

New members

(continued)

JAOA

medi-notes

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Varying CA 125 levels in women with endometriosis

Investigators retrospectively examined the variations in surface cell antigen (CA) 125 levels during the three phases of the menstrual cycle in women with and without endometriosis. Participants included 125 women. The CA 125 levels were measured during menses and during the follicular and luteal phases before diagnostic laparoscopy. The women were categorized into four groups: no evidence of endometriosis (35 women), stage I endometriosis (30 women), stage II endometriosis (21 women), and stages III and IV endometriosis (14 women).

A significant difference was noted in the mean CA 125 levels drawn at menses and those drawn in the follicular phase. Furthermore, patients with severe endometriosis also had a significant difference in the CA 125 levels drawn during menses and the luteal phase. In all instances, the CA 125 levels increased with the severity of endometriosis.

A screening test was developed based on the ratio of CA 125 levels at menses to those levels found in the follicular phase. The test based on this ratio, with a cut-off of 1.5, had a sensitivity of 62.5% and a specificity of 75%. These parameters measured 26.8% and 100%, respectively, for a single CA 125 level drawn at menses, with a cutoff of 35 U/mL.

Women with endometriosis have higher levels of CA 125 during menses than during the follicular stage. Screening tests based

on the relationship of multiple CA 125 levels taken throughout the menstrual cycle were more sensitive for detecting endometriosis than tests based on one CA 125 level. Further study in this area is continuing.

O'Shaughnessy A, Check JH, Nowroozi K, et al: CA 125 levels measured in different phases of the menstrual cycle in screening for endometriosis. *Obstet Gynecol* 1993;81:99-103.

Long-term treatment of alcoholism in schizophrenic outpatients

Eighteen patients with alcoholism and schizophrenia diagnosed according to the DSM-III-R criteria were enrolled in a pilot treatment program in rural New Hampshire. Of these, 12 were men and 6 women; all were white, with a mean age of 37.9 years. All 18 patients had alcohol use disorder; 15 (83.3%) had schizophrenia; 3 (16.7%) had schizoaffective disorder, and 4 (22.2%) had marijuana use disorder.

Between 1987 and 1991, clinicians evaluated patients continuously on an outpatient basis; the authors of this study reevaluated the patients using similar methods 4 years after the baseline evaluations first were made. A combination of psychiatric interviews, clinicians' ratings, clinical records, and intensive case reviews were used to assess alcohol and drug use.

Remission was defined as at least 6 months' abstinence from

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