
ANEMIA IN PREGNANTS WITH RECURRENT MISCARRIAGE

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Objective: to make a comparison of pregnancy course and terminations between pregnant with and without anemia. Level of hemoglobin lower than 110 g/l was a criterion of anemia. Retrospective analysis of archives files of 152 pregnant with recurrent miscarriage included character of clinic & somatic status, menstrual function, reproductive history, pregnancy course & termination, state of newborns. 80 anemic pregnant treated with iron & vitamins formed the main group. The control group consisted of 72 pregnant without anemia.

Results. The main group differed from the control with age ($p < 0,05$) : $32,3 \pm 0,6$ and $30,5 \pm 0,6$ years; number of pregnancies ($p < 0,05$): $5,3 \pm 0,2$ and $4,6 \pm 0,2$; menstrual days ($p < 0,01$): $5,3 \pm 0,2$ and $4,7 \pm 0,1$ correspondingly. It revealed that anemic pregnant twice more often had cardiovascular diseases, twice rare- hyperandrogenia. Placental pathology (10 & 4,4%), bleeding (9,6 & 0%), manual examination of postnatal uterus (15 & 3,7%) and premature labors twice more frequent were observed in the main group than in the control one. Apgar score was significantly lower ($p < 0,01$) in newborns from the anemic mothers: $7,0 \pm 0,2$ - $8,1 \pm 0,1$ and $7,6 \pm 0,1$ - $8,6 \pm 0,1$.

Conclusions: Anemia in spite of its treatment has influence on the pregnancy course and its termination. Probably, it is necessary to search new approaches for examination and treatment of anemic pregnant.

N-3 POLYUNSATURATED FATTY ACIDS IN HIGH RISK PREGNANCY AND LIPID SPECTRUM CHANGES

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Objective: to study the changes in lipid levels in high-risk pregnant supplemented with n-3 polyunsaturated fatty acids (PUFA).

Design: Prospective, randomised, placebo-controlled trial. Picasol (2.7 g of n-3 PUFA/daily, N=31(Denmark) or placebo (olive oil, N=29) were administrated during II-III trimesters of pregnancy. Before administration of n-3 PUFA/placebo and in the end of III trimester serum concentration of the following parameters of lipid spectrum: total triglycerids, total cholesterol, cholesterol of high (HDL), low (LDL) and very low (VLDL) density lipoproteins had been measured. Clinical part of the study was partially performed in the frameworks of the Fish-oil Trial in Pregnancy (FOTIP).

Results: There were no significant differences in lipids level between groups in baseline measurement. In the end of III trimester we found significant differences between two groups in triglycerids and VLDL-cholesterol concentrations ($1.7 \pm 0,4$ mmol/L and 0.8 ± 0.2 mmol/L in Picasol group vs 2.4 ± 0.5 mmol/L and 1.1 ± 0.2 mmol/L in placebo group, respectively). We did not find significant differences in blood pressure indices and hypertensive disorders incidence between groups. In the same time, frequency of signs of placental insufficiency in placebo group was significantly higher, than in Picasol group.

Conclusions: We suggest that observed changes in triglycerids and VLDL-cholesterol concentrations in prophylactic administration of n-3 PUFA can be conditioned by preventive effect on endothelial dysfunction and by possible changes in expression of angiogenic growth factors in placental tissues. Further investigations of placental growth factors will allow to evaluate their role in the genesis of endothelial dysfunction and possible mechanisms of its correction.