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SELECTED AWARDED ABSTRACTS

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BASICS OF EPH-GESTOSIS/RIPPMANN'S SYNDROME

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EPH-Gestosis/Rippmann's Syndrome is the most important complication, killer No. 1 for babies and mothers, it is important to know that the baby is 100 times more in danger than the mother. EPH-Gestosis is not a disease. It is a syndrome. The cardinal signs and symptoms edema(E), proteinuria (P) and hypertension(H) may appear simultaneously, or singly. The causes of E, P and H are manifold. Therefore it is illogical and even harmful to treat such a heterogeneous group in just one way. The causes of cardinal signs and symptoms vary greatly according to population group and its location. They should be discovered before a next pregnancy.

Over 100 names of this syndrome, more than 50 classifications and various techniques to assess the signs and symptoms make it possible to compare results worldwide. This confusion prevents the science from progress.

The OG, World OGASH Board and CSPP (http://gestosis.ge/eng/26_4.php) has suggested a sensible nomenclature, classifications and definitions, which could overcome this barrier.

Nomenclature EPH Gestosis (EPH-syndrome: EPH-Complex, Rippmann's Syndrome)

Pregnancy Gest ...

complicated osis by Edema (E) Proteinuria (P) and 1 hypertension(H) Classification:

Symptomatic: Pathogenetic

Mono EPH 1. Super imposed EPH-Gestosis

Poly EP 2. Transient/essential EPH-Gestosis

E1 I (no signs and symptoms after puerperium)

PH 3. Concomitant Diseases

EPH 4. Unclassified EPH-Gestosis

E1 (Eclampsia imminent)

EC (Eclampsia convulsiva)

Definitions:

Edema Excessive(inadequate) increase of body-weight during Pregnancy, usually Due to fluid retention, i.e. more than 500g/week

2000g/month 13 kg/ entire pregnancy Demonstrable pretibial edema are of gestosis origine, if they are still present after night's bedrest

Proteinuria More than trace in one specimen. Preferably dipstick.

Hypertension Last normal reading 135/85 First pathological reading 140/90

In Hypertension Increase of 30 mmHg systolic Increase of 15 mmHg diastolic Since EPH-Gestosis/Rippmann's Syndrome is rampant in the developing countries with little or no facilities for prenatal care the methods to detect E, P and H have to be simple and for everybody to be understood and to be carried out.

EPH-gestosis means high risk pregnancy. It might just mean the pregnant patient has to be watched and monitored closely. Such EPH-Gestosis can be detected at a very early stage and treated adequately.

It is mandatory to examine each patient thoroughly two to three months after delivery to

Transcranial electrostimulation in a complex treatment of miscarriage.

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In order to prevent miscarriage in the second half of pregnancy, transcranial stimulation of brain by means of "Transair-2" had been used. 100 pregnant women were examined. Treatment was controlled by means of ultrasound examination, cardiotocography of fetus prior the procedure and two days after it.

In all 100% of cases pregnancy was prolonged up to 38-40 weeks by carrying out such therapy. 86 women (86%) had deliveries at term. 14 women (14%) had undergone a planned cesarean section, as prescribed.

Average Apgar score among the newborn was 7-8 points. Puerperal period passed without fever in 100% of cases. Antihypoxic influence of transcranial electrostimulation on the fetus has been confirmed in 96% of cases. Settled medical effect lasted until 14 days after finishing transcranial electrostimulation procedures.

The experience of using transcranial electrostimulation in complex treatment of late gestosis.

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Kuban State Medical Academy

Clinical efficiency of the use of transcranial electrostimulation (TES-therapy) in the treatment of late gestosis has been studied. 30 pregnant women on 34-37-th weeks of pregnancy with gestosis have been examined.

Criteria of the therapeutic effectiveness were clinical-laboratory findings, outcome of pregnancy and condition of a newborn. As a result of a conducted treatment the following symptoms of gestosis were stopped: disturbance of sleep, numbness of toes and fingers, headache, edematous syndrome. Stable normalization of diuresis have been acquired on the 2-3 day of hospital treatment.

Premorbid prevention of threat of miscarriage.

P.P. Gorelov

Astrakhan State Medical Academy

15 women with miscarriages, for whom vegetative functions were evaluated by electropuncturemetry method of Y.Nakatany, have been examined.

Complex of miscarriage treatment included 2-3 courses of acupuncture. After the course of acupuncture, acupunctural data improved. Average measure of electroconductivity increased to 45-60 mcA (p less 0.05).

Pregnancy developed 1-6 months after the complete course of treatment. There was no threat of miscarriage. All women had delivered life mature children.

Our experience of the use of kanephron N in pregnant with severe gestosis and pyelonephritis.

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The effectiveness of phyto-medicine Canephron N in complex treatment of pregnant with gestosis on the background of acute and chronic diseases of kidneys have been evaluated in 29 women (28-38 weeks of pregnancy) with severe course of gestosis and acute (5 patients) and chronic pyelonephritis (24 patients). Patients with acute course of the disease had undergone a surgery due to pyelonephritis pertaining to apostema. Surgery included dissection of the renal capsule in places of abscesses, circular pyelostomy and drainage of perinephric area.

Canephron was prescribed in complex therapy since 3-rd day of postoperative period: 50 drops 3 times a day during 3-4 weeks and then a supporting dose of 50 drops 2 times a day until the delivery.

There were no acute conditions of pyelonephritis before the delivery. Symptoms of gestosis disappeared 15-23 days after the surgery. Daily diuresis have become adequate without additional stimulation from the 5-th day of postoperative period. Urine analysis revealed compensation stage since 12-th day after the surgery. Pregnant with chronic course of pyelonephritis and gestosis received 50 drops of canephron N 3 times a day for 3-8 weeks (until the delivery). Course of gestosis in these patients was unstable. Hemodynamic findings were normal only in 11 pregnant, proteinuria recommenced periodically and had a maximum of 1+0.033 g/litre.

Dairy diuresis was positive in all patients. None of women receiving canephron developed side effects due to conducted therapy.

Therapeutic short-wave frequencies in treatment of chronic placental insufficiency.

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To treat chronic placental insufficiency short-wave frequencies were used. 70 pregnant women with chronic placental insufficiency were observed. To evaluate clinical effectiveness of treatment in dynamics the following methods were used: Doppler examination, ultrasound examination, cardiotocography, hemostasis system. The use of therapeutic short-wave frequencies in the treatment of placental insufficiency normalizes vascular-thrombocyte and coagulation component of hemostasis system. It is revealed in the increase of activated partially thromboplastin time on 10.9% ($p < 0.05$), decreased level of suppression XII-a dependent lysis and prothrombin index, decreased hyperfibrinogenemia on 25.5% ($p < 0.05$), normalization of thrombin potential of blood. Frequency of positive ethanol test decreased in 1.7 times and the level of soluble fibrin-monomer complexes decreased in 2.2 time compared with the initial data. After evaluation of the blood circulation in the uterine artery and in the artery on the 36-th week of pregnancy an improved circulation in the uterine artery was revealed in 72.4% of cases (51.7% of them was normalized) and the improved circulation in the umbilical artery was revealed in 76.9% (53.8%). The use of therapeutic short-wave frequencies allowed to avoid severe forms of gestosis. Use of complex of physical factors in puerperium women with obesity.

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Short-wave ultraviolet irradiation and ultrasound were used in 30 puerperium women who had undergone episiotomy and episiorrhaphy during the delivery, in order to decrease the risk of pyoseptic complications in the postnatal period. Procedures have been help each day, 1 course of treatment included 5 procedures. After carrying out the course of physiotherapy uncomplicated course of postnatal period, wound healing by primary intention and earlier (by the 4-th day) removal of stitches have been noticed in all puerperium women.

Effectiveness of transcranial electrostimulation in preventing fetal distress-syndrome during the preparation for the cesarean section.

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Effectiveness of transcranial electrostimulation for prevention of fetal distress during preparation for the Cesarean section has been evaluated 20 pregnant women, their children

and placentas were examined. Transcranial electrostimulation procedures were held for 3-5 days prior the surgery and on the day of it. Placentas have undergone macro- and micro-morphologic examination. Adaptation period of newborns was also evaluated. After 1 application of transcranial electrostimulation pregnant noticed decrease of emotional effort, sedative and analgesic effects. Children received higher Apgar score. The course of adaptation period was characterized by an active breast feeding, lack of weight loss and lack of severe neurological symptoms.

Histological examination of placentas revealed the decreased level of deposition of blood (in 2.5 times)

Preventing Iodine-deficiency in health care of pregnant women

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The effectiveness of iodine deficiency prevention was evaluated in 61 pregnant, living in Saratov.

They received physiological doses of potassium iodide. Pregnant women have undergone the ultrasound examination of thyroid gland, ioduria examination and evaluation of thyroid-stimulating hormone (TSH) and free thyroxin on serum. As a result of the research it has been found that the spread of gestation hypothyroxinemia increases from 21% on the 1 term to 40% in the third term. Prescription of physiological doses of potassium iodide during pregnancy favors the normalization of iodine concentration for mother and in 14027% decreases the risk of complications in the course of pregnancy and delivery.

Medical electrophoresis in complex treatment of pregnant women with chronic placental insufficiency, living in a highly-urbanized region.

A.A. Lashkina, O.I. Lineva, C.B. Tsurkan

Samara State Medical University.

An evaluation of clinical effectiveness of electrophoresis with the solution of Instenon in treating chronic placental insufficiency in women, living in highly urbanized area was carried out.

60 pregnant women on 31-34 weeks of gestation were examined. To diagnose the chronic placental insufficiency, the following methods were used: echography, Doppler, cardiotocography. 75.0% of women developed an improved hemodynamics in the system – mother-placenta-fetus. Improved condition of fetus based on cardiotocography findings was revealed in 80% of women. Pregnancy was prolonged in all women until the delivery at term.

65.0% of women had delivery per vias naturalis, Cesarean section was performed in 35.0% of cases. 80.0% of children received 8-10 points on the Apgar score. Histological and morphological examination of placentas more often discovered high and average level of compensatory reactions, with the index of 17.8% to 13.6%.

Method of preparing the maternal passages with the help of acupuncture.

A.G. Maximeiko, V.A. Mamyeva

Delivery house #2, Astrakhan

Maternal passages in pregnant women with different somatic and obstetrical pathology were prepared for the delivery by acupuncture.

48 pregnant women were prepared for the delivery. All women have undergone ultrasound examination, Doppler, fetal cardiotocography, evaluation of biophysical profile of fetus by the method of Manning F (if needed). Acupuncture was performed daily. After the first 5 procedures 37 women (77.1%) had deliveries, among them 31 (64.6%) had spontaneous labor activity, 6 (12.5%) women with premature discharge of amniotic fluid had to have a stimulation of delivery by prostaglandins, 1 Cesarean section was performed due to the acute fetal hypoxia.

6-7 procedures of acupuncture were needed for 8 pregnant women (16.7%), among them 6 (12.5%) developed spontaneous labor activity. 3 (6.25%) women needed introduction of prostaglandins and 1 Cesarean Section was performed due to the permanent uterine inertia.

Possibility of using iridodiagnostics in prediction the outcome of delivery.

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Prediction of the outcome of delivery by iridodiagnostics was performed in 120 women in the 3 term of pregnancy. J. Angerer's scheme of projectional zones of internal organs was used. Iridoscopy was performed with slit lamp on the maximal extension.

By statistical comparison of frequencies of iridologic parameters in women a chart of complicated labor was compiled.

The possibility that an examined woman has a breakdown of the adaptation for the forthcoming delivery is 95%, if the sum of PK is +13 points. If the sum of PKJ is -13 points, this condition is neglected with 95% possibility.

Effectiveness of transcranial electrostimulation of endorphin brain structures in complex treatment of pregnant women with gestosis.

A.E. Miroshnikov, N.A. Zharkin

Chair of obstetrics and gynecology of Volgograd State Medical University

The effectiveness of transcranial electrostimulation in treating pregnant women with gestosis was evaluated by daily monitoring of arterial pressure.

53 pregnant women with light and average gestosis received treatment by means of "Transair-01" apparatus. Daily monitoring of arterial pressure was performed by means of AVRМ-04 "Meditech" apparatus.

Pressure loading on target organs (area index) and daily rhythm of hemodynamics (the level of night decrease of arterial pressure) were evaluated. Decrease of area index from 179% to 23.4% (which is relevantly close to normal - from 2 to 10%) was registered in 42 (79.4%) cases. The level of night decrease of arterial pressure returned to normal (from 10 to 20%) in 31 (58.4%) of patients. Number of patients with proteinuria decreased to 14.3%

Transcranial electrostimulation influence of the condition of fetus in pregnant women with late gestosis.

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The effectiveness of transcranial electrostimulation on the fetal condition in patients with late gestosis was evaluated in 36 patients.

For 10 days pregnant women received procedures of transcranial electrostimulation every day. "transair-01" apparatus was used. Diagnostics of fetal condition was performed before and after the treatment by means of functional tests of placenta, evaluation of heart rate of fetus, cardiotocography, ultrasound examination.

After the treatment fetal tachycardia in 33 (91.7%) of women decreased on 122 beats per minute and averaged 14 ± 3 beats per minute ($p < 0.05$). All patients noticed normalization of movement activity of fetus during a day. Normalization of the initial fetal heart beat rate was achieved 20 ± 4 seconds after the functional tests. 32 (88.9%) of patients had a normal type of fetal heart beat rate reaction, revealed after the functional tests of placenta. The data received were confirmed by ultrasound examination and cardiotocography findings.

The experience of using Khofitol in prevention and therapy of early toxicosis of induced pregnancy.

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Effectiveness of Hophitol in preventing and therapy of early gestosis were evaluated. 15 women with induced pregnancy were examined in the 1 term. There were no side effects

developed. 12 women noticed the lack of nausea, improvement of appetite, stabilization of weight. Based on the biochemical findings it was noticed that all women had normal concentration of bilirubin and hepatic transaminases, acetone wasn't found in urine.

Biochemical criteria in blood and lochia during prevention of infectious complications by ozone in puerperiums.

N.V. Ordzhonikidze, V.A. Burlev, S.Zh. Danelyan.

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Medical ozone was used to prevent the infectious-inflammatory complications in puerperiums after the spontaneous labor.

30 puerperiums with high infectious risk after the spontaneous labor were examined. They received 400 ml of ozonized physiological solution with the concentration of ozone of 2.5-3 mg/litre intravenously dropwise during 5 days, the stitches of the perineum were sprinkled with ozonized distilled water with the concentration of ozone of 3 mg/litre. Clinically more favorable course of the healing process, fast disappearance of edema (during 2 days), hyperemia and infiltration in the wound area was noticed. Postnatal period was uncomplicated.

The use of Chophytol in complex treatment of pregnant women with infectious hydramnion.

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Chophytol was used in 40 pregnant women with infectious hydramnion, Clinical effect was evaluated based on the complex examination. It included determination of the products of tissues destruction, TBK of active products and acid-soluble fraction of nucleic acids in blood and amniotic fluid. Use of Chophytol led to positive decreased of the volume of amniotic fluid, 1.5 decreased of the frequency of complications of the gestational period, improvement of functional condition of fetus and newborn.

