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屈螺酮炔雌醇与其他口服避孕药治疗多囊卵巢综合征

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Title: Drospirenone Ethinylestradiol and Others Oral Contraceptives for Polycystic Ovarian Syndrome: A Systematic Review

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摘要: 目的 系统评价屈螺酮炔雌醇 (EE/DRSP) 与其他口服避孕药治疗多囊卵巢综合征 (PCOS) 的疗效及其安全性。方法 按照Cochrane 系统评价原则, 采用相关检索策略检索Cochrane临床对照试验数据库(CENTRAL)、 EMBASE、MEDLINE和中文期刊全文数据库(CNKI)、维普中文期刊数据库(VIP)及万方等数据库与中国生物医学文献数据库(CBM) (检索时间自建库至2013年5月30日) 以及相关国际性临床试验网站中, 纳入屈螺酮炔雌醇与其他口服避孕药治疗PCOS疗效比较的随机对照试验 (RCT)。评价纳入RCT研究的方法学质量, 采用RevMan 5.2 软件对有关数据进行 Meta 分析。结果 通过相关文献检查, 共计7篇文献符合本研究纳入标准, 共计纳入受试者为535 例。本组纳入文献中, 6篇为中等质量文献, 1篇 为低质量文献。与口服避孕药甲羟孕酮 (MPA) 治疗PCOS的疗效比较, 屈螺酮炔雌醇可显著改善PCOS患者的多毛症状, 提高性激素结合球蛋白(SHGB)及高密度脂蛋白 (HDL)水平,降低促黄体生成素(LH)、总胆固醇(Tch)及三酰甘油 (TG) 水平, 但可显著增加空腹胰岛素 (FINS) 水平, 且差异均有统计学意义 (P <0 .05)。屈螺酮炔雌醇与炔雌醇去氧孕烯 (EE/DSG)、炔雌醇醋酸环丙孕酮 (EE/CPA) 对改善PCOS患者的多毛、体质量、高雄激素血症情况比较, 差异均无统计学意义 (P >0.05); 但屈螺酮炔雌醇对脂代谢的保护作用优于炔雌醇去氧孕烯、炔雌醇醋酸环丙孕酮, 且差异有统计学意义 (P <0.05)。与炔雌醇醋酸

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氯地孕酮 (EE/CMA)治疗PCOS的疗效比较, 屈螺酮炔雌醇可显著改善患者的高雄激素血症情况及多毛症状, 且差异均有统计学意义 ($P < 0.05$)。与炔雌醇孕二烯酮 (EE/GSD) 治疗PCOS的疗效比较, 屈螺酮炔雌醇可显著改善患者的高雄激素血症情况, 且差异有统计学意义 ($P < 0.05$)。屈螺酮炔雌醇治疗PCOS的不良反应发生率显著低于炔雌醇去氧孕烯, 且差异有统计学意义 ($P < 0.05$)。结论 屈螺酮炔雌醇对改善PCOS患者高雄激素血症的疗效优于其他口服避孕药, 对脂代谢有保护作用, 对糖代谢影响甚小, 且安全性与其他口服避孕药相当。

Abstract: Objective To systematically evaluate the effectiveness and safety of ethinylestradiol drospirenone (EE/DRSP) for treating polycystic ovary syndrome (PCOS) and compare with others oral contraceptives(OC). Methods A systematic review and Meta analysis of randomized controlled trials (RCT) on ethinylestradiol drospirenone for treating PCOS compared with other OC by Revman 5.2 software. Studies were mainly searched from the CENTRAL, EMBASE, MEDLINE, CNKI, VIP and Wanfang databases. Results Seven studies with 535 partients were included. The quality of included studies was median. Ethinylestradiol drospirenone was benefit in sex hormone binding globulin(SHGB), high density lipoprotein (HDL) , luteotrophic hormone (LH), total cholesterol (Tch), triglycerides (TG) and may aggravate the fasting insulin (FINS) ($P < 0.05$), compared with medroxyprogesterone (MPA). Compared with ethinyl estradiol desogestrel (EE/DSG) and ethinyl estradiol cyproterone acetate (EE/CPA), ethinylestradiol drospirenone was better in lipid metabolism, though they had the same effect in hyperandrogenism ($P > 0.05$). Ethinylestradiol drospirenone was more effective in hyperandrogenism, hirsutism than ethinyl estradiol chlormadinone acetate ($P < 0.05$). Ethinylestradiol drospirenone was similar with ethinyl estradiol gestodene (EE/GSD) in hyperandrogenism, but the lipid and glucose metabolism effect was unclear. Ethinylestradiol drospirenone was similar with other OC on safety ($P < 0.05$). Conclusions Ethinylestradiol drospirenone was better in hyperandrogenism, lipid and glucose metabolism than other OC, in addition, similar in safety.

参考文献/REFERENCES

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