between the two groups (15.76±2.00 mm, 14.27±2.04) TPO-Ab+ & TSH <2.5 group is significantly higher than the TPO-Ab+ & TSH ≥2.5 group, and the difference was statistically significant (P<0.05). (III) TPO-Ab– grouping and TSH results: there was no statistical difference between research group and control group with the general information, super ovulation scheme, the number of eggs, super ovulation, fertilization rate, portable embryos for several days, the number of embryos, the transplantation intrauterine membrane thickness, T3, T4, pregnancy rate, miscarriage rate. High quality embryo rate between the two groups (58.19%, 52.19%) TPO-Ab– & TSH <2.5 group is significantly higher than the TPO-Ab– & TSH ≥2.5 group, the difference was statistically significant (P<0.05).

Conclusions: Thyroid peroxidase antibody positive and high thyroid stimulating hormone have negative effects on IVF-ET ending, for TPO-Ab positive and TSH acuity 2.5 uiu/mL before receiving IVF-ET in patients with thyroid function should be adjusted to IVF-ET.

Keywords: TPO-Ab; TSH; *in vitro* fertilization embryo transfer; abortion; pregnancy

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AB078. Association between overactive bladder and peri-menopause syndrome: a cross-sectional study of female physicians in China

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Objective: To determine the detailed association between overactive bladder (OAB) and peri-menopause syndrome (PMpS) in Chinese female physicians of peri-menopausal age.

Methods: Data for this study were collected by administering questionnaires eliciting general information (perimenopausal symptoms and OAB status) to middle-aged female physicians, from the directly affiliated three hospitals of Peking University in China. We used the overactive bladder symptom score (OABSS) to verify the symptoms of OAB and the modified Kupperman menopausal index (KMI) to assess PMpS.

Results: Three hundred and fifty-one questionnaires were finally evaluated. The average age was 47.1±5.4 years. Overall, 7.4 % of respondents had OAB and 22.6% had PMpS. There was a significant positive correlation between the severity of OAB and prevalence of OABand PMpS. The prevalence of OAB in women with PMpS (KMI >15) was significantly increased (18.99% *vs.* 4.44%; P=0.000). The average OABSS in women with PMpS was 2.67±2.15, compared with 1.46±1.50 in women without PMpS. The average KMI score in women with OAB was 16.04±10.1, compared with 9.50±8.13 in women without OAB (P=0.000). Multivariate logistic regression analysis results showed that only BMI and PMpS were independent risk factors for OAB.

Conclusions: In China, female physicians with menopausal symptoms tend to have a higher prevalence of OAB and more severe symptoms of OAB.

Keywords: Peri-menopause syndrome (PMpS); modified Kupperman menopausal index (KMI); overactive bladder (OAB); overactive bladder symptom score (OABSS); China; female physicians

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