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## PECULIARITIES OF CLINICAL COURSE, TACTICS OF CONDUCT AND THE OUTCOME OF PELVIC HEMATOMAS IN THE PUERPERAL PERIOD

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**Objective:** *Supravaginal hematomas make up about 20% of total quantity of postpartum hematomas. Peculiarities of clinical picture, tactics of management and the outcome in 25 cases (8 of them after cesarean section, 15 – spontaneous delivery, 2 – forceps delivery) are analyzed.*

**Method:** *The diagnosis is based on clinical symptoms and ultrasound scanning through abdominal wall and the vagina: in 18 patients – during the first 3 days and in 7 – on the 4th-14th postpartum day.*

**Results:** *Depending on localization of the source of hemorrhage and on the direction of hematoma spreading, certain symptomocomplex is formed. Typical kinds of hematomas are distinguished: paracervical, retrocervical, retrovesical and hematoma of the broad uterine ligament. Hematoma gradually resolved and symptoms stopped in 17 women; hematoma drained through the vagina or postoperative wound in 5; after suppuration it spontaneously evacuated in 3 cases (1 - into the rectum, 1 - into the vagina, 1 – into the urinary bladder).*

**Conclusion:** *A conservative conduct of pelvic hematomas to prevent infecting and suppuration is a method of choice. Operative treatment may be used only if there is an adequate access to or suppuration of the hematoma. Surgical inspection of the abdominal cavity is of great risk of the forced hysterectomy.*

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## AUTOMATIC BLOOD PRESSURE MONITORING DURING PREGNANCY

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**Objective:** *To study the haemodynamics parameters using 24-hours blood pressure monitoring during pregnancy.*

**Methods:** *We used 24-hours blood pressure monitoring in 109 pregnant women. Measurement of AP was fulfilled with the device “ABPM-02” (Hungary). The main group: 65 women with pregnancy complications (miscarriages and fetal hypoxia or hypotrophy), 44 women with normal pregnancy (control group).*

**Results:** *In the main group the frequency of arterial hypotension were half and twice higher than in control group (68% and 38% consequently). Day hypotension were noted in 10 (22,7%) patients of the main group and in 5 (29,4%) patients of control group; night hypotension - in 11 (25%) and 8 (47,1%); mixed hypotension in 23 (52,3%) and in 4 (23,5%) consequently. Normotension diagnosed in 12 (29%) and 25 (57%) patients consequently. The differences between two groups in frequency of hypertension conditions during pregnancy haven't been found.*

**Conclusions:** *Arterial hypotension is met in 2/3 of patients with miscarriages or fetal hypoxia in history and indicates the compensatory mechanisms of utero-placental complex disturbance. Early diagnostics of haemodynamics disturbances before clinical manifestation using 24-hours blood pressure monitoring will help to prevent the placental insufficiency and to form normal utero-placental complex.*