TASHKENT MEDICAL ACADEMY

100 TMA ANNIVERSARY

Journal of Educational and Scientific Medicine

Issue 2 (2) | 2023

OAK.uz
Google Scholar
Supreme Attestation Commission at the Cabinet Ministers of the Republic of Uzbekistan

ISSN: 2181-3175

Journal of Education & Scientific Medicine

ISSN 2181-3175

Tashkent Medical Academy

Research Article

Open © Access

Retrospective Analysis of Cases of Undeveloped Pregnancy in Women with COVID-19

N.F. Ruzmetova[1]

ABSTRACT

Background. An undeveloped pregnancy is an important problem for women's health, and its risk may be increased during pregnancy. Pregnant women with COVID-19 may have an increased risk of developing an undeveloped pregnancy. The purpose of this study is to conduct a retrospective analysis of cases of undeveloped pregnancy in women with COVID-19.
Materials. The study used medical records of those who had an undeveloped pregnancy in the period from December 2020 to June 2021. A retrospective analysis of medical documentation was performed to assess cases of undeveloped pregnancy in women with COVID-19. The data were obtained from medical records and databases of patients in the archive of obstetric complex No. 9.Tashkent. The case histories were analyzed in the archive of the obstetric complex
Results. Out of 100 women who had an undeveloped pregnancy during COVID-19, all women had confirmed COVID-19 infection, of which 35 women (35%) had a mild form of COVID-19 and 65 women (65%) had a severe form of coronavirus infection. Among women with an undeveloped pregnancy, 57 (57%) were infected with COVID-19 in the first trimester of pregnancy, 43 (43) - in the second trimester. Non–developing pregnancy was more often observed at the terms of 5 to 16 weeks, of which at 5-8 weeks - 41%, at 9-12 weeks.-30% and 13-16 weeks - 29%.
Conclusion. A retrospective analysis of cases of non-developing pregnancies in women with COVID-19 highlights the potential impact of viral infection on pregnancy outcomes. A study has shown that COVID-19 infection can increase the risk of non-developing pregnancy in women, especially in the first trimester. The findings highlight the importance of timely and appropriate management of pregnant women with COVID-19 to minimize the risk of adverse pregnancy outcomes. Stress, hemostasiological and immunological disorders, as well as somatic diseases are important factors affecting the likelihood of an undeveloped pregnancy against the background of COVID-19.

Keywords: undeveloped pregnancy, COVID-19, pregnancy, risk, maternal and child health, risk factors

INTRODUCTION

COVID-19 is one of the most widespread diseases in the world, which has caused a significant global pandemic. Since its first discovery in China in December 2019, the disease has spread worldwide, affecting millions of people, and leading to many health problems [1-5].

At the same time, COVID-19 has had a negative impact on many areas of life, including women's reproductive health. The situation with women's health against the

[1] Assistant of the Department of Obstetrics and Gynecology of the Urgench branch of the Tashkent Medical Academy, ruzmetovanilufar2@gmail.com

background of COVID-19 has become a very relevant topic for the medical community [6-9]. COVID-19 is one of the most serious health challenges in the world, and the impact of the pandemic on women's reproductive health has become a very relevant topic for the medical community [10-13].

Undeveloped pregnancy is a fairly common problem affecting about 10-15% of all pregnancies. Currently, the relationship between COVID-19 and pregnancy is being studied, including the effect of infection on childbirth, newborns, and fetal development [14-17].

An undeveloped pregnancy is one of the unfavorable outcomes of pregnancy, and the relationship between its occurrence with COVID-19 has not yet been fully studied. In this retrospective analysis, we consider cases of undeveloped pregnancy in women with COVID-19 to identify a possible link between these conditions [18-21].

The urgency of this problem dictates the need to clarify the role of coronavirus infection in the development of non-developing pregnancies in women with COVID-19 and further develop measures to reduce and prevent the development of this complication of pregnancy [22].

The COVID-19 pandemic has affected the health of people all over the world, and pregnant women are no exception. Pregnancy is a special period in a woman's life when her immune system can be altered, making her more vulnerable to infections. Studying the relationship between COVID-19 and non-developing pregnancy can help in understanding the mechanisms underlying this relationship and determining the precautions that need to be taken to protect the health of pregnant women and their fetuses [23-25].

According to research, women with COVID-19 may have an increased risk of developing an undeveloped pregnancy. An undeveloped pregnancy can lead to serious complications such as bleeding and infections and can lead to infertility. Understanding the factors associated with the development of non-developing pregnancy in women with COVID-19 can help improve the prognosis and treatment of this condition[26-27]. This study will assess the risk of developing an undeveloped pregnancy in women infected with COVID-19 and identify factors that may affect this condition.

Such a study can help healthcare professionals take measures to reduce the risk of non-developing pregnancy in women with COVID-19. It can also lead to an improved treatment and care process for pregnant women with COVID-19, which can lead to better outcomes for the mother and fetus. In addition, the results of the study may be useful for planning further research and developing more effective strategies for the treatment and care of pregnant women with COVID-19.

An undeveloped pregnancy is a serious complication of pregnancy, and its possible increase in women with COVID-19 poses a significant threat to the health of the mother and fetus [28]. Conducting a retrospective analysis of such cases can help to understand how COVID-19 affects pregnancy and what factors may be associated with the development of non-developing pregnancies in women with COVID-19.

Also, conducting this study may help to establish how common this complication is in women with COVID-19, which may be useful for determining the most effective strategies for the prevention and treatment of non-developing pregnancy in this category of patients.

Therefore, the article on the retrospective analysis of cases of undeveloped pregnancy in women with COVID-19 is of great relevance, as it can lead to a deeper understanding of the relationship between COVID-19 and undeveloped pregnancy, which can lead to improved diagnosis and treatment of this condition in pregnant women. The purpose of this study is to conduct a retrospective analysis of cases of undeveloped pregnancy in women with COVID-19.

MATERIALS AND METHODS

The study used medical records of 100 women aged 18 to 40 years who had an undeveloped pregnancy in the period from December 2020 to June 2021.

A retrospective analysis of medical documentation was performed to assess cases of undeveloped pregnancy in women with COVID-19. The data were obtained from medical records and databases of patients in the archive of obstetric complex # 9 in Tashkent.

Inclusion criteria: Women who had confirmed cases of COVID-19 during pregnancy were included in the study. To be included in the study, women had to have complete medical records and information about the results of pregnancy.

Exclusion criteria: Women who were not pregnant at the time of COVID-19 disease were not included in the study. Also, women with incomplete medical records or missing information about pregnancy results were excluded from the study.

Data on the result of pregnancy, including the presence or absence of an undeveloped pregnancy, were extracted from medical records. Other data, such as the age of the mother, the presence of concomitant diseases, etc., were also extracted from medical records.

Statistical analysis of the results was carried out by nonparametric statistics methods in the Statistika 10.0 environment (Stat Soft Inc., USA) using its capabilities of constructing conjugacy tables, based on which the relationship between the features was estimated by means of the Pearson distribution χ 2 at $p \leq 0.05$ (95 %).

RESULTS

The analysis of 100 case histories of patients with the diagnosis of non-developing pregnancies" at terms from 5 to 16 weeks of pregnancy for the period from 2020 to 2021 was carried out. The average age of women was 26.5 ±1.4 years. Out of 100 women who had an undeveloped pregnancy during COVID-19, all women had confirmed COVID-19 infection, of which 35 women (35%) had a mild form of COVID-19 and 65 women (65%) had a severe form of coronavirus infection. There were 44 (44%) first–time pregnancies and 56 (56%) second-time pregnancies.

Among women with an undeveloped pregnancy, 57 (57%) were infected with COVID-19 in the first trimester of pregnancy, and 43 (43) - in the second trimester. At the same time, the discrepancy between the gestational period of pregnancy and the term of termination of fetal activity was 3.03 weeks in women with terms from 5 to 8, 3.05 weeks with terms from 9 to 12 weeks and 4 weeks with terms from 13 to 16 weeks.

When analyzing the medical histories of women with undeveloped pregnancies, it was noted that the frequency of undeveloped pregnancies in women, depending on the duration of pregnancy, showed that undeveloped pregnancies were more often observed at terms from 5 to 16 weeks, of which at 5-8 weeks – 41%, at 9-12 weeks.-30% and 13-16 weeks - 29% (see Figure 1).

When studying the anamnesis of patients with an undeveloped pregnancy, the termination of fetal activity most often occurred in pre-pregnant women, both at terms from 5 to 8 weeks and at terms from 9 to 16 weeks. The second most frequent non-progressive pregnancy was in women who had a history of more than two pregnancies. Among women with confirmed COVID-19 infection, the largest number of non-developing pregnancies was recorded in the first trimester in 71 women (71%), while in 29 women (29%) in the second trimester.

According to the ultrasound, an undeveloped pregnancy by the type of embryo death was observed in 65% of women, and by the type of anembryonic in 35% of cases. When the deceased fetus was delayed in the uterus for more than 2 weeks, 34% of patients had a lag in its size from the calendar gestation period. It was revealed that stress is the most significant factor affecting an undeveloped pregnancy against the background of COVID-19.

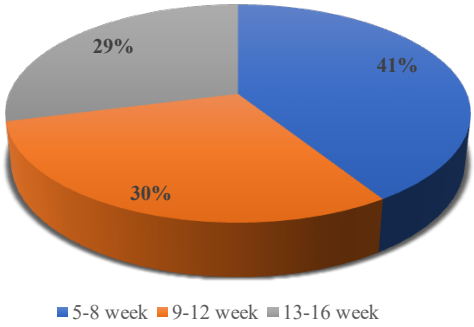

Figure 1. The frequency of non-developing pregnancies in patients depending on the duration of pregnancy,%

Women experiencing stress had a greater risk of non-developing pregnancy. It was also noted that women who did not have access to medical care during the COVID-19 pandemic had a greater risk of non-developing pregnancy. 92% of women had a registered marriage, and 8% had a civil marriage. The social status of patients is characterized by the fact that 53% of patients were housewives, and 43% worked.

Analysis of menstrual function showed that the onset of menarche occurs on average at 11.5 years. Menstrual disorders were more often observed in the form of dysmenorrhea (21%), for which she did not receive treatment.

Of gynaecological diseases in the anamnesis, infertility was detected in 4 (4.4%) patients, cervical erosion – 16 (17.8%), inflammatory diseases of the female genital organs – 3 (3.3%), ovarian cysts – 1 (2.2%), ovarian apoplexy – 1 (2.2%) case.

In 52% of women who have an undeveloped pregnancy, extragenital diseases were detected. Anaemia accounts for the highest percentage of extragenital pathology - 68%, arterial hypertension was found in 13%, chronic respiratory tract disease in 14%, urinary tract disease in 18% of women, and obesity of various degrees was found in 7% of women with undeveloped pregnancy, in particular, grade II obesity in 3 and 4-patients are obese of the III degree.

When assessing the clinical data, 67% of patients had complaints of pulling pains in the lower abdomen and bloody discharge from the genital tract (38% and 29%, respectively), and 33% of patients had no complaints, and the diagnosis of an undeveloped pregnancy was

made only by the results of ultrasound examination (see Figure 2).

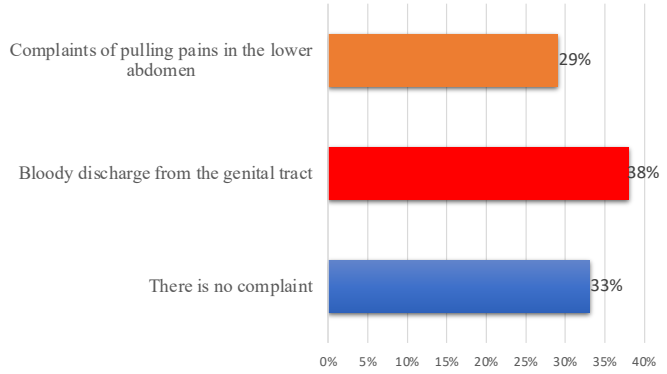

Figure 2. Structure of complaints of patients with undeveloped pregnancy against the background of COVID-19

During the bimanual examination, 71% of women had a discrepancy in the size of the uterus to the gestation period of up to 2-3 weeks. in 29% - 4 nels or more, which indicated a long delay of the deceased embryo.

Analysis of the results of laboratory studies showed that women with an undeveloped pregnancy had a higher level of C-reactive protein (CRP), which indicates the presence of inflammatory processes in the body, the average level of CRP in women with an undeveloped pregnancy was 56.2 mg/ 1, while in women with a normally developing pregnancy, the level of CRP was 23.4 mg/l ($p<0.05$).

It was also found that the level of interleukin-6 (IL-6), which is also a marker of inflammation, was significantly higher in women with an undeveloped pregnancy compared to women with a normally developing pregnancy (the average level of IL-6 was 78.3 pg./ml and 25.7 pg./ml, respectively, $p<0.05$).

Based on these results, it is recommended to carry out systematic monitoring of pregnant women, attention should be paid to the level of CRP and IL-6 to detect inflammatory processes early and prevent the development of complications.

When studying hemostasis indicators, it was noted that in patients with a gestation period of 5 to 16 weeks. along with changes in the number of platelets, there was an increase in the APTT index (27.0 sec). Even though the remaining parameters of the coagulogram were within the reference values, we can talk about a violation in the blood coagulation system in these patients. In a group of patients with gestation periods from 5 to 8 weeks. there was also an increase in the APTT index with a simultaneous increase in platelets (430.109), which also indicates the presence of disorders in the blood coagulation system. The presence of leukocytosis (15.109) in all patients with thrombocytosis indicates the presence of coronavirus infection.

Termination of an undeveloped pregnancy out of 100 women in 58 (58%) patients was performed by instrumental curettage of the uterine cavity, 42 (42%) had a termination of pregnancy by vacuum aspiration. Emptying of the uterine cavity was performed by vacuum aspiration with the Eschmann VP 35 device (Great Britain) at a negative pressure of 80 kPa or a plastic aspirator with a volume of 60 ml using disposable plastic cannulas without preliminary dilation of the cervix with intravenous anaesthesia. In all cases, abortive material was sent for histological examination.

The results of histological examination of abortive material showed that inflammatory changes were present in all analyses and avascularized villi were observed in 55.5% of cases with a term of non-progressive pregnancy from 5 to 8 weeks, hypovascularized villi were detected in 13% of cases with a gestation period of 9-12 weeks. in 31.5% with a term of 13-16 weeks. sclerosed villi were more often observed.

Analysis of the course of the post-abortion period showed that in 11 (19%) patients after instrumental curettage was complicated by hematometry, in 3 (5.1%) - with endometritis. In women after termination of pregnancy by vacuum aspiration, only 3 (71%) patients had a hematometer.

The data of the retrospective study allowed us to identify the features of the pathogenesis of undeveloped pregnancies, such as the predominance of hemostasiological and immunological disorders at the terms of 5 to 16 weeks.

DISCUSSION

An undeveloped pregnancy is one of the most common complications of pregnancy and can occur in any woman during this period [1-3]. However, the presence of COVID-19 may increase the risk of developing this problem [4-6]. Some studies indicate an increased risk of non-developing pregnancy and premature birth in women with COVID-19 [8-11].

In this regard, a retrospective analysis of cases of undeveloped pregnancy in women with COVID-19 may help to assess the effects of viral infection more fully on the outcome of pregnancy.

In connection with the above, this article is relevant and may be useful for practising obstetricians and gy-

naecologists and doctors involved in the treatment of COVID-19 in pregnant women. This analysis was carried out based on medical data collected among pregnant women who sought medical help in the period from January 2020 to December 2021. All women were tested for COVID-19 upon admission to the hospital, and further follow-up was carried out throughout the pregnancy period.

The results of the analysis showed that non-developing pregnancies were recorded in the first trimester in 63 women (63%), and in 37 women 37% in the second trimester. While the rate of undeveloped pregnancy among the general population of women who have not contracted COVID-19 is about 10-15% [7-11].

This study confirms that COVID-19 has a negative impact on women's reproductive health, on the likelihood of an undeveloped pregnancy. Women with confirmed COVID-19 infection have a higher risk of non-developing pregnancy, especially in the first trimester. An important factor affecting the risk of developing an undeveloped pregnancy is stress, which can worsen the course of pregnancy and lead to complications.

Other factors, such as age, the presence of comorbidities and the presence of COVID-19 symptoms, also had an impact on the risk of non-developing pregnancy in women with COVID-19. For example, women over the age of 35 had a higher risk of developing an undeveloped pregnancy.

In addition, women with chronic somatic diseases also had a greater risk of non-developing pregnancy. This underlines the importance of carrying out wellness activities before pregnancy.

The data from the retrospective study highlights the importance of monitoring pregnant women with COVID-19 infection, especially those with other diseases. The results showed that pregnant women who had COVID-19 and had an undeveloped pregnancy had a higher level of inflammation, expressed in higher levels of CRP and IL-6, compared with pregnant women with a normally developing pregnancy.

In addition, the results of the study emphasize the need to take precautions for pregnant women during the COVID-19 pandemic. It is also recommended to be vaccinated, if possible, in accordance with the recommendations of vaccination of pregnant women.

This study also highlights the importance of early detection of non-developing pregnancies in women with COVID-19. It should be noted that ultrasound is a safe and effective method of detecting this complication. Therefore, ultrasound examinations should be performed in pregnant women infected with COVID-19 to detect an undeveloped pregnancy early.

Overall, our study highlights the need for more careful monitoring of pregnant women with COVID-19 and efforts to reduce the risk of pregnancy complications. It also indicates the need for further research to more accurately determine the mechanisms associated with these complications and to develop more effective diagnostic and therapeutic methods.

Overall, the study is an important step in understanding the effects of COVID-19 on pregnant women and the need to develop effective prevention and treatment strategies.

CONCLUSION

A retrospective analysis of cases of non-developing pregnancies in women with COVID-19 highlights the potential impact of viral infection on pregnancy outcomes. A study has shown that COVID-19 infection can increase the risk of non-developing pregnancy in women, especially in the first trimester. The findings highlight the importance of timely and appropriate management of pregnant women with COVID-19 to minimize the risk of adverse pregnancy outcomes.

Stress, hemostasiological and immunological disorders, as well as somatic diseases are important factors affecting the likelihood of an undeveloped pregnancy against the background of COVID-19. The study is an important step in understanding the effects of COVID-19 on pregnant women and the need to develop effective prevention and treatment strategies. This will make it possible to develop effective measures to protect women and their fetuses from the negative consequences associated with COVID-19.

Ethics approval and consent to participate - All patients gave written informed consent to participate in the study.

Consent for publication - The study is valid, and recognition by the organization is not required. The author agrees to open the publication.

Availability of data and material – Available.

Competing interests – No.

Financing – No financial support has been provided for this work.

Conflict of interests - The authors declare that there is no conflict of interest.

REFERENCES:

1. Allotey J., Stallings E., Bonet M. et al. Clinical manifestations, risk factors, and maternal and perinatal outcomes of coronavirus disease 2019 in pregnancy: living systematic review and meta-analysis. BMJ. 2020; P.370.
2. Bejenar V.F., Zazerskaya I.Ye., Bettixer O.A. i dr. Spornie voprosi akusherskoy taktiki pri vedenii beremennosti i rodorazreshenii patsientok s novoy koronavirusnoy infektsiey COVID-19. Akusherstvo i ginekologiya. 2020;(5):S.13–21. [in Russian]
3. Di Mascio D., Khalil A., Saccone G. et al. Outcome of coronavirus spectrum infections (SARS, MERS, COVID-19) during pregnancy: a systematic review and meta-analysis. Am J Obstet Gynecol MFM. 2020; 2(2): 100107.
4. D.M. Mamajanova., F.I. Shukurov. COVID-19ga qarshi emlangan homilador ayollarda gemostaz tizimining xususiyatlari//Jurnal Tibbiyotda yangi kun. 10 (48) 2022.,S.47-51. [in Uzbek]
5. Diyorakhon M.Mamajonova., Shukurov F.I. Features State of The Fetoplacental System in Pregnant Women Vaccinated Against COVID-19//American Journal of Medicine and Medical Sciences 2022, 12(6): P. 682-685.
6. Ellington S., Strid P., Tong V. T. et al. Characteristics of women of reproductive age with laboratory-confirmed SARS-CoV-2 infection by pregnancy status - United States, January 22-June 7, 2020. MMWR Morb Mortal Wkly Rep. 2020; 69(25):t 769-775.
7. Liu D., Li L., Wu X. et al. Pregnancy and perinatal outcomes of women with coronavirus disease (COVID-19) pneumonia: a preliminary analysis. AJR Am J Roentgenol. 2020; 215(1): 127-132.
8. Liu D., Li L., Wu X. et al. Pregnancy and perinatal outcomes of women with coronavirus disease (COVID-19) pneumonia: a preliminary analysis. AJR Am J Roentgenol. 2020; 215(1): 127-132.
9. Ruzmetova N.F., Shukurov F.I. Otsenka kliniko-diagnosticheskix kriteriev nerazvivayusheysya beremennosti u jenshin s COVID-19//Materiali kongressa «XVII mejdunarodniy kongress po reproduktivnoy meditsine»M., 2023 –S.80-81. [in Russian]
10. Mamajanova D.M., Shukurov F.I. Sostoyanie gormonalnogo statusa u beremennix, vaktsinirovannix protiv COVID-19//Materiali kongressa «XVII mejdunarodniy kongress po reproduktivnoy meditsine» M., 2023 –S.115-116.
11. Mamajanova D.M. Shukurov F.I. Cytokine Status in Pregnant Women Vaccinated Against COVID-19// Journal of Educational Scientific Medicine, №3(2), 2022.C.90-94.
12. Mamajanova D.M., Shukurov F.I. Koronavirus infektsiyasi kasalligini o‘tkazgan ayollarda homiladorlik va tug‘ruq natijalarining retrospektiv taxlili//Jurnal infektsiya, immunitet i farmakologiya, №3, 2022 .S.140-146. [in Uzbek]
13. Mamajanova D.M., Shukurov F.I. Osobennosti diagnostiki i kliniki COVID-19 pri beremennosti//Materiali kongressa «XVI mejdunarodniy kongress po reproduktivnoy meditsine» M., 2022 –S.133-134. [in Russian]
14. Mamajanova D.M., Shukurov F.I. Rezultati izucheniya mneniy vrachey i beremennix jenshin o vaktsinatsii protiv COVID-19 vo vremya beremennosti//Materiali kongressa «XVI mejdunarodniy kongress po reproduktivnoy meditsine»M., 2022 –S.132-133.[in Russian]
15. Mamajanova D.M Shukurov F.I. Homilador ayollarni COVID-19ga qarshi emlash: xavfsizligi, samaradorligi, emlashdan keyingi immunogenlik darajasini baholash va prognozlash usullari//Uslubiy tavsiyanoma.Toshkent. 2022. 40v. [in Uzbek]
16. Ruzmetova N.F., Shukurov F.I. Koronavirusli infeksiyasining rivojlanmagan homiladorlikni kelib chiqishidagi o‘rni//Vestnik Tashkentskoy meditsinskoy akademii.2022.Spets vipusk.S.31-34. [in Uzbek]
17. Ruzmetova N.F., Shukurov F.I. COVlD-19 bilan kasallangan ayollarda rivojlanmagan homiladorlikni to‘xtatishda xavfsiz va samarador usullar//Jurnal infektsiya, immunitet i farmakologiya, №3, 2022 .S.209-213. [in Uzbek]
18. Ruzmetova N.F., Shukurov F.I. Otsenka effektivnosti medikamentoznogo metoda prerivaniya nerazvivayusheysya beremennosti u jenshin s COVID-19//Materiali kongressa «Novie texnologii v diagnostike i lechenii ginekologicheskix zabolevaniy» M., 2022 .,S.64-65. [in Russian]
19. Xolova Z.B., D.A.Xolmatova,, Shukurov F.I. COVID-19ga chalingan homilador ayollarda fetoplasentar disfunksiyasi davosi va profilaktikasiga yangicha yondashuv//Jurnal Novosti dermatovenerologii i reproduktivnogo zdorovya. №3-4 [99-100]. S.38-39. [in Uzbek]
20. Xolova Z.B., Shukurov F.I. Vliyaniya COVID-19 na sostoyanie fetoplatsentarnogo kompleksa i razvitie oslojneniy dlya materi i ploda//Materiali kongressa

«Novie texnologii v diagnostike i lechenii ginekologicheskix zabolevaniy» M., 2022 .,S.70-71. [in Russian]
21. Yuldasheva N.Z., Shukurov F.I. Vliyanie C0VID-19 na funktsiyu yaichnikov u jenshn raznogo reproduktivnogo vozrasta//Materialii kongressa «Novie texnologii v diagnostike i lechenii ginekologicheskix zabolevaniy» M., 2022 .,S.129-130. [in Russian]
22. Yuldasheva N.Z.,Shukurov F.I. COVID-19 bilan kasallangan ayollarda xayz sikli buzilish1arini davolashda yangicha yondashuv//Jurnal Tibbiyotda yangi kun. 11(49) 2022.,S.344-348.[in Uzbek]
23. WHO. Coronavirus disease (COVID-19) situation report-173. Accessed March 26, 2023.
24. Xolova Z.B., Shukurov F.I. Morfologicheskie osobennosti fetoplatsentarnoy disfunktsii u beremennix COVID-19//Materiali kongressa «XVII mejdunarodniy kongress po reproduktivnoy meditsine» M., 2023 –S.133-134. [in Russian]
25. Xolova Z.B., Shukurov F.I. COVID-19 bilan kasallangan homilador ayollarda fetoplatsentar qon aylanishining xususiyatlari//Jurnal infektsiya, immunitet i farmakologiya, №3, 2022 .S.269-273. [in Uzbek]
26. Yuldasheva N.Z., Shukurov F.I. COVID-19 bilan kasallangan ayollarda gormonal holati//Jurnal infektsiya, immunitet i farmakologiya, №3, 2022 .S.294-300 [in Uzbek]
27. Zhu H., Wang L., Fang C. et al. Clinical analysis of 10 neonates born to mothers with 2019-nCoV pneumonia. Transl Pediatr. 2020; 9(1): P.51-60.
28. Zaigham M, Andersson O. Maternal and perinatal outcomes with COVID-19: A systematic review of 108 pregnancies. Acta Obstet Gynecol Scand. 2020;99(7):P.823-829.

How to Cite: *Ruzmetova N.F. Retrospective analysis of cases of undeveloped pregnancy in women with COVID-19 // Journal of Education and Scientific Medicine – 2023. Volume 2, Issue 2, P. 88-95*

COVID-19 BILAN KASALLANGAN AYOLLARDA RIVOJLANMAGAN HOMILADORLIK HOLATLARINI RETROSPYEKTIV TAHLIL QILISH

Ruzmetova N.F.
Toshkent tibbiyot akademiyasi Urgench filiali

Dolzarbligi. Rivojlanmagan homiladorlik ayollar salomatligi uchun dolzarb bo‘lib, homiladorlik paytida uning rivolanish xavfi ortishi mumkin. COVID-19 bilan kasallangan homilador ayollarda rivojlanmagan homiladorlik xavfi ortishi mumkin. Ushbu tadqiqotning maqsadi COVID-19 bilan kasallangan ayollarda rivojlanmagan homiladorlik holatlarini retrospektiv tahlilini qilish edi.

Materiallar. Tadqiqotda 2020 yil dekabridan 2021 yil iyunigacha rivojlanmagan homilador bo‘lganlarning tibbiy xujjatlaridan foydalanilgan. COVID-19 bilan kasallangan ayollarda rivojlanmagan homiladorlik holatlarini baholash uchun tibbiy hujjatlarning retrospektiv tahlili o‘tkazildi. Ma’lumotlar Toshkent shahar 9-sonli akusherlik majmuasi arxividagi bemorlarning tibbiy yozuvlari va ma’lumotlar bazalaridan olingan.

Natijalar. COVID-19 kasalligi bilan kasallangan 100 nafar homilador ayollarni 35 nafarida (35%) covid-19 ning yengil shakli va 65 nafarida (65%) koronavirus infektsiyasining og‘ir shakli bor edi. Rivojlanmagan homiladorlik jami COVID-19 bilan kasallangan 100 nafar ayollardan, homiladorlikning birinchi trimestrida 57 (57%), ikkinchi trimestrda 43 (43%) ayollarda aniqlandi. Rivojlanmagan homiladorlik ko‘pincha 5 dan 16 haftagacha bo‘lgan muddatda kuzatilgan, shundan 5-8 xaftalikda - 41%, 9-12 xaftada.-30% va 13-16 haftalikda - 29% kuzatildi.

Xulosa. COVID-19 bilan kasallangan ayollarda rivojlanmagan homiladorlik holatlarining retrospektiv tahlili virusli infektsiyaning homiladorlik natijalariga ta’sirini ta’kidlaydi. Tadqiqot shuni ko‘rsatdiki, COVID-19 infektsiyasi ayollarda, ayniqsa birinchi trimestrda rivojlanmagan homiladorlik xavfini oshirishi mumkin. Olingan natijalar homiladorlikning salbiy natijalari xavfini minimallashtirish uchun COVID-19 bilan kasallangan homilador ayollarni o‘z vaqtida va to‘g‘ri boshqarish muhimligini ta’kidlaydi. COVID-19 fonida stress holati, gemostaziologik va immunologik buzilishlar, shuningdek somatik kasalliklar rivojlanmagan homiladorlik rivojlanish ehtimoliga ta’sir qiluvchi muhim omillardir.

Kalit so‘zlar: rivojlanmagan homiladorlik, COVID-19, homiladorlik, ona va bola salomatligi, xavf omillari

РЕТРОСПЕКТИВНЫЙ АНАЛИЗ СЛУЧАЕВ НЕРАЗВИВАЮЩЕЙСЯ БЕРЕМЕННОСТИ У ЖЕНЩИН С COVID-19

Рузметова Н.Ф.
Ургенчский филиал Ташкентской медицинской академии

Актуальность. Неразвивающаяся беременность является важной проблемой для здоровья женщин, и ее риск может быть увеличен во время беременности. Беременные женщины с COVID-19 могут иметь повышенный риск развития неразвивающейся беременности. Целью данного исследования явилась в проведении ретроспективного анализа случаев неразвивающейся беременности у женщин с COVID-19.

Материалы. В исследовании были использованы медицинские документации перенесщих неразвивающейся беременностью в период с декабря 2020 года по июнь 2021 года. Ретроспективный анализ медицинских документаций был выполнен для оценки случаев неразвивающейся беременности у женщин с COVID-19. Данные были получены из медицинских карт и баз данных пациенток в архиве акушерского комплекса №9 г.Ташкента.

Результаты. Из 100 женщин, перенесщих неразвивающейся беременностью в период COVID-19, все женщины имели подтвержденную инфекцию COVID-19, из них у 35 женщин (35%) было легкая форма COVID-19 и у 65 женщин (65%) тяжелая форма коронавирусной инфекции.

Заключение. Ретроспективный анализ случаев неразвивающиеся беременности у женщин с COVID-19 подчеркивает потенциальное влияние вирусной инфекции на исходы беременности. Исследование показало, что инфекция COVID-19 может увеличить риск неразвивающейся беременности у женщин, особенно в первом триместре. Полученные результаты подчеркивают важность своевременного и надлежащего ведения беременных женщин с COVID-19 для сведения к минимуму риска неблагоприятных исходов беременности. Стресс, гемостазиологические и иммунологические нарушения а также соматические заболевания являются важными факторами, влияющими на вероятность неразвивающейся беременности на фоне COVID-19.

Ключевые слова: неразвивающаяся беременность, COVID-19, беременность, риск, здоровье матери и ребенка, факторы риска