The Role Of Treatment Of Infection Generic Ways Of Pregnant Women In The Prevention Of Preterm Birth

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Premature birth, especially if the pregnancy is less than 34 weeks, constitute a major cause of neonatal mortality and childhood disability. Reduction in the incidence of preterm birth and perinatal mortality of newborns can be achieved by identifying pregnant women at risk groups and preventive treatment. The aim of this study was to determine the microbial landscape of the cervical canal of the cervix and the effectiveness of anti-inflammatory treatment in pregnant women with risk for preterm birth. We examined 46 pregnant women with different types of chronic bacterial or viral infection, had a history of premature birth and treated before pregnancy (1-a group of 26 women) or received with the threat of premature birth (2-group - 20 women). Analysis of infection was carried out in the blood and cervical mucous. The research results revealed that along with urogenital and viral infections, in most of cases of cervical canal was determined: Staphylococcus aureus (15%), Streptococcus (23%), Candida (23%), E. coli (15%) and mixed infections (24%). All patients underwent local treatment of generic ways using vaginal suppository with bactericidal and fungicidal effect. The duration of treatment was different in the 2 groups. Patients of the 1-group treated before pregnancy, have an improvement at 3-4 day. In the second group, the effect of the treatment occurred on average 6-7 day. Efficacy was also assessed by prolongation of pregnancy for 3-4 weeks and reduced incidence of preterm birth in 1.4 times in 1 group compared with the 2-group, to an improvement in perinatal morbidity.

Conclusions: treatment before the pregnancy in conjunction with local treatment, contributes to the rehabilitation of birth ways, to prolongation of pregnancy, to reduce the frequency of preterm birth and perinatal pathology.