

# Contribuciones chilenas presentadas al XIII Congreso Mundial de Ginecología Pediátrica y del Adolescente y VII Congreso Latinoamericano de Obstetricia y Ginecología Infantil y de la Adolescencia

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*Los trabajos están ordenados por números correlativos dados en el Congreso y página del Resumen del Congreso.*

## **BACTERIAL VAGINOSIS: A PEDIATRIC ENTITY? (34) - (250)**

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Bacterial vaginosis (BV) is a controversial entity in adult women; it is almost unknown in girls. The present prospective and collaborative study assessed the prevalence of *Gardnerella vaginalis* (Gv) among other clinical and laboratory findings.

**Materials and methods:** Vaginal secretion samples were obtained by the use of a cotton swab or by aspiration with a plastic catheter and a syringe, after sterile saline instillation through the hymenal orifice. Immediately after collection, samples were seeded in CNA agar medium.

**Results:** Of the 57 girls studied, 25 (43%) had not reached puberal development (T1). The ages ranged between 16 months and 16 years, with a mean age of 9 years. The most common symptoms were discharge (40,3%) and sexual abuse (sa) (26,3%). Gv was isolated from 40% of girls in T1 group, 8 of them sexually

abused and 1 with high suspicion of s.a. Gv was isolated from samples of 79,1 % of girls in T2 to T5 groups, with 28,1 % being s.a girls or suspected to have been s.a and 18,7% being sexually active girls. Gram stain revealed BV in 80,7% of the cases and cultures were positive for Gv in 20% of T1 cases and in 52,9% of T2 to T5 cases. There were signs of vaginal inflammation in 84% and in 45,1% of T1 and T2 to T5 cases respectively. 20% of T1 and 61,8% of T2 to T5 cases showed criteria of BV in the adult woman. Gv ended up being a specific pathogen by virtue of its development in cultures from T1 cases, all of which had pathologic vaginal discharge. Vaginal atrophy in this group might be an important factor against VB. For better interpretation of these findings, further investigations must be carried out.

## **DETECTION OF *CHLAMYDIA TRACHOMATIS* AND GENITAL MYCOPLASMAS IN SEXUALLY ABUSED AND NON ABUSED GIRLS (39) - (164)**

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The Purpose Was to know prevalence of vaginal colonization with *C. trachomatis* (Ct.)

and genital mycoplasmas in girls attending to pediatric Gynecology Service.

**Material and Methods:** We studied 228 girls with Sexual abuse (s.ab.), were cultured for genital mycoplasmas, and processed by polymerase chain reaction (PCR) for *C. trachomatis*.

**Results:** a vaginal specimen was obtained from 228 patients; 125 (54.8%) prepuberal, 32 (25.6%) had been abused; 103 (45.2%) puberal. 32 (31%) had the antecedent of s. act. Or s. ab. *U. urealyticum* (U.u) was isolated in 66 (28.9%) cases; 14 (11.2%) of them were prepuberal, 52 (50.4%) were puberal. In prepuberal with antecedents of s.ab. or s.act. U.u. was cultured in 19 (59.3%) cases, and in 28 (38.3%) girls without this antecedent. *M.hominis* was recovered in 11 (10.6%) puberal girls. 7 of them with s.ab. or s.act. It was isolated just in two prepuberal, both of them with s.ab. *C. Trachomatis* was one of them with s.ab., the other 2 with suspicious of s.ab.

**Conclusions:** U.u. is isolated significantly more in puberals than prepuberal, and is related with a high probability to s.ab. puberal stated the need for surveying sexual activity or sexual abuse. PCR would be useful for the diagnosis of *C. trachomatis* in a pediatric population.

### THELORRHAGIA: A PATHOLOGIC ENTITY OF CHILDHOOD? (40) - (130)

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Early thelarche and residual breast hypertrophy are among the usual consulting causes at our unit; thelorrhagia, however, is not. For a period of 10 years, we have evaluated 5 minor infants and a pre-schooler who attended our consulting room for that reason. The aim of the present work is to communicate our experience.

The age of onset ranged between 4.5 y 26 months with a median of 6 years. There was no difference at gender and all infants were eutrophic. Consultation was carried out after

11 days and 11 months with a median of one month. There was no breast development in 2 cases; the remainder were in T2 stage without evident areolar pigmentation in any case. Thelorrhagia was spontaneous in all cases and unilateral in 4 out of 6 cases. Two cases underwent hormonal determinations: prolactin levels were normal, and T4 levels were slightly increased. In 2 cases thelorrhagia regressed spontaneously after 2 weeks and after 1 month one case did not return for follow up. In one case after surgery, in a male, a firm retro-areolar nodule measuring 15 mm was biopsied and reported as cystic and hemorrhagic breast disease.

**Comments:** There is not much awareness of this entity, which can be related or not, to breast hypertrophy. The majority of cases occur in infants. Ductal transitory ectasia related to hormonal action is the mechanism that has been suggested to explain this benign condition, in which the glandular component would regress before the ductal one.

### VULVOVAGINAL FINDINGS IN POSTPUBERAL GIRLS (41) - (218)

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Vulvovaginitis represents a common chief complaint (30%) in nearly 2800 consultations per year. The aim of the present collaborative and prospective (August 97 to November 98) work was to study its etiology and some of its clinical aspects.

**Materials and methods:** vaginal secretion from the vaginal fornix samples were obtained with a cotton swab and immediately introduced in a transport medium (2 SP). Samples were cultured before 6 hours in urea- $\beta$ -D-glucuronidase (broth), arginine, agar 7, chocolate, blood, Mc. Conkey, Thayer Martin, C.N.A. and Sabouraud media and a PCR technique for *Chlamydia trachomatis* (Ct) was performed.

**Results:** We studied 102 girls, with an age median of 12 years. The chief complaint was

vaginal discharge in 40% of cases, sexual abuse (SA) or suspected sexual abuse (SSA) in 33.7% and sexual activity (SACT) in 11.2%. The vulva showed signs of inflammation in 36.1%, genital lesion in 23.7% and pathologic discharge in 58.8% of cases. Cultures were positive in 94.2%: for non  $\tilde{n}$  specific flora in 42.2% and for specific pathogens in 48.1%. *Ureaplasma urealyticum* (Uu) was isolated from 51.9%, *Gardnerella vaginalis* (Gv) from 48.1%, *Mycoplasma hominis* (Mh) from 26.9%, *Streptococcus grupo B* (SGB) from 7.7%, *Streptococcus pneumoniae* (Sp) from 1.9%, and *Candida albicans* from 15.4%.

There was history of SA or SACT in 65.2% of cases with isolation positive for Gv, in 42.7% of cases positive for Mh, in 11.4% of cases positive for Uu and in all cases in which SGB was isolated.

In order to achieve a specific and integral management of these patients, a thorough and extensive clinical and microbiological approach is mandatory.

Bacteriological isolation yield was optimal; the specific etiology, the history of SA and the isolation of sexually transmitted disease pathogens and of controversial pathogens, were remarkable observations upon this work.

#### PILL STUDY WITH VERY LOW DOSE OF ESTROGEN FOR CONTRACEPTION IN ADOLESCENT (84) - (156)

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The objective of the study was to evaluate the compliance, acceptability, security and continuation rate of a combined oral contraceptive with Ethinylestradiol 0.02 mg and Desogestrel 0.15 mg, during one year of use. All adolescents were informed about all kind of contraceptives for free and individual election. 50 voluntary adolescent were observed during one year. They asked: in CEMERA for the first time and without previous use of other contra-

ception method. An special research protocol was designed for follow up analysis.

The mean age was of 17, with a range from 14 to 19. Older than 15 years were 90%, and 98% were students. The discontinuation rate at the end of 12 months was 49%, and 30% was observed before 3 months of observation, mainly by lost of follow up. There were not pregnancies during the observation period. Some characteristics are described at Table 1.

Characteristics of adolescent users		
Characteristics	Before use	After Use
Mean menstrual days	5,6%	3,9%
Gastrointestinal problems	6%	0%
Psychological problems	7,6%	8,6%
Breast pain	51%	21,7%
Menstrual Spotting	2%	0%
Libido change	14%	0%
Mean Blood Pressure	78 mm Hg	82 mm Hg
Increased corporal hair	5,9%	0%

This combined contraceptive shown adequate tolerance, security during the observation period. No pregnancies were observed. However, it was not possible to reduce the high discontinuation rate already described in other studies. The abandonment of contraception methods in adolescent is associated more to the social and psychological factors than to the type of contraceptive method.

#### PERINATAL OUTCOMES OF ADOLESCENT PREGNANCY (85) - (183)

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**Objectives:** The aim of this study was to describe some results of the adolescent's delivery, especially related to cesarean and perinatal outcomes.

**Materials and Methods:** There were 434 health histories of adolescent mothers aged 12 to 19 years old from the period of January 1997 to June 2000, which were analysed retrospectively. Maternal age, parity, caesarean section rate, forceps rate, birth weight and Apgar Scores at first and five minutes of life were studied.

**Results:** The mean maternal age was 17,5 years old (range from 12 to 19 years old) and there were 89,4% primers. The Apgar score at first minute was less than 7 in 6,8% of patients. Other outcomes grouped by maternal age are shown on Table 1.

Table 1

Age groups Pregnancies	Distribution	Caesarean sec.	Forceps	Preterm
12-13 years old	0,3%	100%	0%	100%
14-15 years old	6,9%	16,7%	30,0%	16,7%
16-17 years old	32,9%	16,8%	22,4%	11,2%
18-19 years old	59,9%	19,6%	20,0%	14,2%
Total	100%	18,7%	21,4%	13,6%

**Conclusions:** In this review, the incidence caesarean section showed a lower rate than reported in other studies. There were no significant differences in the cesarean section rate grouped by maternal age. There was certain concern about the high rate of forceps delivery in this group of patients. There was a trend to higher rates to preterm deliveries in the group of patient less than 16 years old. Finally, was considered that this acceptable perinatal outcomes in this high risk groups of patient may be the consequence of an adequate prenatal care.

#### CHARACTERISTICS OF ADOLESCENTS USERS OF COMBINED INJECTABLE CONTRACEPTIVE WITH NORETHINDRONE ENANTHATE 50 mg / ESTRADIOL VALERATE 5 mg /% DISTRIBUTION) (86) - (157)

*Molina R., Sandoval J., Meneses R., Molina T., Bolívar N. and Abreu M.*

**Description and objectives:** 72 and 57 adolescents less than 19 years old users of a monthly combined injectable contraceptive, (IC Mesigyna) and oral hormonal contraceptives (OC) respectively were studied. They accumulated 662 and 665 months of observation for IC and OC. The main

indication of use were: risk of discontinuation, refuse to take pills, mental health disorders and drugs consumers. The objective of the study was to evaluate the contraceptive reliability, tolerance, continuation of use and cycle control. This study has not private industry support.

**Methods:** The IC group was compared with different types of OC users. They were matched by the beginning date of use and within 3 years intervals of age. Both groups were spontaneous consultans for confidential contraception and informed about the benefits and risks. All of them were evaluated before use by specialists in adolescents gynecology. Non of them had cotraindication for hormonal contraception.

Variables	Cases (n=72)	Controls (n=57)	p
<i>Antecedentes</i>			
Age 14	25.0	3.5	0.00*
15 - 17	61.1	91.2	
> 18	13.9	5.3	
Students 97.0	94.7	0.66	
Alcohol, tobacco	72.1	82.5	0.17
Drugs consumption	35.3	22.8	0.12
Mental health pathology	48.6	28.1	0.02*
<i>Evolution</i>			
Weight change:			
Decrease	26.4	24.6	
No change	30.5	3.5	0.00*
Increase	43.1	71.9	
Dismenorrhea	51.4	28.1	0.007*
Mastalgia	38.0	15.8	0.005*
Amenorrhea	4.5	3.5	0.77
Hipermenorrhea	10.9	0.0	0.01*
Oligomenorrhea	14.3	0.0	0.003*
<i>Spotting:</i>			
Initial use	6.6	0.0	0.11
3 month after	6.5	1.9	0.33
<i>Abandonment:</i>			
Lost follow up	44.4	43.9	0.94
Weight Increase	1.4	0.0	—
Pregnancy	0.0	8.8	0.02*

**Result:** IC users were younger than controls. Almost all of them were students. No significant differences were in cases and controls on stature, menarche, thelarche, pubarche and gynecology age. The IC users had a significant increase of dysmenorrhea, mas-

algia and cycle control disturbance. The OC users had significant increase in weight and pregnancy rate. No difference was observed in the abandonment rate. Among IC users no were pregnancies.

**Conclusions:** The use of monthly combined injectable contraceptive is a good alternative for those younger adolescents with higher social risk, bad compliance, risk of discontinuation and undesired pregnancy. It is necessary to increase the time of observation and to evaluate the hormonal, lipid and blood profile with a long period of use. This cohort will be increased and followed for long time as possible.

#### CLINICAL AND EDUCATIONAL EXPERIENCE OF A MIDWIFE IN PRIMARY HEALTH ATTENTION (87) - (183)

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**Objective:** Reinstatement to the school life and work through the active participation assuming their maternal compromise.

**Methodology:** A course-shop was designed for pregnant adolescents controlled in the Clinic Anibal Ariztia that included Family Planning, Guidance in Sexual Reproductive Health and Sexual Education. They took groups of the second and third trimester of the pregnancy next to their couples carrying out four sessions: Pregnancy, Childbirth, Post childbirth, Lactation and Project of Life, each one of the sessions included their respective shops and consultants. For the shops works were already used proven before by CEMERA published in the Book Adolescence. "Time of decisions". This activity motivated to carry out an analysis of the characteristics of these adolescents.

**Results:** The characteristics of the pregnant adolescents were: 21.8% smaller than 16 years with an average of 14.6 weeks in the first control. Of this group 22.8 don't complete the

basic teaching and 88.5% she abandoned the school. 5% was multigesta. 48% attended the educational shops and the evaluation that they carried out it was positive, being born the idea of continuing with the shops in the post childbirth, project financed by the Municipality, being approved for its execution. In this second stage topics were worked like: Project of life, couple relationship, family formation, care of the baby, STDs and AIDS. The activity was carried out once per week in a community headquarters. The experience motivated to take adolescents in the pubertal period to carry out the same activity. Given the economic conditions this group worked with 25 children. Later on, it was integrated the group to the program of adolescents with municipal funds. Stage still in execution.

**Conclusion:** The importance of presenting this work is to motivate people that work with adolescents in to implement a parallel extra program to its pregnancy controls that can support on her social and school insertion and to make them aware of her maternal responsibility.

#### PARENT'S COGNITIVE ACHIEVEMENT IN A SEXUAL EDUCATION COURSE (88) - (11)

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**Objective:** To measure the cognitives change before and after of a sexual education program for parents, analyzed by different personal variables.

**Methodology:** A sexual education course was designed with the proposal of parents, from two schools of Santiago. The course had 7 sessions. At the beginning and at the end of the course, a test was applied to 5 participants to evaluate the impact of the course. The analysis of the information was performed through the Kruskal-Wallis test and using the software Stata 6.0.

**Results:** No statistical differences was found in the comparison of the first with the second, but the results of the test had sta-

tistical differences when some others variables were introduced in the analysis as show Table 1.

Variable	P value	Variable	P value
Sex	0.04*	Partner relationship	0.44
Study years	0.81	Activity	0.35
Family relationships	0.73	Talk about sex	0.89
Self perception about Sexuality	0.01*		

The variables with significative differences between the first and last evaluation of the course were: Gender, with greater achievement of woman ( $p=0.04$ ) and the lower knowledge selfperception of sexuality ( $P=0.01$ ).

**Conclusion:** The greater parent's cognitive achievement in a sexual education course were in woman. This finding could be explained because they were the first consultan of the children in human sexuality, filling more motivated to achieve the objective of the course. The other factor associated with better achievement could be explained, because the self perception of their ignorance about sexuality was a motivation to get the facilities of the course and to study more.

#### VARIABLES ASSOCIATED TO KNOWLEDGE IN SEXUALITY OF UNIVERSITY STUDENTS (89) - (232)

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**Objective:** To examine that variables are associated with the knowledge in sexuality, in university students.

**Methodology:** In 1997 a study was carried out to know the level of knowledge in sexuality of the university students that entered to first year of 8 Careers at the Faculty of Medicine of the University of Chile. It was applied an anonymous and confidential, previously tested questionnaire, to 328 students. The gathered information was analyzed by means

of statistical Test of difference of means and Coefficient of correlation of Pearson, using software STATA 6.0.

**Results:** When relating knowledge in sexuality with the following variables it was obtained:

Variable	p -value	Variable	p_it valued
Sex	0.32	Age	0.02*
Type school (gender)	0.98	Type school	0.94
Prog, Sexual (school)	0.00*	Civil States (parents)	0.01*
Relationship experience	0.02*	Contact with pornography	0.89
Selfperception of sexual knowledge	0.00*		

The results show that the students with more knowledge in sexuality were those of more age ( $p=0.02$ ), that had Program of Sexual Education in their school ( $p=0.00$ ), that started partner relationship ( $p=0.02$ ) and who have a better self perception of their knowledge in this topic ( $p=0.00$ ). Also, it was observed a greater knowledge in those young people with separate parents ( $p=0.01$ ).

**Conclusion:** The Programs of Sexual Education show that they are very successful in improving the knowledge in this topic, that makes necessary that all the student can have access to these Programs.

#### PERSONAL FACTORS ASSOCIATED TO THE USE OF CONTRACEPTIVES IN ADOLESCENT UNMARRIED WOMEN. EDID Project 991007 (90) - (154)

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**Objective:** To examine the personal factors that are associated to the consistent use of contraception in unmarried adolescents who are sexually active.

**Methodology:** This study included 914 unmarried adolescents who were sexually active. The group consists of individuals who

had asked for contraceptives confidentially to CEMERA. They were asked to fill out a questionnaire, which was previously designed, at the time of their first interview that was completed after successive interviews. The clinical files were reviewed individually to get information about type contraceptive method and the time of use. Two groups were compared: adolescents who used the method for more than 6 months, labeled as continuous users for the study, and adolescents that used less than 6 months, labeled as discontinuous users. Personal and partner variables were selected for comparison for both groups.

**Results:** The age at which sexual activity is initiated, schooling, activity, academic aspirations, number of sexual partners, previous use of contraception, did not show differences for the groups. However, the analysis of the type of method used previously did show a difference. The continuous users are in greater proportion users of condoms and oral contraceptives, at they own prior to their first visit to CEMERA, in comparison with the discontinuous users.

#### **FAMILIAL FACTORS ASSOCIATED TO THE USE OF CONTRACEPTIVES IN ADOLESCENT UNMARRIED WOMEN. EDID Project 991007 (91) - (154)**

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CEMERA, Faculty of Medicine, University of Chile. Chile

**Objective:** To examine the familiar factors that are associated to the consistent use of contraceptives in unmarried adolescents who are sexually active.

**Methodology:** This study included 914 unmarried adolescents who were sexually active. The group was asked about confidential use of contraceptive at CEMERA. They were asked to fill out a questionnaire, previously designed, at time of their interview that was completed with several interviews. The clinical files were reviewed to get information

about the type contraceptive method and the time of use. Two groups were compared: adolescents who used the method for more than 6 months, labeled as continuous users for the study, and adolescents that used fewer than 6 months, labeled as discontinuous users. 18 familial variables were selected for comparison, for both groups. The information was entered into a database and was analyzed both uni and bivariate.

**Results:** The results show that the legitimacy of own birth, the person who raised the child, quality of their family relationship, family communication, parental education level, family size, did not show differences for the groups. However, the analysis for the person who talk about sexual topics did show a difference. The continuous users talked about sexual topics with their partners in greater proportion in comparison with the discontinuous users.

#### **SEXUALITY AND PARTNER RELATIONSHIPS IN WOMEN WHO SUFFERED RAPE DURING THEIR CHILDHOOD AND ADOLESCENCE (92) - (164)**

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**Objective:** Sexuality and partner relationship in women who suffered rape during their childhood and adolescence by using a prospective cohort design were investigated.

**Methodology:** This study included 124 women who were located and interviewed several years after of the rape occurred. All of them got pregnant as a consequence of rape. It is important to note that all the questions were related to investigate their present situation. Personal and partner variables were selected for this study.

**Results:** 50% of these women are between 16 and 19 years old and 40% between 20 and 30 years old. 80% of them are single; 55% are

housewife. Only 17% are married and 14% are living in consensual union. 52% of these women started sexual activity of their own will. From this percentage, the half started sexual activity before a year. 63% of them had only one sexual partner but the 25%, had two and 12% had 3 or more sexual partners during this period. 33% of their partners are between 30 and 57 years old. 64% of the interviewed women said that their partner knew about their rape. From their partner that knew about rape, 72% reacted in a good way but 28% abandoned as a response to their raped condition. These women found partners that satisfied their material needs more than emotional needs. They did not succeed in having a complete, happy, emotional and sexual relationship.

**ALTERNATIVE EDUCATIONAL PROGRAM FOR ADOLESCENT MOTHERS: A CHILEAN EXPERIENCE. DID Project SO0219712 (93) - (174)**

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**Objective:** To evaluate the social impact of an alternativa educational model directed towards pregnant and adolescent mothers because of pregnancy and maternity have interrupted their studies.

**Methodology:** This is a study case-control study One control was assigned per case. The cases were 50 adolescent mothers who had successfully completed the school year in 1996, in the alternative educational program at the northern sector of Santiago. The control were adolescent mothers under primary care of the same sector, matched by age, civil state, parity and socioeconomic level, but not studying in the alternative program. They were required to answer 49 questions, open and closed, and also took the "Inventario de Comportamiento Interpersonal", ICI, standardized for the country, two years after

from the participation in the course. The information was entered to a database for analysis.

**Results:** The results show that the participants of the program, with greater frequency, continued with their education, they and their partners continued on the further education or work in greater proportion than the control group. They also showed the ability to better adapt to social situations. These variables are statistically significant,  $p=0.00$ . There were no observed differences between both groups of the analysis for a series of other personal and familial variables.

**CHARACTERIZATION OF PREGNANCY IN ADOLESCENTS IN THE PUBLIC HEALTH SERVICE OF VIÑA DEL MAR - QUILLOTA IN THE V REGION, CHILE (111) - (183)**

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The Chilean Public Health System has a program oriented to assist the adolescents health. It is based on the recognition and sponsoring of the various experiences developed in all different local areas throughout the country.

The Health Service of Viña del Mar - Quillota located in Valparaíso, V Región, has identified the need to know the local situation and factors associated to the occurrence of the pregnancy in adolescents, as a fundamental requirement to propose a model of promotional and preventional measures to produce an impact in the quality of life in this age group.

It was taken a sample of 201 pregnant adolescents who attended to the prenatal control in the local Health Centers. Trained people applied a questionnaire individually to each adolescent.

The result obtained was the identification of a profile of the pregnant adolescent



and a proposal of a model to support the settlement of the program based on the local area reality.

**EVALUATION OF AN ADOLESCENT COMPREHENSIVE HEALTH PROGRAM IN A PRIVATE CLINIC IN SANTIAGO CHILE (218) - (56)**

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Results after 6 months of functioning of an adolescent comprehensive health program are presented. 460 clinical records from youngsters aged 10 to 24 were analyzed.

All individuals (83.7% females) were cared by an interdisciplinary specialist team. Data was processed by EPINFO6. Statistical analysis: Ji2 and odds ratio ( $p < 0.05$ ).

**Results:** Mean age: 14.2 years (males), 16 years (females). Leading reasons for consultation: males: emotional disorders (23.5%), health control (15.7%), behavior problem (9.8%). Females: menstrual disorders (25.3%), emotional disorders (12.2%), contraception (10.5%). 20.4% of adolescents consulted by themselves; 67.3% with their mothers; 2% with their fathers. 56.5% consulted again. Risk behaviors: smoking (33%), alcohol intake (26.5%), sexual activity (27.9%). Smokers showed 17.7 times more consumption of alcohol than non smokers ( $8.47 < OR 37.6$ ). Alcohol consumption increased 5.17 times the likelihood of sexual relations ( $24.8 < OR 10.83$ ). Separated parents were not associated to alcohol consumption or sexual activity.

**Conclusion:** There is a high demand for adolescent comprehensive health care in a private clinic.

**EFFICACY EVALUATION OF GUIDELINES FOR ADOLESCENT HEALTH PREVENTION WITHIN A HOLISTIC HEALTH PROGRAM IN SANTIAGO (CHILE) (217) - (56)**

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Evidence suggest that most adolescent health problems are preventable and related to bahaviiior. Itis proposed to evaluate efficacy of anticipatory guides upon adolescents within a holistic were elaborated to promote healthy behaviors. (Alcohol and Drugs, Healthy Nutrition, Affection and Sexuality). They were validated by a self care survey to 8th graders of 2 public schools (n=181). One school was intervened with an educative session. 2 months later same survey was applied to evaluate íbefore and after” differences. Statisticl analysis. Ji2 ( $p < 0.05$ ).

**Result:** Globally there was no significative difference between schools. Separating by subject, there was significative difference only in nutritional aspects in intervened school (55.5% vs 76%  $p = 0.012$ ). To improve efficacy, a single subject was reinforced as unique intervention (Sexuality). It was observed an improvement of 20.4% in correct answers. We conclude that it is necessary to promote healthy habits through anticipatory guides, doing single subject interventions. Guides evaluation is a must.

**INTEGRAL ATTENTION PROGRAM FOR ADOLESCENTS WITH SUICIDAL BEHAVIOURS (219) - (100)**

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A medical and psychological integral program for adolescents and families who

consulted for suicidal behaviour of their youngsters is presented. This program includes different moments of intervention:

**Medical treatment.** Psychiatric evaluation, diagnosis and treatment.

Psychological evaluation and psychosocial support (family, school, peers and others).

Individual and group long term psychotherapy.

It is emphasized as fundamental:

A precise diagnostic process that covers psychopathological and structural aspects of adolescents and their families.

The multidisciplinary support given individually and as a group to adolescents and their families.

The need to sensitize educational and health teams, in order to make a precocious diagnosis of the problem and identifying risk factors.

The presentation is illustrated with clinical cases attended with an interdisciplinary approach in the Unit.

#### **RETROAREOLAR CYSTS IN ADOLESCENT FEMALES (220) - (126)**

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Retroareolar cysts result from the distention of an subareolar accessory mammarian gland that opens into a Montgomery tubercle.

This poorly understood situation has been described in postpubertal girls, but without long term follow up.

12 cases of girls aged 10 to 15 years diagnosed in our institution are presented.

The main complaint was pain and inflammation in 6 cases and palpable mass in 6 cases. All of them had a palpable retroareolar nodule on initial examination, the first 6 had also inflammatory changes of areola and surrounding skin compatible with a breast abscess.

On echotomography, retroareolar, 10 to 20 mm oval shaped cystic images with calcic sediment were showed. The cases with clinical inflammation had increased vascularization on doppler imaging.

The management was expectant in asymptomatic girls, antiinflammatory drugs and antibiotics were given for abscesses. Sonographic follow up showed gradual regression of inflammatory changes, with controls after 3 weeks, 3 and 6 months.

#### **MALE ADOLESCENTS CONSULTING IN A SPECIALIZED CENTER DEDICATED TO SEXUAL AND REPRODUCTIVE HEALTH (257) - (237)**

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Male adolescents constitute a group which rarely consults for sexual and reproductive health services, so that learning about their characteristics and needs, helps improving their attention. **OBJECTIVE:** Learning about the characteristics of male adolescents consulting in Centro de Medicina Reproductiva y Desarrollo Integral del Adolescente (CEMERA). **MATERIALS AND METHODS:** A retrospective review of all clinical records of male adolescents of 10-19 years old, consulting between years 1995-2000. **RESULTS:** The total number of adolescents was 77, with an average age of 14.7 years, and median age of 15; 53.2% of them was 15-17 years old. 29.9% was referred by another professional, 20.8% by a teacher, 16.9% by his parents or some other relative, 9.1 % by another adolescent 1.2% by another person and 22.1 % did not provide this information. They come accompanied by their parents (usually the mother) or another relative 55.8%; alone, 27.3% by a friend or girlfriend, 2.3% by other, 1.3% and no information was recorded in 13.0%. Main reason for consultation in the first visit was: Mental health disorders 35.1 %; biomedical

area 18.2%; problems in school 12.9%; area of sexuality (support, sexual orientation, dysfunction, sexual games) 10.4%; nutritional disorders 10.4%; family problems 7.8%; sexually transmitted diseases 1.3% and 3.9% says he ignores the reason. The average number of visits was 6.2 per adolescent ranging between 1 and 39, and some of them are still being controlled. Comment: The

results show that male adolescents do not attend health services on their own initiative. Most of them come with someone, but they show a good adherence to the Centre. It is confirmed that health needs must be addressed by a cross-disciplinary team, with a bio-psychosocial approach, and that records require further study and improvement.

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