

---

## **ROLE OF CLINICALLY CONTRACTED PELVIS IN THE STRUCTURE OF INDICATIONS FOR CAESAREAN SECTION**

---

Chernukha E.A., Volobujev A.I., Puchko T.K., Kurinov S.B.

Scientific Center for Obstetrics, Gynecology and Perinatology RAMS, Moscow, Russia

*Pregnant women with the contracted pelvis belong to the «high risk» group of perinatal pathology. Anatomically and clinically contracted pelvis is one of the frequent indications for cesarean section.*

*With an eye to determinate the role of clinically contracted pelvis in the structure of indications for caesarian section, annual reports of the Unit of labor management in women with high risk of the Scientific Center for obstetrics, gynecology and perinatology of the Russian academy of medical sciences were analyzed for a period 1951 - 1998. It was showed that in 50s in the structure of indications for cesarean section the clinically contracted pelvis occupied the 1st place - 38,5%. In 60s a number of cesarean section, performed in the connection with clinically contracted pelvis decreased to 13,9%, in 70-e - to 8,8%. This is concerned to the improvement of diagnostics of contracted pelvis and refusal of «test» contracted pelvis delivery by obstetricians. In after years, due to penetration to the clinic of labor outcome prediction methods based on the digital scanning x-ray unit, the frequency of cesarean section for clinically contracted pelvis continued to decrease, and in 80s was 4,3%, in 90s - 2,1%. Therefore, improvement of contracted pelvis diagnostics, penetration of outcome of labor prediction methods and rational labor management in the patients with above pathology allow to reduce a number of cesarean sections, performed for clinically contracted pelvis.*

---

## **EXPEDIENCY OF PROPHYLACTIC USE OF FROZEN PLASMA IN PREGNANT WITH DISADAPTATION OF HEMOSTASE SYSTEM DURING CAESAREAN SECTION**

---

Chernuha E.A., Komissarova L.E., Babicheva T.V., Mourachko A.V.

Scientific Center for Obst., Gynec. and Perinat. RAMS, Moscow, Russia

**Objective:** *To evaluate necessity of frozen plasma use for prophylaxy of bleeding in patients with disadaptation of hemostase system during cesarean section.*

**Methods:** *I group consisted of 21 pregnant with disadaptation of hemostase system without plasmotransfusion and the II one - with prophylactic use of plasma during cesarean section. All patients were matched by age, indications for abdominal delivery. Volume of bloodloss was measured by protein levels in serum, Nelson's formula and it was approximately equal to  $923,9 \pm 83,1$  ml. Severe bleeding were absent in both groups.*

**Results:** *On the 1-st postoperative day an increase of hemostatic blood potential was noted in both groups (by 3,2 times and 3,5 times in I and II group, accordingly). On the III-V postoperative day hemostatic blood potential slowly decreased and returned to normal values on the VIIth postoperative day.*

**Conclusion:** *prophylactic use of frozen plasma in pregnant with disadaptation of hemostase system during cesarean section is not necessary.*