

Conclusion. Given the high frequency of risk for HHS, which may result in prolonged neurological disorders of the patient, it is necessary to identify a risk group for HHS and begin treatment measures at a glucose level above 28 mmol /L: reducing the insulin dose, monitoring the reduction of glucose level (no more than 5,5 mmol/hour) and infusion of a 10% glucose solution.

ЛИТЕРАТУРА

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PREECLAMPSIA AS AN IMPORTANT PROBLEM OF MODERN OBSTETRICS

Jayasinghe Dona Dinu Irandi Jayasinghe,
Jayasinghage Dona Vinu Dihansa Jayasinghe,
Mawella Kankanamge Wasana Prasadi, Shandraraj Kovarthan

Grodno state medical university

Научный руководитель: Smalei N. A.

Introduction. Preeclampsia is a serious hypertensive disorder during pregnancy, typically emerging after the 20th week, marked by high blood pressure and proteinuria. It significantly affects maternal and fetal health, necessitating early identification and management. Factors contributing to its onset include abnormal placentation and genetics. Symptoms range from mild headaches to severe abdominal pain. The frequency of preeclampsia varies globally, affecting approximately 2-8% of pregnancies. In Belarus, the prevalence is similar, with estimates around 4-6%. Factors influencing these rates include maternal health, socioeconomic conditions, and access to prenatal care, highlighting the importance of monitoring and managing this condition effectively worldwide. Preeclampsia poses significant complications both during and after pregnancy for mothers and infants. Understanding these signs is crucial for timely interventions. Ongoing research and education are vital for healthcare providers and expectant mothers to optimize outcomes for both the mother and the baby.

Aim of the study. Analysis of the women with preeclampsia, cause of pregnancy, complications and treatment.

Materials and methods. We have analyzed about 40 cases of women with preeclampsia and their case histories, analysis results, hormonal status, courses of

pregnancy, gynecological and extragenital pathology, term of labor and the condition of babies.

Results and discussion. The average age of the analysed patients was 32 years. According to the literature the most common causes were advanced age of women, extragenital pathology, heart diseases, obesity, other chronic disorders. Based on our study, the causes were renal pathology (35%), arterial hypertension (30%), obesity (20%). In this study the most prevalent complications caused by these causes in pregnancy were premature rupture of membrane (35%) and preterm contractions (27.5%). These complications acted as the indications for emergency (20%) or planned deliveries by cesarean section (50%). About 30% of the examined patients had vaginal delivery. About 20% of the examined patients had premature labor. All the newborns of the studied patients were with an Apgar score of 7/8, 8/8 and 8/9, with an average weight of 2.7 kilograms, average height 50.2 centimeters. All the complications were compensated with conservative treatment.

Conclusion. Preeclampsia is a serious hypertensive disorder during pregnancy with a lot of complications during pregnancy and labor. It is also a risk factor of premature labor. That is why we have to examine the patients with hypertensive disorders during pregnancy to treat correctly and normalize the level of blood pressure. It is very important to save pregnancy and perform prophylactic measures of premature labor. Considering the effectiveness of the treatment above, early diagnosis and appropriate method of treatment will help in conceiving and delivering healthy newborns.

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