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## DIAGNOSIS OF PERSISTENT INFECTION PREGNANTS WITH HABITUAL ABORTION

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*To diagnose persistent infection we used transcervical chorion biopsy (generally accepted method) with the following bacteriology of bioplates of 70 patients with habitual abortion in 8-10 weeks of pregnancy.*

*As a result of our study we found that microorganisms of Mycoplasmataceae family play a grate role in genesis of abortion. The role of Mycoplasma discovering is  $28,4 \pm 5,8\%$ . Isolated Mycplasma lesion of chorion was found in  $11,7 \pm 4,2\%$  of cases and there was not found Mycoplasma in cervical canal of the uterus that confirm the persistent infection.*

*Thus, there was revealed a domination role of persistent Mycoplasma infection in patients with habitual abortion.*

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## DAILY MONITORING OF BLOOD PRESSURE OF PREGNANTS WITH GESTOSIS

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*We used daily monitoring of blood pressure at 60 patients with gestosis by Meditech – 04 (Hungary) for early diagnostic and control an effectiveness of treatment. Measurement of blood pressure has been made each 15 minutes day time and each 30 minutes at night.*

*In this time 70% of pregnants with edema had diastolic level of pressure as 90 mm Hg and more in 2 – 3 registered measurement that testily arterial hypertension and requires the hypotensive therapy. The effectiveness of treatment evaluated by decreasing of mean blood pressure (systolic and diastolic) to 3 – 4 mm Hg. Thus, daily monitoring of blood pressure is most informative method of early diagnostic and control the effectiveness of treatment in pregnants with gestosis*