storage and transplantation for patients at high risk of ovarian failure
Donnez Jacques (BE)  Ovarian freezing: the anti ageing therapy of the future?

11:15/11:45  BREAK

11:45/13:15  PLENARY SESSION

OLD AND NEW STRATEGIES FOR CONTRACEPTIVE CARE

Chairmanship: Vujovic Svetlana (RS), Ruan Xiangyan (CN)

Kluft Cornelis (NL)  Haemostasis and estrogens containing oral contraceptives
Volpe Annibale (IT)  More benefits with new strategies in hormonal contraception
De Melo Nilson R. (BR)  Hormonal contraception and cancer
Gaspard Ulysse (BE)  Which progestins may qualify as fourth generation progestins?

13:15/15:15  LUNCH SYMPOSIUM  
(SPONSORED BY HRA PHARMA)

ISGE SPECIAL SYMPOSIUM: LATEST OUTCOMES IN ORAL EMERGENCY CONTRACEPTION

Chairmanship: Genazzani Andrea R. (IT), De Melo Nilson R. (BR)

Gemzell-Danielsson Kristine (SE)  Mechanism of action of oral emergency contraception
Bouchard Philippe (FR)  Pharmacology of Ulipristal Acetate in emergency contraception
Glasier Anna (GB)  Rationale for use of Ulipristal Acetate first line in emergency contraception: Biological evidence, clinical evidence
Kapp Nathalie (FR)  Effect of increasing weight on efficacy of oral emergency contraception

15:15/15:45  BREAK

15:45/16:15  PLENARY LECTURE

Chairmanship: Foidart Jean Michel (BE), Maki Pauline M. (US)

Archer David (US)  The optimal time to stop hormone therapy
16:30/18:00 PLENARY SESSION

MENOPAUSE, AGEING AND CARDIOVASCULAR RISKS
Chairmanship: Stevenson John (GB), Cano Antonio (ES)
Simoncini Tommaso (IT) Endothelial dysfunction and prenatal programming of cardiovascular risk
Salazar-Pousada Danny (EC) C677T polymorphism of the methylenetetrahydrofolate reductase gene in postmenopausal women screened for the metabolic syndrome
Siseles Nestor (AR) Cardiovascular health in menopausal woman: when to begin the hormone treatment?

AFFARI 1

08:30/09:30 SCIENTIFIC SOCIETY SYMPOSIUM (ORGANIZED BY IAHR - THE INTERNATIONAL ACADEMY OF HUMAN REPRODUCTION)

EMERGENCY CONDITIONS IN REPRODUCTIVE MEDICINE
Chairmanship: Naftolin Frederick (US), Creatsas George (GR)
Sciarrà John J. (US) Management of heavy menstrual bleeding
Schenker Joseph (IL) Severe OHSS – management and prevention

09:45/11:15 SPONSORED SYMPOSIUM (SPONSORED BY LO.LI PHARMA)

MYO-INOSITOL: FROM THE EVIDENCE-BASED MEDICINE TO THE INTERNATIONAL CONSENSUS CONFERENCE
Chairmanship: Benvenga Salvatore (IT), Nappi Rossella (IT)
Orbetzova Maria (BG) Cardiovascular risk in women with polycystic ovary syndrome (PCOS)
Dewailly Didier (FR) Preliminary study to evaluate the effects of myo-inositol (MYO) in PCOS patients under ovulation induction with or without Assisted Reproductive Techniques (ART)
Facchinetti Fabio (IT) The combined therapy myo-inositol plus D-Chiro-inositol, in a physiological ratio (40:1), in PCOS women
Bizzarri Mariano (IT) Myo and D-chiro-inositol: Time to make it crystal clear, results from the international consensus conference

11:15/11:45 BREAK

11:45/13:15 PLENARY SESSION

PLACENTAL DEVELOPMENT: PATOPHYSIOLOGY AND CLINICAL IMPACT
Chairmanship: Lyall Fiona (GB), Chedraui Peter (EC)
Maruo Takeshi (JP) Relaxin, Corticotropin-releasing hormone (CRH) and Stresscopin (SCP) in early placental extravillous trophoblast function
Reiter Russel (US) Placental Melatonin: Implications for Pregnancy and Gynecology
Taylor Robert (US) Decidual Dysfunction and Implantation Failure
Martinelli Pasquale (IT) Placenta accreta: a iatrogenic uterine disease

13:15/15:15 LUNCH SYMPOSIUM (SPONSORED BY INSTITUTE BIOCHIMIQUE SA -IBSA-)

ENDOCRINE DISORDERS AND FEMALE INFERTILITY
Chairmanship: Petraglia Felice (IT), Fauser Bart (NL)
Velkeniers Brigitte (BE) Thyroid function and assisted reproductive technology
Tarlatzis Basil (GR) Health and fertility in WHO group 2 anovulatory women
Benedetto Chiara (IT) Progesterone: in IVF and after... (luteal phase support, risk of miscarriage, preterm birth)

15:15/15:45 BREAK
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AFFARI 2

08:30/09:30 SCIENTIFIC SOCIETY SYMPOSIUM
LA CLASSIFICAZIONE DELLE DISFUNZIONI SESSUALI FEMMINILI NEL DSM V
Chairmanship: Boncinelli Vieri (IT), Giommi Roberta (IT)
Barbero Giuseppina (IT) Il desiderio sessuale femminile nella revisione del DSM V
Trotta Domenico (IT) Il disordine dell’orgasmo femminile
Bernorio Roberto (IT) La revisione dei disturbi da dolore coitale

09:45/13:15 ITALIAN TEACHING COURSE
COUNSELING IN CONTRACCEZIONE. SIGNIFICATO E GESTIONE DEI SANGUINAMENTI E DELLE MESTRUAZIONI, UNA OCCASIONE DA NON PERDERE PER EVITARE ABBANDONI ED... ECCESSIVE TELEFONATE
Chairmanship: Bruni Vincenzina (IT), Paoletti Anna Maria (IT)
Bruni Vincenzina (IT) L’adolescenza: tra crisi di identità, necessità di sicurezza e controllo del ciclo
Paoletti Anna Maria (IT) Mestruazioni e perdite intermestruali: le nuove esigenze personali ed i nuovi concetti di salute riproduttiva
Nappi Rossella (IT) Sessualità: un mondo da scoprire, un obiettivo da gestire
Benedetto Chiara (IT) La transizione menopausale: nuove possibilità e certezze per una donna che evolve

15:45/16:15 PLENARY LECTURE
Chairmanship: Brandi Maria Luisa (IT)
Lello Stefano (IT) Il ruolo della vitamina K2 nel metabolismo osseo

16:30/18:00 PLENARY SESSION
VITAMIN D: A NEW HORMONE IN REPRODUCTIVE MEDICINE
Chairmanship: Rees Margaret (GB), Smetnik Vera (RU)
Milewicz Andrzej (PL) Polycystic Ovary Syndrome and Serum Vitamin D concentration and its receptor gene polymorphisms
Perez-Lopez Faustino (ES) Vitamin D during pregnancy
Brincat Mark (MT) Vitamin D in the prevention of osteoporosis, alone or on combination
Halis Guelden (DE) Influence of vitamin D on ovarian stimulation
More women are increasingly seeking for menopause symptoms solutions.

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Visit us at Booth #2
08:30/09:30 SCIENTIFIC SOCIETY SYMPOSIUM

SESSION OF POLISH SOCIETY OF GYNECOLOGICAL ENDOCRINOLOGY

Chairmanship: Milewicz Andrzej (PL), Meczekalski Blazej (PL)
Meczekalski Blazej (PL) What gynecologist should know about anorectic patient?
Breborowic Grzegorz (PL) Poland: Oxytocin and reproduction
Radowicki Stanislaw (PL) Poland: Endometriosis and pregnancy
Katulski Krzysztof (PL) PCOS and infertility

09:45/11:15 PLENARY SESSION

HORMONES AND BREAST CANCER

Chairmanship: Von Schoultz Bo (SE), Zervoudis Stefanos (GR)
Mueck Alfred (DE) Biochemistry of estrogen metabolism – genotoxic or protective in the breast?
Brincat Mark (MT) Reducing Breast Cancer rates using Pharmacological Intervention at the time of the Menopause
Simpson Evan (AU) Obesity and breast cancer: a tale of inflammation and dysregulated metabolism
Del Pup Lino (IT) Breast effects of newer contraceptives

11:45/13:15 PLENARY SESSION

CATAMENIAL HEADACHE, PREMENSTRUAL SYNDROME, AND POST TRAUMATIC DISORDERS:
THE DARK SIDE OF THE MOON

Chairmanship: Rocca Walter (US), Hirschberg Angelica L. (SE)
Facchinetti Fabio (IT) The issue of menstrual migraine today
Studd John (GB) Suppression of ovulation in the treatment of severe premenstrual syndrome
Maki Pauline (US) Relationship between Menopausal Stage and PTSD Symptoms
Matsumoto Tamaki (JP) Psychophysiological effects of aromatherapy from the fragrance of the Japanese citrus fruit Yuzu (Citrus junos) and lavender (Lavandula angustifolia) to alleviate premenstrual mood states

15:15/15:45 BREAK

15:45/16:15 PLENARY LECTURE

Chairmanship: Schenker Joseph (IL), Studd John (GB)
Kenemans Peter (NL) Women’s Health and Women’s Rights

16:30/18:00 PLENARY SESSION

FERTILITY PRESERVATION AND ENDOMETRIOSIS SURGERY

Chairmanship: Adamyan Leila (RU), Bianchi Umberto (IT)
Vignali Michele (IT) Ovarian reserve after excision of endometrioma: long term follow up
Venturini Pierluigi (IT) Fertility preservation during surgery for endometriosis
Cela Vito (IT) Robotic treatment of deep endometriosis
Angioni Stefano (IT) Radical excisional surgery in deep endometriosis. Is it the best approach to improve quality of life?
Nappi Luigi (IT) Anti-mullerian hormone trend after diode laser laparoscopic surgery in women with ovarian endometrioma
CONTROVERSIAL TOPICS IN GYNECOLOGICAL ENDOCRINOLOGY
Chairmanship: Casoy Julio (BR)
Maia Jr. Hugo (BR) Is endometrial inflammation important for the development of endometriosis?
Casoy Julio (US) Has estrogen deprivation increased mortality from cardiovascular disease in menopausal women?
Magalhaes Jarbas (BR) Can endometrial bleeding and fibroid growth be controlled by Mirena?
Bonassi Rogerio (BR) Bleeding patterns and symptom control with low dose flexible regimens containing drospirenone

09:45/11:15 ORAL PRESENTATION
(OP8) INFERTILITY
Chairmanship: Artini Paolo G. (IT), Ben-Rafael Zion (IL)
Taylor Joelle (US) Prostaglandins produced by human endometrial stromal cells are not required for initiating decidualization
Aydin Yunus (TR) Is intrauterine insemination administration simultaneously with hCG in stimulated cycles have better clinical pregnancy rates? A prospective randomized study
Dragojević Dikić Svetlana (RS) Hormone Replacement Therapy (HRT) in optimising fertility in Premature Ovarian Insufficiency (POI) patients
Omes Claudia (IT) Follicular fluid putative mesenchymal stem cells (FF-MSC) release E2 and P in vitro
Segal Thalia (US) Does embryo biopsy affect the timing of implantation?
Grande Giuseppe (IT) High resolution mass spectrometry based proteomics to identify changes in cervical mucus composition during the menstrual cycle
Gibson Douglas (GB) Estradiol Promotes uNK-mediated Endometrial Angiogenesis via ERβ-dependent Secretion of CCL2
Zhou Min (CN) Increased CFTR expression and decreased ENaC-α expression in decidua of the first trimester miscarriage of human and abortion model of CBA×DBA/2 mice
Lozano-Sanchez Jose Manuel (MX) Integrin α5β3 expression is regulated by Müllerian inhibition substance during the endometrial window in infertile women.
Majdi Seghinsara Abbas (IR) Impact of estrogen and Fulvestrant on induction of ovarian surface epithelial stem cells to Primordial follicles

11:15/11:45 BREAK

11:45/13:15 ORAL PRESENTATION
(OP5) FEMALE HORMONES: FROM PHYSIOLOGY TO TREATMENT
Chairmanship: Colacurci Nicolla (IT), Stomati Massimo (IT)
Gérard Céline (BE) Impact of Estetrol, a new natural estrogen, on mammary gland
Zervoudis Stefanos (GR) Intrauterine contraceptive devices (IUD) insertion as contraceptive method by teenagers with a recent history of induced abortion in two different populations
de Rossi Patricia (BR) Evaluation of blood pressure (BP), body mass index (BMI), lipid profile and insulin resistance (IR) in mild hypertensive overweight women with the use of a low dose combined oral contraceptive containing drospirenone: Results from a prospective clinical trial
Mitkowska Agnieszka (PL) Relationships between sex hormones and parameters describing hemodynamics and arterial stiffness in the menstrual cycle
Gullo Giulia (IT) The Effects of Inositol in the female androgenetic alopecia: preliminary data
Drakopoulos Panagiotis (CH) The effect of growth hormone on endometrial thickness and fertility outcome, especially in the treatment of women with panhypopituitarism
Weiss Herman (IL) Return of Ovulatory Capacity Following a 91-Day Extended-Regimen Oral Contraceptive Containing 150 mcg Levonorgestrel (LNG)/30 mcg Ethinyl Estradiol (EE) Tablets and 10 mcg EE Tablets
Komura Hiroko (JP) Effect of estrogen therapy on bone mineral density in young patients with Turner syndrome
Chen Min (CN) Testosterone influences insulin sensitivity in liver cells and the related molecular mechanisms

15:15/15:45 BREAK

16:30/18:00 ORAL PRESENTATION

(OP6) PCOS
Chairmanship: Shoham Zeev (IL), Cagnacci Angelo (IT)
de Medeiros Sebastião (BR) Cardiovascular risk in polycystic ovary syndrome. Is glycated hemoglobin a useful marker?
Ujvari Dorina (SE) Lifestyle intervention up-regulates gene and protein levels of molecules involved in insulin signaling in the endometrium of obese women with polycystic ovary syndrome
Bouzas Isabel (BR) Polycystic ovarian syndrome (PCOS) in adolescence: clinical and laboratory parameters
Zavoi Andrei (RO) Maternal reproductive history in adolescent girls with polycystic ovary syndrome
Pukajlo Katarzyna (PL) Irisin plasma concentration in PCOS and healthy subjects is connected with NFLD – preliminary report
Marcondes Rodrigo (BR) Transcriptional expression of kisspeptin, neurokinin B, dynorphin (KNDy), sex steroids and their receptors in the hypothalamus of polycystic ovary syndrome rat models induced by estradiol or testosterone
Karountzos Vasileios (GR) The correlation between Dysfunctional Uterine Bleeding (DUB) and Polycystic Ovarian Syndrome (PCOS) in female adolescents, as well as the evaluation and management of it. The clinical experience of 8-year follow up
Armeni Eleni (GR) Subclinical atherosclerosis and arterial stiffness in asymptomatic non-diabetic postmenopausal women with a polycystic ovary syndrome phenotype
Krishna B Meera (IN) An integrative mRNA-transcription factor analysis reveals important PCOS hallmarks
# Saturday, March 8th

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<td>Progesterone, progestins and progesterone receptor interactions</td>
<td>Endocrine disorders and adolescence: the impact for fertile life</td>
<td>Reproductive reconstructive surgery</td>
<td>New perspectives on premature ovarian insufficiency</td>
<td>Endometriosis, sexual dysfunction and pelvic pain</td>
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<td>Selecting the right contraceptive strategy</td>
<td>Ultrasound in early pregnancy</td>
<td>Infertility: from genes to proteomic</td>
<td>Polycistic ovary: from inflammation to ageing</td>
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<td>Endometrium and menorrhagia</td>
<td>Female sexual dysfunction: endocrine and cultural aspects</td>
<td>Women’s health through ageing</td>
<td>Frontiers in gynecological endocrinology</td>
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The long-term effects of bilateral salpingo-oophorectomy on memory

Au April (CA), D. Schwartz (CA), M. Tierney (CA), E. Hampson (CA), S. Narod (CA), G. Einstein (CA) (University of Toronto, Sunnybrook Health Sciences Centre, University of Western Ontario, Women’s College Research Institute)

As prophylaxis for breast and ovarian cancers, women with BRCA1 and BRCA2 mutations are counselled to undergo a bilateral salpingo-oophorectomy (BSO). However, there is growing evidence that BSO prior to natural menopause is associated with detrimental health outcomes. With regards to brain health, premature estrogen deprivation induced by BSO is associated with memory decline immediately following surgery if hormone replacement therapy (HRT) is not initiated, and furthermore, an increased risk of dementia in later life. The present study examines the long-term trajectory of cognitive changes following BSO, out to ten years post-surgery. An accelerated longitudinal design was used wherein carriers of BRCA1/2 mutations who have undergone BSO between six months and eight years ago were recruited and tested once a year, for a total of three years. Two control groups were also recruited: women with BRCA1/2 mutations who have not undergone BSO, and age-matched controls with intact ovaries. A neuropsychological battery was administered to all groups to assess changes in memory, working memory and attention over time. Results indicate that women with BSO show decreased performance in verbal, episodic memory compared to women without BSO. In addition, a significant negative correlation was found between verbal memory and years since surgery, after controlling for age. Results therefore suggest there are sustained changes in memory post-BSO that deteriorate as a function of time since estrogen deprivation. Although there are clear benefits of a prophylactic BSO in high-risk individuals, more research is needed in order to fully inform patients of the long-term consequences.

Au April

April obtained a B.Sc. from McMaster University in 2011 with a double major in Psychology and Biology, and went on to pursue graduate training in Cognitive Neuroscience at the University of Toronto. Under the guidance of Dr. Gillian Einstein, she collected preliminary data on the effects of premature estrogen deprivation on cognition in female carriers of BRCA1/2 mutations who had undergone prophylactic bilateral salpingo-oophorectomy. She received a M.A. in 2012, and currently continues to collect data on her longitudinal investigation of how estrogen deprivation affects brain health. Upon completion of her Ph.D. training, she is interested in pursuing a career in clinical research in order to better understand the etiology of dementia.

THE UNDER 34 COMPETITION

The Scientific Contest held for the third time this year has allowed 100 excellent young scientist of under 34 years to be supported by the Society to join us in Florence, by providing free registration and accommodation. The first 4 ranked abstracts will be presented in Plenary Sessions of the congress.

Are you a young researcher? Take part to the Under 34 competition for the 17th ISGE World Congress, more info at www.isgesociety.com/isge2016
AUDITORIUM 11:45/13:15

♦ Plenary session – Endometrium and menorrhagia

Effects of life-style interventions on the expression of GPER, PGRMC1 and PGRMC2 in the endometrium of obese PCOS patients

M. Hulchiy (SE), A. Nybacka (SE), A. Calaby (SE), L. Sahlin (SE), A. Hirschberg (SE) (Karolinska Institutet)

Objective: The aim of our study was to confirm the hypothesis that placental hypoperfusion in women who secondary develop placental vascular diseases (PVD) occurs as soon as the first trimester.

Materials and Methods: Acquisition of utero-placental volume was performed prospectively in 67 low risk patients, between 11 and 14 weeks, using an abdominal probe and 3D power Doppler (3D PD) angiography with standardised parameters. Thanks to VOCAL software, we quantified separately, placental and myometrial vascularization. Values obtained from patients with PVD were compared with those with favourable outcome.

Results: PVD occurred in 6 cases (1 preeclampsia, 1 gestational hypertension associated to IUGR and 4 isolated IUGR). All 3D PD indices (VI, FI and VFI) in placenta significantly decreased in patients who developed PVD (p<0.01) {mean VI: 1.73 vs 6.9; VFI: 0.59 vs 2.81 and FI 33.41 vs 41.49} whereas in myometrium, only VI and VFI were reduced (p<0.05) {mean VI: 12.97 vs 20.97; VFI: 5.6 vs 10.27}. In contrast, placental volumes were not different.

Conclusion: In PVD, utero-placental vascularization is impaired very soon in pregnancy. This technique could be a way to detect patients at high risk of PVD in general population and to select patients needed preventive treatment and increased medical monitoring.

Mariana Hulchiy (SE)
2008 Admitted to postgraduate studies, leading to Ph.D. in Medical Science at the Department of Women’s and Children’s Health, Division of Obstetrics and Gynecology, Karolinska Institutet, (Stockholm, Sweden).
2000-2006 Full course of the National O.Bohomolets Medical University specializing in “General medicine”, conferred M.D. Degree by diploma with honor (Kiev, Ukraine)
2006-2008 Internship at Department of Obstetrics and Gynaecology; National O.Bohomolets Medical University (Kiev, Ukraine)
2007 Was awarded with a financial grant for PhD training by Swedish Institute (Visby Programme)
2010-2012 F1000Prime Associate Faculty member in Reproductive Endocrinology and Infertility
2011 Degree of Candidate of Medical Sciences (equivalent to Ph.D.) at Research Institute of Pediatrics, Obstetrics and Gynecology (Kiev, Ukraine)

THE UNDER 34 COMPETITION
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SUNDAY, MARCH 8TH

AUDITORIUM

08:30/10:00  PLENARY SESSION

PROGESTERONE, PROGESTINS AND PROGESTERONE RECEPTOR INTERACTIONS
Chairmanship: Pérez-López Faustino (ES), Goldstein Steven (US)
Schindler Adolf (DE) The clinical relevance of classification and comparative pharmacology of progestogens
Ruan Xiangyan (CN) Membrane-bound progestogen receptors: importance for breast cancer development
Sitruk–Ware Regine (US) Potential Health Benefits of Progesterone
Boschitsch Ewald (AT) Crucial Differences of Micronized Progesterone and Progestins in Menopausal Hormone Therapy

10:15/11:15  MEET THE EXPERTS

SELECTING THE RIGHT CONTRACEPTIVE STRATEGY
Chairmanship: Sitruk-Ware Regine (US), De Melo Nilson R. (BR)
Gemzell Danielsson Kristina (SE) Contraception for young and nulliparous women
Serfaty David (FR) Contraception and compliance: MID-LARC or LARC for young women?

11:15/11:45  BREAK

11:45/13:15  PLENARY SESSION

ENDOMETRIUM AND MENHORRAGIA
Chairmanship: Gaspard Ulysse (BE), Schindler Adolf (DE)
Goldstein Steven (US) The Endometrium: When it bleeds and when it doesn’t
Hulchiy Mariana (SE) Effects of life-style interventions on the expression of GPER, PGRMC1 and PGRMC2 in the endometrium of obese PCOS patients
Bouchard Philippe (FR) SPRM and uterine bleeding
Sciarrà John J. (US) New treatments for fibroids

13:15/13:45  CLOSING CEREMONY

AFFARI 0

08:30/10:00  PLENARY SESSION

ENDOCRINE DISORDERS AND ADOLESCENCE: THE IMPACT FOR FERTILE LIFE
Chairmanship: Meczekalski Blazej (PL), Sciarrà John (US)
Bruni Vincenzina (IT) Primary ovarian insufficiency in very young women
Sultan Charles (FR) From genes to clinics management of adolescent hyperandrogenism
Birkhaeuser Martin (CH) Delayed puberty: impact on fertility
Shah Duru (IN) Polycystic Ovarian Syndrome- In the Indian adolescents

10:15/11:15  MEET THE EXPERTS

ULTRASOUND IN EARLY PREGNANCY
Chairmanship: Angioni Stefano (IT), Todros Tullia (IT)
Goldstein Steven (US) Early Pregnancy: is it time to rethink our ultrasound criteria
Luchi Carlo (IT) First trimester ultrasound: is it the moment to change the future?
11:15/11:45 BREAK

11:45/13:15 PLENARY SESSION

FEMALE SEXUAL DYSFUNCTION: ENDOCRINE AND CULTURAL ASPECTS
Chairmanship: Birkhaeuser Martin (CH), Castelo-Branco Camil (ES)
Nappi Rossella (IT) To sex or not to sex in women taking hormonal contraception
Bitzer Johannes (CH) Painful sex: where does it come from and how to help
Lachowsky Michèle (FR) Sexuality to-day, intimacy or performance?
Zimmerman Yvette (NL) The pill and androgens

AFFARI 2

08:30/10:00 PLENARY SESSION

REPRODUCTIVE RECONSTRUCTIVE SURGERY
Chairmanship: Cela Vito (IT), Angioni Stefano (IT)
Adamyan Leyla (RU) Surgical treatment of infertile patients with uterovaginal malformations
Creatsas George (GR) Lower genital tract congenital anomalies
Fedele Luigi (IT) Obstructive genital malformations
Perino Antonio (IT) Vaginal rejuvenation with the fractional CO2 laser treatment

10:15/11:15 MEET THE EXPERTS

INFERTILITY: FROM GENES TO PROTEOMIC
Chairmanship: Schenker Joseph (IL), Dessole Salvatore (IT)
Caserta Donatella (IT) HeavyMetals in amniotic fluid: the role of placenta as barrier
Colacurci Nicola (IT) Proteomic in reproductive medicine
Cicinelli Ettore (IT) Altered endometrial receptivity in women with chronic endometritis

11:15/11:45 BREAK

11:45/13:15 PLENARY SESSION

WOMEN'S HEALTH THROUGHT AGEING
Chairmanship: Siseles Nestor (AR), Brincat Mark (MT)
Rees Margaret (GB) Managing the menopause without estrogen
Archer David (US) Estrogen and selective estrogen receptor modulators for menopausal symptoms
Cano Antonio (ES) Personalized medicine and disease prevention after menopause: a window of opportunity for lifestyle
Huber Johannes (AT) Polymorphism diagnosis for improvement and individualization of HRT

VERDE

08:30/10:00 PLENARY SESSION

NEW PERSPECTIVES ON PREMATURE OVARIAN INSUFFICIENCY
Chairmanship: Huber Johannes (AT), Al-Azzawi Farook (GB)
Vujovic Svetlana (RS) Premature ovarian insufficiency: fertility challenge
Panay Nicholas (GB) Premature Ovarian Insufficiency database: progress in global collaboration
Au April (CA) The long-term effects of bilateral salpingo-oophorectomy on memory
Ng Ernest (HK) Use of DEHA in primary ovarian insufficiency (POI)
10:15/11:15 MEET THE EXPERTS
POLYCYSTIC OVARY: FROM INFLAMMATION TO AGEING
Chairmanship: Moscarini Massimo (IT), Lachowsky Michele (FR)
Paoletti Anna Maria (IT) Inflammatory environment in women with polycystic ovary syndrome
Ben Rafael Zion (IL) Is ovarian aging slower in PCOS patients?

11:15/11:45 BREAK

11:45/13:15 ORAL PRESENTATION
(OP3) FRONTIERS IN GYNECOLOGICAL ENDOCRINOLOGY
Chairmanship: Luchi Carlo (IT), Cicinelli Ettore (IT)
do Amaral Vinícius (BR) Prolactin and prolactin receptor protein expression in the uterus of mice with metoclopramide-induced hyperprolactinemia
Taavoni Simin (IR) Premenstrual Symptoms in Medical Students in Tehran
Damous Luciana (BR) Does adipose tissue-derived stem cells increases angiogenesis in topic and grafted ovaries?
Koutoulakis Yannis (GR) Hypothalamic amenorrhea – endothelial dysfunction
Kozachenko Andrey (RU) Clinical and morphological manifestations and molecular mechanisms of formation of adhesions of uterine myoma
Tadakawa Mari (JP) The anti-diabetic drug metformin suppresses VEGF expression and secretion through inhibition of the mTOR / HIF-1α pathway in uterine leiomyoma cells
Ayuandari Sarrah (AT) Follicular development after xenotransplantation of cryopreserved and thawed human ovarian tissue in SCID mice
Sabbadin Chiara (IT) Persistent amenorrhea after weight recover in anorexia nervosa
Ros Cristina (ES) Sensorineural dysfunction in adult women with turner's syndrome
ONICE

08:30/10:00 ORAL PRESENTATION

(OP9) ENDOMETRIOSIS, SEXUAL DYSFUNCTION AND PELVIC PAIN
Chairmanship: Caserta Donatella (IT), Zimmerman Yvette (NL)

Ulloque-Caamaño Liezel (CO) Prevalence of sexual dysfunction and hypoactive sexual desire disorder in indigenous women in climacteric from two Latin-American communities
Xiao Li (CN) Increased expression of the pluripotency marker SOX2 and NANOG in ovarian endometriosis
Missanelli John (US) An alternative graft colpopexy
Racca Annalisa (IT) Endometriotic ovarian cysts do not negatively affect the rate of spontaneous ovulation
Turp Ahmet (TR) Women in Babylonia in an Assyrian’s clay tablet In istanbul Archeology Museum: Some issues of infertility, surrogate mother, and social statue of woman in ancient Mesopotamia
Agbaje Olatunde (NG) Information and awareness on sexual health and dysfunction
Griffith Veronique (GB) Patient Experiences of Endometriosis: Simply Chronic Pelvic Pain?
Arteta-Acosta Cindy (CO) Assessment of the quality of life in afro-descendant and indigenous colombian women in climacteric who present hypoactive sexual desire disorder
Gulino Ferdinando (IT) Comparison between serum levels of Nerve Growth Factor (NGF) in women with infertility of different etiopathogenesis undergoing to an IVF cycle
Giraldo Helena (BR) Dyspareunia and less lubrication in women with Premature Ovarian Failure using hormonal therapy: correlation with vaginal aspects
Adamyan Leila (RU) Resection of nodule adenomyosis: evaluation of reproductive function

10:15/11:15 ORAL PRESENTATION

(OP10) PREGNANCY
Chairmanship: Ferrazzi Enrico (IT), Valensise Herbert (IT)

Abdulsid Akrem (GB) Placental HSP 27 and 70: Spatial change during Labour and FGR
Vladic Stjernholm Ylva (SE) Additional treatment with natural progesterone prolonges gestation in women with preterm labour
Londero Ambrogio P (IT) Assisted reproductive technology and pregnancy outcome
Kashanian Maryam (IR) Evaluation of the diagnostic value of serum urocortin concentration in the prediction of preterm birth (delivery)
Elksne Karlina (LV) Plasminogen activator inhibitor – 1 in maternal plasma of overweight and nonoverweight pregnant women and its relationship to labor complications
THE POSTER SESSION

Poster can be mounted starting from March 5th from 16.00
Poster must be unmounted before March 6th 18.00

Each poster in the space must be attached in the area of the assigned number.

Poster session will take place on March 6th at lunch time
LIST OF POSTERS

**Gynecological endocrinology**

1. Obesity and quality of sleep, quality of life and insomnia in Colombian women in climacteric Portela-Buelvas K. (CO), Ulloque-Caamaño L. (CO), Monterrosa-Castro Á. (CO)
2. Prevalence of metabolic syndrome in girls and adolescents Sierra S. (UY), Sanchez J. (UY), Lima S. (UY)
3. Menstrual cycle irregularities and sex hormone profile in severe obese women after weight loss Tancic-Gajic M. (RS), Vujovic S. (RS), Ivovic M. (RS), Marina L. (RS), Arizanovic Z. (RS), Micic D. (RS)
4. The pattern of dietary habits influence prolactin response to antidopaminergic drug: preliminary data Raimondo S. (IT), Di Segni C. (IT), Bava S. (IT), Leo F. (IT), Cammarano M. (IT), Pareo J. (IT), Festa R. (IT), Miggiano G. (IT), Mancini A. (IT)
5. Physical activity and its influence in infertility Qirko R. (AL), Qirko M. (AL), Koroveshi E. (AL)
6. Diabetic women in climacteric have major prevalence of menopausal symptoms and worse quality of life Monterrosa-Castro A. (CO), Ramos-Classon E. (CO), Caraballo-Olave E. (CO)
9. Metabolic fingerprinting of granulosa cells from normal and polycystic ovaries Brincat M. (GB), Gambin J. (GB)
10. The effect of myo-inositol administration in sterile obese patients with insulin-resistance and Polycystic Ovary Syndrome (PCOS) Tassinati F. (IT), Capucci R. (IT), Piva I. (IT), Bonaccorsi G. (IT), Vesce F. (IT), Marci R. (IT)
11. Effect of overweight and obesity on the sexual maturation Chebotnikova T. (RU), Melnichenko G. (RU), Uvarova E. (RU), Kuchma V. (RU), Skoblina N. (RU), Ilyin A. (RU), Esayan R. (RU)
15. Method of differential diagnostics of anorexia nervosa with diseases associated with underweight and secondary amenorrhea in adolescent girls Andreeva V. (RU)
16. The study of adipose tissue markers in adolescent girls with oligomenorrhea and obesity Andreeva V. (RU), Levkovich M. (RU), Mashtalova A. (RU), Linde V. (RU)
17. Realization of reproductive potential in women with dysmenorrhea in adolescent age Tuchkina I. (UA), Zobina (UA), Dobrovolskaya L. (UA), Vigovskaya L. (UA), Blagoveschenskiy Y. (UA), Maltsev G. (UA), Pokrishko S. (UA)
18. Diagnostics and treatment of female adolescents and young women with ovarian cysts
   Tuchkina I. (UA), Plontkovskaya O. (UA), Gnatenko O. (UA), Tysachka G. (UA), Rubinskaya T. (UA), Rogacheva N. (UA)

19. De quervain thyroiditis and pregnancy. A case report
   Pereira J. (BR), Dos Santos M. (BR), Santos S. (BR), Catani R. (BR), Barbosa G. (BR)

20. Subclinical hypothyroidism and cardiovascular risk factors in postmenopausal women

21. Diagnosis of ovarian struma for persistence of hyperthyroidism after total thyroidectomy
   Faraj G. (AR), Pastorino Casas V. (AR), Borghi M.F. (AR), Lutfi R.J. (AR), Schere D. (AR), Faure E.N. (AR)

22. Correlation of thyroid function and post-partum depression: preliminary data on a sample study
   Ciotta L. (IT), Teodoro M. (IT), Formuso C. (IT), Stracquadanio M. (IT), Guarnera M. (IT), D’Alessandro A. (AF), Zarbo G. (IT)

23. Evaluation of thyroid function at delivery and in the first six months postpartum: preliminary data in a sicilian sample study
   Teodoro M. (IT), Stracquadanio M. (IT), Ingala A. (IT), Formuso C. (IT), Ciotta L. (IT)

24. FertiQoL in women with infertility and autoimmune thyroiditis
   Kvashenko V. (RU), Chayka V. (UA), Vustenko V. (UA)

25. Association of type 2 diabetes with hypothyroidism in menopausal and postmenopausal women
   Gulyamova K. (UZ)

   Gromova O. (RU), Gromova M. (RU), Kirinkulova N. (RU)

27. Mathematical modeling of premenstrual syndrome risk in women of child-bearing age
   Khodjaeva N. (UZ)

28. Paracrine factors as a marker of women’s reproductive health
   Umalkhodjaeva Z. (UZ), Khaydarova F. (UZ)

29. Gynecologic problems in women with acromegaly
   Logutova L. (RU), Zaidieva J. (RU), D prevalent A. (RU), Chechenova M. (RU), Ilovaikaya I. (RU), Perfiliev A. (RU), Rifatova A. (RU)

30. Differentially expressed miRNAs in Premature Ovarian Aging (POA) patients and the influence of mir-106a on the proliferation and apoptosis of human granulosa cells
   Yang X. (CN), Peng S. (CN), Li Y. (CN)

31. A sensitive and robust LC-MS/MS method for the simultaneous quantification of Dehydroepiandrosterone (DHEA), Estrone (E1), Estradiol (E2), Testosterone (Testo), Dihydrotestosterone (DHT), Androstenedione (4-dione) and Androst-5-ene-3β,17β-diol (5-diol) in postmenopausal serum using a single sample preparation method
   Ke Y. (CA), Dadgar D. (CA), Bertin J. (CA), Labrie F. (CA)

32. A fast and sensitive UHPLC-MS/MS method for the simultaneous quantification of serum Androsterone Glucuronide (ADT-G), Etiocholanolone Glucuronide (Etio-ADTG), Androstan-3α, 17β diol 3-glucuronide (3α-diol-3G) and Androstan-3α, 17β diol 17-glucuronide (3α-diol-17G) in postmenopausal women
   Ke Y. (CA), Dadgar D. (CA), Bertin J. (CA), Labrie F. (CA)

33. The role of menopause in occurrence of adrenal incidentalomas: a ten years single center experience
   Ivovic M. (RS), Vujovic S. (RS), Marina L. (RS), Tancic-Gajic M. (RS), Arizanovic Z. (RS), Rakovic D. (RS), Milinkovic M. (RS), Micic D. (RS)

34. C3420T polymorphism of the DRD2 gene in the childbearing age Uzbek women
   Adkhamaova N. (UZ), K. Najmutdinova D. (UZ)

35. Study of gene expression of prolactin and prolactin receptor in the mice uterus with metoclopramide-induced hyperprolactinemia throughout the estrous cycle
   Gomes R. (BR), Verna C. (BR), Leal A. (BR), Thomas V. (BR), Baracat E. (BR), Soares Júnior J. (BR)

36. Hyperprolactinemia syndrome in children in Belarus
   Zagrebaeva O. (BY), Solntseva A. (BY)
37. The correlation between the aetiology and level of hyperprolactinaemia in the material of Endocrinology Clinic Târgu Mureş during 2008-2011

Szántó Z. (RO), Demjén E. (RO), Gliga C. (RO), Pop Radu C. (RO), Năsăean A. (RO), Balázs J. (RO), Pascaru I. (RO), Kun I. (RO)

38. Reduction of cellular activity in lacrimal glands as a consequence of increased apoptotic cell death (cleaved caspase-3) in female mice of hyperprolactinemic mice female

Leal A. (BR), Gomes R. (BR), Simões R. (BR), Soares Júnior J. (BR), Simões M. (BR), Verna C. (BR)

39. Influence of the hyperprolactinemia on collagen fibers in the lacrimal gland of female mice

Leal A. (BR), Gomes R. (BR), Simões R. (BR), Simões M. (BR), Soares Júnior J. (BR), Verna C. (BR)

40. CA 125 and VAS pain score modifications following GnRH-analog administration as ex adiuvantibus criteria to diagnose endometriosis as cause of chronic pelvic pain

Venturella R. (IT), Morelli M. (IT), Lico D. (IT), Di Cello A. (IT), Rania E. (IT), Zullo F. (IT)

41. Expression of genes related steroidogenesis ovary of rats exposed to supplement of melatonin


42. Estrogen regulates endothelial Plasminogen Activator Inhibitor (PAI-1) synthesis through C-FOS and C-JUN

Palla G. (IT)

43. Influence of menstrual cycle on 7-hydroxy derivatives of dehydroepiandrosterone levels

Duskova M. (CZ), Jandiková H. (CZ), Hill M. (CZ), Starka L. (CZ)

44. Impact of estetrol vs estradiol on the modulation of plasminogen activation pathway in endothelial cells

Montt Guevara M. (IT), Palla G. (IT), Spina S. (IT), Bernacchi G. (IT), Genazzani A. (IT), Simoncini T. (IT)

45. Single Port Access Laparoscopy (SPAL) treatment of a postmenopausal woman with a leydig cell tumour

Multinu F. (IT), Prasciolo C. (IT), Pontis A. (IT), Melis G. (IT), Angioni S. (IT)

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333. Application of sentinel node technique with blue patent for Breast Cancer in a public hospital of a developing country with a developed country demographics
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334. Laparoscopic vs. open abdominal staging in women older than 75 years with early stage endometrial cancer
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337. Effects of aging and psychological mood states on autonomic function among women in different life-stages

338. Menopause and Polycystic Ovary Syndrome (PCOS): increased risk of cardiovascular disease
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341. Clinicopathologic characteristics and prognosis factors of uterine sarcomas in central Tunisia: a report of forty cases

342. Detection of circulating tumor cells in high-risk endometrial cancer

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343. Quality of life of breast cancer patients’ family caregivers in the eastern part of Iran
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346. The performance of 3D echography in predicting reproductive outcomes after conservative myomectomy
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352. Efficacy of hysteroscopy in the management of recurrent pregnancy loss

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