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## **INFLUENCE OF MILDRONATUM ON THE “MOTHER-PLACENTA-FETUS” SYSTEM CIRCULATION WITH DIFFERENT DEGREES OF ITS DISORDER**

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**Objective:** Investigation of the influence of Mildronatum on hemodynamics in the “mother-placenta-fetus” system with different degrees of its circulatory disorders in 21 women in the III trimester of pregnancy.

**Methods:** Dopplerometric study of the blood flow was performed in the umbilical artery (UmA), middle meningeal artery of the fetus and uterine arteries (UtA) before and after infusion 10 % solution of mildronatum in a dose of 5,0 ml.

**Results:** Administration of mildronatum at the I (SDR FVW UmA=3,98±0,21; IR = 0,74±0,01) and II (SDR FVW UmA = 4,1±0,29; IR = 0,75±0,01; SDR FVW UtA = 2,87±0,35; IR = 0,63±0,03) degree of the blood flow disorder resulted in normalization of fetoplacental blood flow in the UtA by 9 % with the II degrees of the disorder. A reliable decrease of SDR FVW in the UmA was observed (SDR FVW UmA = 7,18±1,52; IR = 0,83±0,04, SDR FVW UmA = 4,44±0,79; IR = 0,74±0,05 respectively) as well as normalization of the cerebroplacental ratio. Blood flow in the UtA did not change.

**Conclusions:** Mildronatum exerts favorable influence on pathological hemodynamic changes in the “mother-placenta-fetus” system, and its efficiency is maximum in cases of significant blood flow disorders.

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## **SEXUAL DEVELOPMENT OF GIRLS – SURVIVORS OF NEONATAL SURGERY AND INTENSIVE CARE**

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**Objective:** The study of sexual development of children is an actual task of pediatrics. In survivors of neonatal surgery and intensive care such studies are the initial point in designing the effective and goal oriented programs.

**Methods:** We've examined 15 girls aged 12-14 years, who underwent reconstructive surgery because of congenital anomalies and intensive care after asphyxia in early neonatal period. We used the method of somatoscopia according to the normal values proposed by I.M.Vorontzov in 1984.

**Results:** The integral index of sexual development in girls, who underwent reconstructive surgery and intensive care in the neonatal period is 64% lower compared with healthy peers. It's necessary to underline that the retardation in sexual development was more obvious in girls-survivors of neonatal surgery than in those girls, who underwent neonatal intensive care and this difference in retardation gradually increases with age. The data obtained in this study highly correlates with distribution of fat and the amount of lean body mass, and also with work capacity examined by the method of step-test.

**Conclusions:** Our studies demonstrate the decline of reproductive potential in girls, who underwent neonatal surgery and intensive care and this with no doubt influences their quality of life.