
THE POSSIBILITIES OF IMPROVEMENT OF POST-PARTUM CONTRACEPTION

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Objective: *Our purpose was to improve the system of post-partum contraception in agricultural regions.*

Methods: *Individual work on choice of a post-partum contraceptive method had been conducted during the pregnancy and after delivery among 250 women, residents of typical agricultural region of Central Russia.*

Results: *After delivery 7,5% of patients used surgical sterilization, 20,8% - intrauterine devices (IUD); 2,5% - hormone contraceptives, 54% - other contraceptive methods and 9,2% of parturient reject any contraceptives.*

Surgical sterilization was carried out on 1-4 days after vaginal delivery via mini laparotomy under intravenous anesthesia without any immediate and remote complications. Insertion of IUD's was performed on 5-7 days after delivery in absence of clinical, bacteriological, ultrasound and histological (in placenta) features of inflammatory pelvic diseases. Medical complications during 1 year after inserting IUD were registered in 3,6% of cases (2,4% - inflammatory pelvic processes; 1,2% - menorrhagia). Progestagens (pills and injectables) were used as hormone contraceptives. Patients began its use in 1 month after delivery. The related medical complications were menorrhagia with the rate 2,9%. Developed system of post-partum contraception resulted in 4,5% reducing of frequency of unplanned pregnancy during the 1st year after delivery.

Conclusion: *The developed system of post-partum contraception permits to reduce the frequency of unplanned pregnancy during the 1st year after delivery. However, the significant quantity of women, residents of agricultural regions are not ready yet to use modern contraceptive technologies (especially sterilization and hormones) in post-partum period and adopted other contraceptive measures or use no contraception at all, what led to high level of artificial abortions.*

EFFECT OF INTRAOPERATIONAL REINFUSION OF BLOOD ON LACTATIONAL FUNCTION OF PARTURIENTS AFTER OPERATION OF CESAREAN SECTION

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Objective: *To study the effect of intraoperational reinfusion on the onset and duration of lactation in parturient after an operation of cesarean section.*

Methods: *The main group included 15 patients who underwent intraoperational reinfusion of blood. Blood loss was 1109.0 +/- 129.9 ml. The controls consisted of 10 patients after cesarean section, blood loss of 700.0 +/- 106.0 ml, which was filled up with physiological, and plasma substitutional solutions of 880.0 +/- 250.0 ml. The methods of determination the quantity of milk and prolactin per day were used for the assessment of lactational function of parturient of both groups in addition to the routine ones.*

Results: *Lactation of parturient after abdominal delivery is characterized by late and prolonged onset. In the use of plasma substitutional preparations we noted a decrease of general protein by 20%, meanwhile after blood reinfusion it decreased by 10%. Anemia was found in 72% and 15%, respectively. There were no reliable differences in prolactin basal levels. Hypogalactia was detected in comparison it was 527 +/- 44 ml. The duration of breast-feeding was 1.3 +/- 0.5 months, in the group after intraoperational reinfusion it was 4.7 +/- 1.2 months.*

Conclusion: *Thus, we revealed a positive effect of intraoperational blood reinfusion in the quantity of breast milk and duration of lactation.*