

$Z=-2,81$, $p=0,038$. При проведении ROC-анализа установлено, что значимым для выявления патологии эндометрия является соотношение объемов эндометрия/матки $>7,31$; чувствительность 77,27 (95% ДИ 54,6–92,1); специфичность 76,92 (95% ДИ 54,6–92,1, $+LR=3,35$ (95% ДИ 2,3–4,9), $-LR=0,18$ (0,02–1,5), $p=0,0001$.

Статистически значимым показателем патологии эндометрия при ультразвуковом исследовании органов малого таза является определение показателя соотношения объемов эндометрия и матки, для выявления патологии эндометрия является характерно соотношение объемов эндометрия/матки $>7,31$ ($p=0,0001$).

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THE ANALYSIS OF MANAGEMENT AND PREVENTION OF COMPLICATIONS IN DIABETES MELLITUS DURING PREGNANCY

Relevance. Gestational diabetes is an insulin resistance condition of maternal cells during pregnancy due to various placental hormones or insufficient production of insulin. It is more common in the second and third trimester. According to the literatures, the risk factors of gestational diabetes are overweight, physical inactivity, polycystic ovarian syndrome, hypertension, past history of gestational diabetes mellitus, previous childbirth with weight 4000 g and above, unexplained perinatal loss, polyhydramnios. This has become one of the most common problems in pregnancy.

Research objectives. Analysis of complications caused by gestational diabetes during antepartum, intrapartum, postpartum and fetal health.

Research methods. We analyzed 40 cases of women with gestational diabetes and their case histories.

Results and its discussion. The average age of patients was 30 ± 2 years. According to the modern literature, the most observed complications of gestational diabetes are the increased risk of hypertensive disorders (preeclampsia and eclampsia), sudden intrauterine death, increased risk of

infection, increased cesarean section deliveries, traumatic delivery, non-progressive labor, vaginal tears. Based on our study, we noticed that 62.5% of patients had pathology of respiratory system, 47.5% hematological problems, 45% renal pathology, 35% ophthalmologic pathology, 32.5% diseases of endocrine system, 25% cardiovascular pathology.

In this study it was found that placental insufficiency (32.5%), threatened miscarriage (25%) and edema (25%) appears to be most prevalent nowadays. The average term of pregnancy was 273 days. 41% of the patients had vaginal delivery and 59% had cesarean section. Among indications for planned cesarean sections, which were performed in 29% of the cases we noticed eclampsia and preeclampsia (10%), scar on uterus after previous cesarean section (17%), myopia of third degree (52%), malpresentation (breech, shoulder, transverse), twins (3%). Among indications for emergency cesarean section (71%) are poor contractions (25%), premature rupture of membrane (25%), placental detachment (8%). All newborns of our examined patients were with the Apgar score 8/8 and 8/9. Their average weight was 3.5 kg, It is a sign of compensatory stage of placental insufficiency and effectively of our conservative treatment. After birth and postoperative period in all patients was without complications. Diabetes mellitus in all the patients were compensatory and the treatment included diet, control of analysis (blood sugar, heart rate of fetus, dopplerometry), consultation of endocrinologists.

Conclusion: Thus, our research noticed that diabetes mellitus may complicate the cause of pregnancy and labor. Placental insufficiency, edema, preeclampsia, poor contractions during labor are the most common complications of diabetes mellitus. The therapy at the right time and preventive diagnosis of different complications help us to avoid emergency situations and to have vaginal delivery in time with healthy newborn.
