MATERNAL RISK FACTORS FOR RETINOPATHY OF PREMATURITY - A POPULATION-BASED STUDY

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Objective: Evaluation of possible perinatal risk factors for retinopathy of prematurity (ROP).

Methods: An ophthalmological study of 227 premature infants was performed. Their gestation age (GA) ranged between 26 and 35 weeks and their birth weight (BW) between 850 and 2500 grams. ROP was revealed in 85 infants. The group of mothers of the infants studied comprised 79 women (there were 6 twin deliveries). Prospective and retrospective data were collected from the medical records of antenatal and neonatal units. Well known statistical methods including correlation analysis, chi-square test, Pirson's test were applied to determine the most important predicting maternal factors for ROP development.

Results: The analysis of maternal risk factors indicated their different significance for ROP development. ROP high risk factors appeared to be related to low GA (under 32 wk gestation) $(r^\wedge 0,48)$, complications of the current pregnancy (sub-and decompensated anemia, chronic feto-placental deficiency, chronic intrauterine fetal hypoxia) $(r=0,42)$ and labor complications (pathologic maternal hemorrhage over 400 ml) $(r=0,40)$. Relative fetal risk to be noted include maternal extragenital pathology, threatened abortion, late gestosis of stage 11-111 severity, gestation pyelonephritis.

Conclusions: Risk factors of ROP development are likely to be numerous and nonspecific, but at risk pregnancy is considered to be one of factors contributing to ROP onset.

DIAGNOSIS OF BACTERIAL VAGINOSIS IN PREGNANTS

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Objective: The aim of the research is the investigation of the microbiological characteristics of bacterial vaginosis (BV) in pregnant women.

Methods: In this work the results of examination of 94 pregnants with BV are presented.

Results: Abundant milky homogeneous vaginal discharges with the characteristic odor of spoiling fish have been noted in 86,2 % women with BV, moderate - in 13,8 %. During vaginal examination there were no any inflammatory changes in vagina of most women. Hyperemia have been noted in 16,4 % patiens, pruritus - in 18 %, disuria in 8,6 % cases. A vaginal pH of women with BV was greater than 4,5 (4,5-7,1) and amine test was positive in 100 % cases. An 14,8 % cases an amine test was determined (+), in 40,8 % - (++) in 44,4 - (+++). The signs of BV revealed clue cells by vaginal microscopia - in 100 % patients, absence of leukocytes massive quantity of microorganisms with predominance of Bacteroides species, Mobiluncus species, Gardnerella vaginalis and absence of Lactobacillius.

The cultural examination of patients with BV have showed the growth of 6-8 types of microorganisms with predominance of obligate anaerobic bacteria in a very high titer $(10^{10} -10^{11}$ COE/ml). There were no lactobacillius in 59 % women with BV, in 41 %- their titres were very low.

Conclusion: So, the most correct diagnosis of BV in pregnants must be based on the comparison of microbiological, microscopia results and clinical data.