

P3-03 - SCROTAL ULTRASONOGRAPHIC FINDINGS IN YOUNG MEN WITH CONGENITAL HYPOGONADOTROPIC HYPOGONADISM

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Objective : Congenital hypogonadotropic hypogonadism (CHH) is characterised by low gonadotropin and sex steroid levels in the absence of anatomical or functional abnormalities of the hypothalamic-pituitary-gonadal axis. The aim of this study was to evaluate and determine the scrotal sonographic findings and the frequency of the scrotal pathologies in patients with CHH.

Method : A total of 73 newly diagnosed young CHH patients who had undergone scrotal ultrasound were enrolled in this study

Results: 73 patients age were ranged between 18 and 24 years ($20,5 \pm 1,5$ years). The mean ultrasonographic testicular volumes in this study were $2,06 \pm 1,85$ mL ($0,37-6,83$ mL) at right testes, and $2,06 \pm 1,78$ mL ($0,41-6,84$ mL) at left testis. At sonographic examination, 29 (39.7%) of 73 patients had no pathologic abnormalities of the scrotal contents except small testicular volume. We found testicular microlithiasis in 15 patients (20.5%), epididymal cyst in 12 patients (16.4%), varicocele in 11 patients (15.1%), scrotal calculi in 9 patients (12.3%), undescended testes located within the inguinal canal in 3 patients (4.1%), tunica albuginea cyst in 2 patients (2.7%), hydrocele in 1 patient (1.3%), and hyperechogenic small mass lesion in 1 patient (1.3%). For 3 patients, testes were not found within inguinal canal or intraabdominal regions (4.1%).

Conclusion: In our study, the frequency of scrotal pathologies in patients with CHH was higher than the normal population. Therefore, we think that patients with CHH should be screened and followed with scrotal ultrasound.

P3-04 - ENDOMETRIAL THICKNESS EVALUATION BY THREE DIMENSIONAL TRANSVAGINAL ULTRASOUND AS A PREDICTOR OF PREGNANCY OUTCOME IN IVF PATIENT.

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Objective: To evaluate the role of endometrial thickness on the day of HCG (human chorionic gonadotropin) administration in in-vitro fertilization (IVF) outcome.

Method and materials: Endometrial thickness of two hundred and seven patients were evaluated in this prospective study. Transvaginal ultrasound assessment of endometrial thickness was performed on the day of HCG administration.

Result: The endometrial volume was divided to 3 groups: ≤ 7 mm (Group 1), 8-14 mm (Group 2), > 14 mm (Group 3). Positive pregnancy in group 1, 2 and 3 were 16.7%, 36.1 and 46.2% respectively.

Conclusion: There is no statistical significant relationship between endometrial thickness on the day of HCG administration and predicting pregnancy outcome in ART cycle (According to chi-square test which was obtained by the data). However comparing 3 groups, patients with endometrial thickness of > 14 mm (Group 3) has shown the better pregnancy rate (46.2%).