Univerza v Mariboru
Medicinska fakulteta

UČNI NAČRT PREDMETA / COURSE SYLLABUS			
Ime predmeta:	**Tuboperitonealna neplodnost**		
Course title:	**Tuboperitoneal Infertility**		
Študijski program in stopnja Study programme and cycle	**Študijska smer Study option**	**Letnik Year of study**	**Semester Semester**
Biomedicinska tehnologija/3. stopnja		**2**	**3 ali 4**
Biomedical Technology/3rd Degree			

Vrsta predmeta (obvezni ali izbirni) / Course type (compulsory or elective)	Izbirni Elective
Univerzitetna koda predmeta / University course code:	

Predavanja Lectures	**Seminar Seminar**	**Vaje Tutorial**			**Klinične vaje Clinical training**	**Druge oblike študija Other forms of study**	**Samost. delo Individual work**	**ECTS**
		10						
15	**20**	**AV**	**LV**	**RV**			**135**	**6**

Nosilec predmeta / Course coordinator:	Izr. prof. dr. Milan Reljič

Jeziki /Languages:	**Predavanja / Lectures:**	Slovenski /Slovenian
	Vaje / Tutorial:	Slovenski /Slovenian

Pogoji za vključitev v delo oz. za opravljanje študijskih obveznosti:	**Prerequisites for enrolling in the course or for performing study obligations:**

Vsebina (kratek pregled učnega načrta):	**Content (syllabus outline):**
Vsebina študijskega predmeta Tuboperitonealna neplodnost zajema proučevanje novih metod za ugotavljanje in zdravljenje neplodnosti, ki je posledica poškodbe jajcevodov in okolišnjega peritoneja. Študij bo predstavljal povezavo med kliničnim delom, kliničnim znanstvenim raziskovanjem ter novimi spoznanji sodobnih diagnostičnih preiskav in zdravljenja. Poudarek bo predvsem na naslednjih področjih: • Etiologija in prevalenca tuboperitonealne neplodnosti. • Vloga spolno prenosljivih mikroorganizmov pri etiologiji neplodnosti • Preventiva tuboperitonealne neplodnosti • Diagnostične metode za ugotavljanja tuboperitonealne neplodnosti	The study programme will be based on lectures covering new methods in diagnostics and management of infertility, caused by damaged tubes and surrounding peritonea. The studies will represent a connection between clinical work, clinical scientific research and new knowledge acquired by up-to-date diagnostic investigation and treatment. The emphasis will be above all on the following topics: • Etiology and prevalence of tuboperitoneal infertility • The role of sexual transmitted disease in the etiology of infertility • Prevention of tuboperitoneal infertility • Diagnostic methods for evaluation of tuboperitoneal infertility

• Senzitivnost in specifičnost diagnostičnih metod za ugotavljanja tuboperitonealne neplodnosti • Pomen nekaterih novejših metod pri ugotavljanju tuboperitonealne neplodnosti • Transvaginalna hidrolaparoskopija – možnosti in omejitve. • Operativna terapija tuboperitonelne neplodnosti • Dejavniki, ki vplivajo na uspešnosti operativne terapije • Postopki zunajtelesne oploditve • Postopki zunajtelesne oploditve ali operativna terapija za zdravljenje tuboperitonelne neplodnosti • Postopki zunajtelesne oploditve v naravnem ciklusu in zdravljenje tuboperitonealne neplodnosti • Vpliv hidrosalpingsov na zanositev v postopkih zunajtelesne oploditve	• Sensitivity and specificity of various diagnostic tools in tuboperitoneal infertility • The role of some new methods in evaluation of tuboperitoneal infertility • Transvaginal hydrolaparoscopy- possibilities and limitations • Surgical treatment of tuboperitoneal infertility • Prognostic factors of tubal surgery • In-vitro fertilization • In-vitro fertilization or surgery for the treatment of tuboperitoneal infertility • In vitro fertilization in natural cycles and management of tuboperitoneal infertility • Influence of hydrosalpinges on conception in in-vitro fertilization cycles

Temeljni literatura in viri / Reading materials:

- Gomel V. The place of reconstructive tubal surgery in the era of assisted reproductive techniques. Reprod Biomed Online. 2015 Dec;31(6):722-31. doi: 10.1016/j.rbmo.2015.09.010. Epub 2015 Sep 21.
- Practice Committee of the American Society for Reproductive Medicine. Role of tubal surgery in the era of assisted reproductive technology: a committee opinion. Fertil Steril. 2015 Jun;103(6):e37-43. doi: 10.1016/j.fertnstert.2015.03.032. Epub 2015 May 6.
- Dun EC, Nezhat CH. Tubal factor infertility: diagnosis and management in the era of assisted reproductive technology. Obstet Gynecol Clin North Am. 2012 Dec;39(4):551-66. doi: 10.1016/j.ogc.2012.09.006.
- Daniilidis A, Balaouras D, Chitzios D, Theodoridis T, Assimakopoulos E. Hydrosalpinx: Tubal surgery or in vitro fertilisation? An everlasting dilemma nowadays; a narrative review. J Obstet Gynaecol. 2017 Jul;37(5):550-556. doi: 10.1080/01443615.2017.1287685. Epub 2017 Mar 21.
- Johnson N1, van Voorst S, Sowter MC, Strandell A, Mol BW. Surgical treatment for tubal disease in women due to undergo in vitro fertilisation. Cochrane Database Syst Rev. 2010 Jan 20;(1):CD002125. doi: 10.1002/14651858.CD002125.pub3.
- Reljic M. Management of tubal block (tubal infertility). V: PANCHAL, Sonal (ur.), KUPEŠIĆ, Sanja (ur.). Donald school texbook of human reproduction and gynecological endocrinology. 1st ed. New Delhi; London; Panama: Jaypee Brothers Medical Publishers. cop. 2019, str. [85]-90.

Cilji in kompetence:	**Objectives and competences:**
Predmet omogoča slušatelju celovit pregled in nekatera poglobljena znanja s področja neplodnosti. Namen predmeta je pridobiti širše znanje in razumevanje etiologije, diagnostike in terapije tuboperitonealne neplodnosti. Slušatelji morajo obvladati različne diagnostične postopke in njihovo racionalno uporabo, obenem pa morajo tudi razumeti osnovne principe operativnega zdravljenja in zdravljenja s postopki zunajtelesne oploditve.	The study subject offers to a student a comprehensive review and some extensive knowledge about the field of infertility. The goal of the study programme is to acquire a broad knowledge and understanding of the etiology, diagnostics and therapy of the tuboperitoneal infertility. Students should be able to use various diagnostic procedures and their rational distribution; however, they should also understand the basic principles of surgical therapy and therapy with in vitro fertilization.

Predvideni študijski rezultati:	Intended learning outcomes:
Znanje in razumevanje: Kandidat mora po zaključku predavanj in vaj obvladati v programu zastavljene cilje.	**Knowledge and understanding:** After absolving the lectures and practical work the candidate has to present knowledge that is defined in the program.
Prenosljive/ključne spretnosti in drugi atributi: Odvisno od raziskovalnega projekta. Poznavanje osnovnih diagnostičnih metod v medicini.	**Transferable/key competences and other abilities:** Depends on the research project. Knowledge of basic diagnostic methods in medicine.
Metode poučevanja in učenja:	**Learning and teaching methods:**
Predavanja Seminarji (pod vodstvom mentorja) Vaje (praktične vaje) Samostojno delo	Lectures Seminars (with collaboration of the mentor) Tutorial (practical work) Individual work

Načini ocenjevanja:	Delež (v %) / Share (in %)	Assessment methods:
Način (pisni izpit, ustno izpraševanje, naloge, projekt)		Method (written or oral exam, coursework, project):
Ustni izpit	**50 %**	Oral examination
Seminarska naloga	**50 %**	Course work

Reference nosilca / Course coordinator's references:

RELJIČ, Milan, KNEZ, Jure, KOVAČ, Vilma, KOVAČIČ, Borut. Endometrial injury, the quality of embryos, and blastocyst transfer are the most important prognostic factors for in vitro fertilization success after repeated unsuccessful attempts. Journal of assisted reproduction and genetics, ISSN 1573-7330, 2017, vol. 34, issue 6, str. 775-779. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5445053/pdf/10815_2017_Article_916.pdf, doi: 10.1007/s10815-017-0916-4. [COBISS.SI-ID 6090303], [JCR, SNIP, WoS do 11. 8. 2019: št. citatov (TC): 9, čistih citatov (CI): 9, čistih citatov na avtorja (CIAu): 2.25, Scopus do 29. 8. 2019: št. citatov (TC): 9, čistih citatov (CI): 9, čistih citatov na avtorja (CIAu): 2.25] kategorija: 1A1 (Z, A', A1/2); uvrstitev: SCI, Scopus, MBP; tip dela je verificiral OSICM točke: 25, št. avtorjev: 4

RELJIČ, Milan, POROVIĆ, Admir. Maternal serum levels of angiogenic markers and markers of placentation in pregnancies conceived with fresh and vitrified-warmed blastocyst transfer. Journal of assisted reproduction and genetics, ISSN 1573-7330, 2019, vol. 36, iss. 7, str. 1489-1495. https://link.springer.com/article/10.1007/s10815-019-01484-z, doi: 10.1007/s10815-019-01484-z. [COBISS.SI-ID 6677055], [JCR, SNIP, WoS do 9. 8. 2019: št. citatov (TC): 0, čistih citatov (CI): 0, čistih citatov na avtorja (CIAu): 0, Scopus do 7. 6. 2019: št. citatov (TC): 0, čistih citatov (CI): 0, čistih citatov na avtorja (CIAu): 0] kategorija: 1A1 (Z, A', A1/2); uvrstitev: SCI, Scopus, MBP; tip dela je verificiral OSICM točke: 51.14, št. avtorjev: 2

RELJIČ, Milan, KNEZ, Jure. Predicted luteal phase length has no influence on success of vitrified-warmed blastocyst transfer in natural cycle. Journal of ovarian research, ISSN 1757-2215. [Online ed.], 2018, [Vol.] 11, f. [1]-5, ilustr. https://ovarianresearch.biomedcentral.com/track/pdf/10.1186/s13048-018-0436-6, https://doi.org/10.1186/s13048-018-0436-6. [COBISS.SI-ID 6421567], [JCR, SNIP] kategorija: 1A3 (Z); uvrstitev: SCI, Scopus, MBP; tip dela je verificiral OSICM točke: 38.79, št. avtorjev: 2