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## EPIDEMIOLOGICAL STUDY ON MENSTRUAL HYGIENE AND MENSTRUAL IRREGULARITIES AMONG YOUNG HEALTH CARE PROFESSIONALS

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### Abstract

The normal length of the menstrual cycle is typically between 24 to 38 days. A normal menstrual period lasts up to 8 days. As per the American college of obstetricians and gynecologist, there are 14% to 25% of women have irregular menstrual cycles and other associated problems. The aim of our study is to evaluate the menstrual hygiene and associated menstrual irregularities among the young health care professionals in healthcare institutions in Kerala, India. This is a community based, cross sectional survey based study, was conducted among 415 health care professional subjects of age group 17-25 years. The questionnaire for the survey study was prepared using Google forms. Certain factors such as menstrual hygiene, diet, environment, thyroid levels, and their regular medications were considered and their influence over the menstrual irregularities was analyzed. Out of 415 samples, 33.3% (138) have reported with irregular menstrual cycles and among these subjects 7.2% was diagnosed with PCOD. In 33.3% (138), 42.02% subjects have found that their menstrual cycle was affected by climate changes. When considering their food habits 83.3 % (115) subjects include non-veg in their diet and in this, 72.17% subjects prefers chicken the most. It reveals that changing food habits and climate have an influence over menstrual problems. These were found to be the major cause for morbidity among this population. The results shows that the health care professional were reluctant to maintain menstrual hygiene and to seek medical treatment. Appropriate health care education should be given in this regards.

Keywords: Menstruation, menstrual cycle, menstrual hygiene, menstrual irregularities, irregular menstrual cycles

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## OVERALL SURVIVAL AND COST-EFFECTIVENESS ANALYSIS OF RIBOCICLIB PLUS HORMONE THERAPY VERSUS PALBOCICLIB PLUS HORMONE THERAPY AND HORMONE MONOTHERAPY AS FIRST-LINE TREATMENT FOR HR+/HER2-ADVANCED BREAST CANCER

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### Abstract

Background: Hormone Receptor Positive (HR+) and Human Epidermal Growth Factor Receptor 2 Negative (HER2-) tumors constitute 65% of all breast cancer. CDK4/6 inhibitor (ribociclib, palbociclib) with hormone therapy (HT) have been approved as the first-line therapy for HR+/HER2- breast cancer. Clinical trials have established that combination of CDK4/6 inhibitor with HT increases overall survival than taking hormone monotherapy. Cost-effectiveness studies are essential to inform the payers and clinical decision makers on money value of cancer therapy. Objective: To determine the overall survival (OS) and cost-effectiveness of ribociclib plus HT versus palbociclib plus HT and hormone monotherapy as first-line treatment for HR+/HER2- advanced breast cancer. Method: A comprehensive literature search (Pubmed, Cochrane controlled trials register) was undertaken to identify articles that focused on overall survival and cost-effectiveness of ribociclib versus palbociclib both in combination with HT and hormone monotherapy for HR+/HER2- breast cancer. Results: The addition of CDK4/6 inhibitor to HT resulted in longer OS than hormone monotherapy. Estimated OS was 43.3 months for ribociclib plus HT, 38.9 months for palbociclib plus HT and 33 months for hormone monotherapy. Cost-effectiveness analysis showed that ribociclib plus HT resulted in cost saving and incremental quality-adjusted life years (QALYs) compared to palbociclib plus HT and hormone monotherapy. Conclusion: The results demonstrate that ribociclib plus HT enable prolonged OS and is the cost-effective therapeutic option compared to palbociclib plus HT and hormone monotherapy as first-line treatment for HR+/HER2- advanced breast cancer.

Keywords: HR+, HER2-, CDK4/6 inhibitor, ET, cost-effectiveness, overall survival, QALYs

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