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TITLE

ASSESSMENT OF RISK FACTORS FOR PERINATAL COMPLICATIONS IN PREGNANT WOMEN WITH OVERWEIGHT AND OBESITY.

AUTHOR/S

Ignatko I V (RU) [1], Popova N G (RU) [2], Rodionova A M (RU) [3], Martirosova A L (RU) [4]

ABSTRACT

Goal. Rate risk factors for perinatal complications in pregnant women with overweight and obesity.

Materials and methods. A total of 106 pregnant women attended from the time of registration in the antenatal clinic before the birth (in the period from 6 to 41 weeks). We used a standard set of diagnostic methods supplemented the definition of microalbuminuria (MAU). The search for possible risk factors of fetal condition was conducted. Correlation of different strengths of FGR with indicators of health of pregnant women were obtained. The strongest direct significant correlation was with a value of weight gain during pregnancy, renal function, and dynamics of the development of pre-eclampsia during pregnancy degree UIA rise during pregnancy increases the risk of preeclampsia (OR = 0,537, CI 95% [0,297-0,971]) and fetal growth retardation ($r = 0,47 \pm 0,12$, $p < 0,0001$). At Apgar score at 1 and 5 minutes of life significantly affects only the weight gain during pregnancy ($r = -0.38$, $p < 0,05$ and $r = -0.26$, $p < 0,05$). The most significant complications of the fetus in all the examined pregnant women (106) is a fetal growth retardation, as the manifestation of placental insufficiency - 28 (26.4%). Prior to the development of clinical symptoms of preeclampsia, there was a latent phase (lasting up to 2 weeks), when the level of microalbuminuria increases dramatically, which may serve as a predictive test for preeclampsia. The most significant risk factors for the development of pre-eclampsia during pregnancy was the growth of the MAU and the initial BMI. IUGR is associated with an increase in the MAU, the initial BMI and preeclampsia during pregnancy and Apgar scale performance at 1 and 5 minutes of life. Taking into account the influence of factors of forces, we can speak of the greatest value growth of the UIA in the gestational period for a pregnant woman and the fetus.

INSTITUTE

[1] Sechenov First Moscow Medical state university, [2] Sechenov First Moscow Medical state university, [3] Sechenov First Moscow Medical stTaking into account the influence of factors of forces, we can speak of the greatest value growth of the UIA in the gestational period for a pregnant woman and the fetus.ate university, [4] Sechenov First Moscow Medical stTaking into account the influence of factors of forces, we can speak of the greatest value growth of the UIA in the gestational period for a pregnant woman and the fetus.ate university