



**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
ЗАПОРІЗЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ**

**НАУКОВЕ ТОВАРИСТВО СТУДЕНТІВ, АСПРАНТІВ, ДОКТОРАНТІВ І
МОЛОДИХ ВЧЕНИХ**

**ЗБІРНИК ТЕЗ ДОПОВІДЕЙ
ВСЕУКРАЇНСЬКОЇ НАУКОВО-ПРАКТИЧНОЇ
КОНФЕРЕНЦІЇ СТУДЕНТІВ ТА МОЛОДИХ ВЧЕНИХ
«ДОСЯГНЕННЯ СУЧАСНОЇ МЕДИЧНОЇ ТА
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full-term infants. The average age of parturient women was 28.6 ± 3.8 years. There was a predominance of primiparous first-pregnant women in childbirth - 37.5%.

Risk factors for developing pneumonia in full-term infants

Sign	Quantity (n)	Percentage (%)
preeclampsia	20	58,8
violation of the uteroplacental circulation	18	52,9
premature placental abruption	6	17,6
fetal growth retardation	4	11,7
Cesarean section	18	52,9
premature rupture of amniotic fluid	14	41,1
Covid -19 of the mother during pregnancy	4	11,7

Conclusion. Thus, based on the above data, the following signs were risk factors for congenital pneumonia in newborns in our study: preeclampsia, placental insufficiency, cesarean section and premature rupture of amniotic fluid and Covid -19 of the mother during pregnancy.

MANAGEMENT OF PREGNANCY AND CHILDBIRTH IN WOMEN WITH HYPERTENSION

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One of the most difficult modern problems in obstetrics is the combination of hypertension and pregnancy due to the high risk of perinatal and obstetric complications. The severity, duration of the disease, severity of complications, age of the patient, and pregnancy planning are important to determine the outcome of the pregnancy.

Objective to conduct a retrospective analysis of the course, consequences of pregnancy and childbirth in women with hypertension depending on the severity of the disease, complications and delivery tactics for the period from December 2019 to November 2021 based on medical records of the perinatal center of Zaporozhye region.

Material and methods. The analysis of 198 birth histories of women with chronic arterial hypertension, as well as medical records of newborns. The age of women at the time of delivery was from 18 to 42 years and averaged 26.5 ± 0.43 years. Duration of arterial hypertension - from 1 year to 18 years, on average – 9.3 ± 0.58 years. In 48 women (24.2%) the pregnancy was the first, in 68 (34.3%) – the second, in 36 (18.8%) – the third, in 31 (15.6%) – the fourth, in 13 (6.18%) – the fifth.

Results and discussion. Fetal growth retardation was found in (19%) women (first degree – 10%, second degree – 6%, third degree – 3%). Polyhydramnios was found in 18.3% of women. Dehydration occurred in 5.1% of pregnant women. Preeclampsia was diagnosed in 59.5% of patients: mild – 40.4% of women, moderate – in 13.8% of women, severe – in 5.3% of women. Edema occurred in 68.5% of patients. Proteinuria up to 1 g / l was found in 33% of pregnant women, more than 1 g / l – in 11.7% of pregnant women. According to Doppler, signs of uterine-placental-fetal insufficiency were found in 47.9% of women: first degree – in 30.9% of patients, second degree – 10.6% of patients, third degree – in 6.4% of patients. Examination of newborns in 11% of children revealed intrauterine pneumonia. Neonatal pneumonia developed in 3.2% of infants. Delay in the rate of general development was in 20.6% of infants, encephalopathy – in 32% of infants.

Conclusions. Pregnancy and childbirth in women with hypertension are at high risk. Hypertension is one of the leading factors in the development of fetoplacental insufficiency, which leads to fetal hypoxia. Premature birth was performed in 21.5% of pregnant women with hypertension. At newborns from mothers with arterial hypertension respiratory infections develop more often.