PROPHYLAXIS OF PETOPLACENTAL INSUFFIENCY IN THE 1 TRIMESTER OF PREGNANCY

Bashmakova N.V., Sevostyanova O.Ju., Mitseva S.B.

Urals Institute of Maternity and Childhood Care, Ekaterinburg, Russia

It is known that permanent threatening abortion in the 1 trimester is the reason of early fetoplacental insufficiency and fetal intrauterine grouth retardation.

Aim: To evaluate the possibility of dydrohesterone use for prophylaxis of fetoplacental insufficiency in women with the history of habitual abortion.

Methods: Clinical, hormonal, histological, ultrasound and doppler examination, mathematical analysis. Object: 32 women in the 1 trimester of pregnancy, from the risk groups for miscarriage.

Results: Decreased concentrations of fetoplacental complex hormones were registered in 40,6% of women without signs of threatened abortion. In other cases symptoms of permanent threatened abortion were diagnosed. Markers of urogenital infection were revealed in 46,9%.

Treatment of threatened abortion and hormonal disbalance correction with dydrohesterone were held according to standard scheme together with symptomatic therapy. Pregnancy progressed in 91% of cases. Normal hormonal status was shown in 77,7% of women and symptoms of threatened abortion disappeared in 90,6% of cases. Fetoplacental insufficiency was not diagnosed or was compensated in 90,7% of women. Conclusion: Use of dydrohesterone in complex therapy of threatened abortion in 1 trimester helps to end the threat of abortion, to normalize hormonal status and it is effective in the prophylaxis of primary fetoplacental insufficiency.

STATE OF CENTRAL HEMODINAMIC AS RESULT OF RESPIRATORY DYSTRESS SYNDROM (RDS) IN PREMATURE INFANTS

Batylova T.V.

D.O. Ott Institute of Obstetrics and Gynecology RAMS, St. Petersburg, Russia.

Objective. To reveal a specialties of central hemodinamic in development respiratory disorders in premature infants.

Methods. 30 newborns 29-36 week of gestation were examined. No clinical manifestation of respiratory insufficiency in 12 infants. RDS was occurred in 18 infants. Appar score criteria was 5-6. Echocardiography were performed at the real time scanner "Alloka -680". Blood pressure were measured by oscillometric method used by blood pressure monitor "EME" (England). Po₂, Pco₂ partial pressure were measured by transcutan control system "Radiometr" (Denmark).

Results. Three types of hemocirculation were revealed: hyperkinetic, hypokinetic, normokinetic. Hyperkinetic type was dominated in 34-week gestation infants. Most evident changes were exposed in infants there had hypokinetic type. Persistent pulmonary hypertension was observed in first hours of life. Rapid increasing cardiovascular insufficiency are followed by this changes.

Conclusions. Results of investigation evident about early involvement cardiovascular system in pathological process and allowed to understand RDS pathogenesis in premature infants.