V.V. Abramchenko

## Mark evaluation scale of gestosis gravity degree

One elaborated the new mark evaluation scale of gestosis gravity degree with use of modern recommendations of the Worldwide health organization (WHO) and International hypertension society (1999) and the Scientific society for studying of arterial hypertonicity in Russian Federation (2000). According to mark sum one distinguishes gestosis of light f orm (0-12 marks), middle gravity gestosis (13-16 marks) and heavy gestosis (17 marks and more ones). Quantitative evaluation scale o f gestosis gravity degree allows unif y gestosis assess, make prognosis of gestosis course and determinate the treatment effectiveness.

V. G. Abashin, Yu. V. Tsveliov

Who was the first obstetrician in Russia?

It is rightly believed that the establishment of scientific obstetrics in our country was facilitated by the opening of "women's schools" (1757), the creation of Educational homes in Moscow (1764) and St. Petersburg (1771), the activities of the first Russian professor and "father of Russian obstetrics" Nestor Maksimovich Maksimovich-Ambodik. However, these transformations and the emergence of a domestic obstetric school could not arise out of nothing, out of nowhere. The basis for them was the activity of foreign and Russian doctors who worked in Russia at the beginning of the 18th century.

## T. A. Pluzhnikova

The use of the drug "duphaston" in women with a history of miscarriage to prepare for pregnancy and treat the threat of termination of pregnancy The aim of the study was to evaluat'e the use of the drug duphaston: 1) to prepare for an upcoming pregnancy in women with hyperandrogenism and insufficiency of the luteal phase of the cycle; 2) to treat the threat of termination of pregnancy in women with a history of miscarriage.

The use of duphaston in women suffering from miscarriage has confirmed its high efficiency both in preparation for pregnancy in patients with hyperandrogenism and insufficiency of the luteal phase of the menstrual cycle, and in the treatment of threatened abortion.

In 93.5% of women with a history of 100% fetal loss, it was possible to bring the pregnancy to delivery.