GY-01

Celecoxib versus Mefenamic Acid in the Treatment of Primary Dysmenorrhoea

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ABSTRACT

Introduction: Dysmenorrhoea is a commonly encountered complaint to the general practitioner and gynaecology clinic. Primary dysmenorrhoea is menstrual pain which is not caused by any pelvic pathology whereas secondary dysmenorrhoea is caused by pathology of the pelvis such as endometriosis or pelvic inflammatory disease. Non-steroidal anti-inflammatory drugs (NSAIDs) have anti-inflammatory, analgesic and antipyretic properties. **Objective:** To evaluate the efficacy and tolerability of mefenamic acid and celecoxib in women with primary dysmenorrhoea and to compare the quality of life pre and post treatment. **Methods:** This was a prospective, randomised crossover clinical trial among sexually inactive female age 18-25 years with primary dysmenorrhea. All eligible women were asked to rate their pain score and answer a validated quality of life questionnaire (EQ-5D-3L) before and after consumption of each medication in two different menstrual cycles. The effectiveness of celecoxib and mefenamic acid in treating primary dysmenorrhea was compared with regards to reduction in pain score, need for medical leave and the need for rescue therapy. Drug tolerability was determined by comparing the occurrence of the side effect of both drugs. The quality of life score pre and post-treatment was assessed. **Results:** Mefenamic acid had a comparable effect to celecoxib in relieving primary dysmenorrhoea. They were equally tolerable. Both had similar effect in significantly improving quality of life. **Conclusion:** This study demonstrated that mefenamic acid and celecoxib has similar efficacy in improving pain score and quality of life of women with primary dysmenorrhoea.

GY-02

The Reliability and Validity of Malay Version of Polycystic Ovarian Syndrome Health Related Quality of Life Questionnaire (MAL-PCOSQ)

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ABSTRACT

Background: The Polycystic Ovary Syndrome health related Questionnaire (PCOSQ) is a reliable instrument for measuring the health-related quality of life (HRQoL) in women with polycystic ovary syndrome (PCOS). The aim of this study was to develop a Malay version of PCOSQ (Mal-PCOSQ) to evaluate the HRQoL of Malaysian women with PCOS and to test its reliability and validity. **Methods:** Participants were women who were diagnosed with PCOS attending the gynaecology clinic. Reliability was determined by internal consistency using Cronbach's coefficient alpha and test-retest reliability using intra-class correlation coefficient. Validity was assessed through convergent and discriminant validity. Examining the correlation between similar content on the Mal-PCOSQ and the Short Form 36 version 2 (SF36v2) assessed convergent validity. Whereas the discriminant validity was assessed using the known groups comparison. **Results:** Cronbach's coefficient alpha was over 0.70 for total scale and over 0.60 for each subscale. Known groups comparison support its discriminant validity whereby the Mal-PCOSQ differentiated well between sub-groups of women who differ in PCOS specific symptoms. Convergent validity was consistent with a good positive correlation between related subscales of the two instruments. Women with PCOS in Malaysia scored lowest for weight (3.74) and infertility (3.41) domains indicating worse health in these domains. Body hair (5.42) was the least troublesome for the local population. **Conclusion:** The Mal-PCOSQ is a reliable and valid tool to assess the health-related quality of life among local population. It can be used to objectively assess the HQoL of Malaysian women with PCOS and evaluate their responsiveness to treatment modalities.