PRIMARY HERPES SIMPLEX VIRUS INFECTION IN PREGNANCY OUTCOMES

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Objective: *The study of herpes virus infection during pregnancy is necessary because of high rate of perinatal losses and birth of babies with severe brain damages. It's well known that most severe fetal diseases take place in the first episode of genital herpetic infection during current pregnancy.*
Methods: *We analized pregnancy histories of 12868 patients delivered in Center in 5 years period and selected only 6 cases with the confirmed first episode of genital herpes during current pregnancy.*
Results: *2 cases of pregnancy terminated by spontaneous abortion in 21 and 26 weeks of gestation. The both fetus had intrauterine growth retardation on 3-4 weeks and generalised herpetic infection. Morphological study of placents showed it's severe herpetic disease and decompensated form of placental insufficiency. In 4 cases - pregnancy teminated on the 32-40 weeks of gestation. Newborns died on the 7 th-40 th day of delivery. In all cases, morphological changes had been presented by local and diffuse herpetic meningoencephalitis and in one cases we always found revealed porencephalic cysts.*
Conclusion: *So, primary herpes virus infection is rare form of infection during pregnancy, but it can lead to severe perinatal outcomes.*

ABOUT OF SIGNIFICANS OF THE INDICATORS ENDOTELIAL DYSFANCTION IN EVALUATION OF THE CONDITION OF INTRAUTERINE FETUS IN TOXEMIA OF PREGNANCY

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Objective: *The aim of the present research was the verification of the dependence between of indicates of the intrauterine fetuses state and the marks of mothers endothelial dysfunction.*
Methods: *As the marks of the endothelial dysfunction in pregnant women was taken the number of circulating endoteliocytes, von Willebrand factor, tissular stimulator of plasminogen. The presence of hypoxia and fetal grow retardation was revealed by means of ultrasonography and Doppler analysis of maternal-fetal circulation. We studied 185 pregnant women with toxemia of pregnancy in various degrees.*
Results: *The results of the information processing of the data mode by tracing regressive analysis showed that possessing the indicators intravascular - platelet hemostasis of the pregnant women one can predict the presence of hypoxia and fetal growth retardation in following equations: Y=-0,6-0,003X1-0,01X2, where Y - hypoxia of fetus, X1 – von Willebrand factor (%) and X2 - presence of endotheliocytes in circulation (N/ml). Apgar^s score in the first minute after delivery corresponds to the equation: Y=7,64-0,018X1, in the fifth minute - Y=8,16-0,014X1, where X1 - is the number of circulating endoteliocytes.*
Conclusions: *The disturbance of maternal-fetal circulation the development of toxemia of pregnancy is caused to a considerable degree by the endothelial dysfunction.*