



Modern Obstetric Aspects of Prognosis and Management of Post-Term Pregnancy

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Resume: In accordance with the tasks of the scientific study, a survey of 120 pregnant women who are in the maternity ward and the department of pathology of pregnant women of the Regional Perinatal Center will be carried out. Of these, 40 women with a post-term pregnancy of 42 weeks or more (group 1), 40 women with a prolonged pregnancy (group 2) and 40 women with a full-term pregnancy at a period of 38-40 weeks, which ended in urgent spontaneous delivery (group 3).

Keywords: postponing pregnancy, preeclampsia, and bleeding, obstructive labor.

Relevance: great scientific and practical interest in obstetrics. Its relevance is expressed in a large number of cases of the disease, high perinatal mortality.

Many issues of this pathology have not yet been resolved. Until now, there is not even a clear definition of the very concept of post-term pregnancy. The issues of etiology, pathogenesis, diagnosis of this form of pathology have not been finally studied, there is no single point of view on the tactics of managing pregnancy and childbirth (Strizhakov A.N. stoavt., 2003; Savelyeva G.M. ., 2002; Bolshakova E.E., 1998; Timokhina T.F., 2003; Rand L., Robinson J.N., 2000; Alexander J.M., McIntire D.D., 2000).

The description of post-maturity and the scientific approach to this problem were determined in 1902, when H.Runge first described the signs of postmaturity (overmaturity) in a newborn (this syndrome was called Belentein-Runge syndrome). Later, the severity of postmaturity in the fetus and placental dysfunction were described by S. Clifford. With the progress of medical science and obstetrics, in particular, the concept of post-term pregnancy has undergone significant changes.

From the true (biological) prematurity as a pathological condition, when a child is born with signs of overmaturity, they began to distinguish the lengthening of pregnancy (chronological), its prolongation, necessary for the final maturation of the fetus (Bolshakova E.E., 1998; Chernukha E.A., 2007;).

In the light of the achievements of modern science on the essence of the mechanisms of occurrence and regulation of the contractile activity of the uterus, pregnancy prolongation began to be considered as the result of the interaction of many factors. The leading place in this complex chain belongs to the central nervous system, uterus and fetus.

The description of pregnancy overgrowth is found in ancient medical treatises, but the attitude of doctors to this pathology of pregnancy was different. So, Hippocrates believed that pregnancy could not last more than 10 lunar months.

The problem of post-term pregnancy does not cease to be relevant due to the large number of complications in childbirth. High frequency of delivery operations and perinatal mortality.

Of particular importance is the differential diagnosis of post-term and prolonged pregnancy, in which tactics should be different. To select an adequate tactics of pregnancy management with these pathologies, determining the readiness of the body of pregnant women for childbirth, including the condition of the cervix, plays a special role.

However, chronophysiological studies prove the presence of predictable, repetitive fluctuations in a certain range of the norm and / or deviations from it. In this regard, any study devoted to the study of the temporal organization of the functional system "mother-placenta-fetus" in late pregnancy may be useful for deciphering the mechanisms of the normal course of pregnancy and its postmaturity (Lipatov I.S. 2002; Nazhmidinova D.F. 2018).

Based on this, it is very important to study the chronophysiological patterns of initiating timely labor and the reasons for the lack of timely preparation of the cervix for childbirth, the analysis of the mechanical properties of its tissues by examining echoelastography and its correlation with the parameters that determine its maturity.

The softness of the cervix with echo-EG at full-term pregnancy indicates the maturity of the cervix when assessed on the Bishop scale and a greater likelihood of a successful outcome of labor or the effectiveness of labor induction. However, after reaching the full term, the absence of this indicator can be a diagnostic marker of overdue pregnancy and also evaluate the effectiveness of labor induction.

Echo EG in the study of the cervix to predict the risk of delayed delivery is a promising diagnostic method, a criterion for labor induction and also for evaluating its effectiveness, which will improve maternal perinatal outcomes and, accordingly, will improve the quality of medical care.

Purpose of the study: To develop a system of diagnostic and therapeutic measures in women with a post-term pregnancy for a reliable tactic of conducting the prenatal period and childbirth

Materials and methods: In accordance with the tasks of the scientific study, a survey of 120 pregnant women who are in the maternity ward and the department of pathology of pregnant women of the Regional Perinatal Center will be carried out. Of these, 40 women with a post-term pregnancy of 42 weeks or more (group 1), 40 women with a prolonged pregnancy (group 2) and 40 women with a full-term pregnancy at a period of 38-40 weeks, which ended in urgent spontaneous delivery (group 3).

Results : The incidence of post-term pregnancy was 2%. These patients commonly suffered from obesity. Chronic hypoxia, gestational anemia, gestational diabetes were among the most frequent complications of pregnancy. Women with post-term pregnancies had higher prevalence of premature rupture of membranes, abnormal labor, and cesarean sections while their newborns had higher birth weight and lower Apgar scores.

Table No. 1

<i>Labor</i>	<i>2020</i>	<i>2021</i>	<i>2022</i>	<i>Total</i>
<i>Total labor</i>	<i>1221</i>	<i>1311</i>	<i>1002</i>	<i>3534</i>
<i>Post-turn pregnancies</i>	<i>16(0,8%)</i>	<i>23(1,06%)</i>	<i>27(1,7%)</i>	<i>66(3,56%)</i>

It is planned to apply the results of research work on an outpatient, inpatient basis in obstetric practice, to introduce them into the curriculum in higher and secondary medical schools

The course of pregnancy prior to overmaturity is often complicated by morphological and functional disorders of the placenta, intrauterine hypoxia of the fetus and layering of preeclampsia. In childbirth, the frequency of obstructive labor, unsatisfactory progress of labor, bleeding, and a high frequency of operative labor are very high. Based on this, it is fundamentally important to study the chronophysiological patterns of initiation of timely labor and the reasons why the pregnancy is overdue.

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will be carried out. Of these, 40 women with a post-term pregnancy of 42 weeks or more (group 1), 40 women with a prolonged pregnancy (group 2) and 40 women with a full-term pregnancy at a period of 38-40 weeks, which ended in urgent spontaneous delivery (group 3).

To identify the criteria for differential diagnosis of a truly post-term and prolonged pregnancy and the choice of optimal methods for managing pregnancy and childbirth, the following will be carried out: a study of the premorbid background of women, a study in the dynamics of the level of adaptive hormones in the blood serum - estriol, progesterone, cortisol and blood electrolytes - the content of calcium and magnesium, determined optical density of blood serum. In addition, Echo-EG examination of the placenta and cervix, ultrasound of blood flow in the uterine and umbilical arteries with the determination of LMS and IR will be carried out.

Conclusions. Postterm pregnancy High risk of occurrence and perinatal complications As one of the solutions to this problem observing childbirth after 41 weeks of gestation, but the question of methods for diagnosing a post-term pregnancy and, accordingly, the significance of the contingent of women for representatives of the childbirth remains debatable to this day.

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