

## PREMATURE BIRTH: RETROSPECTIVE ANALYSIS

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**Annotation:** Very preterm birth, defined as birth between 22 and 27 weeks, can lead to health, social and demographic complications of pregnancy and perinatal mortality. The purpose of the main work is to determine the causes of premature birth and their impact on the fetus and mother.

**Keywords:** Premature birth, chronic diseases, placental changes.

Caring for premature babies during this period of pregnancy can be very challenging. The experience of many countries has established the following: if the causes of perinatal mortality are not reduced, it is observed that children born during this period become disabled. The relevance of research. According to WHO, despite the scientific and practical efforts of obstetrics, the level of premature births over the past ten years has not decreased, but increased from 7 to 15%. According to statistical analysis, in 2022 at the Republican Specialized Center for Maternal and Child Protection in Samarkand it will be 7.4 percent. This is evidenced by the fact that in recent years the number of births by caesarean section has been increasing. The relevance of this problem is determined not only by its medical, but also by its social significance, since morbidity and perinatal mortality among children born prematurely and especially with low body weight reaches 70% and does not show a downward trend. Perinatal mortality is 8-13 times more common with preterm birth. Perinatal mortality in preterm births occurs 8-13 times more often than in full-term births, while 50% of premature babies experience severe neurological diseases. In particular, these are cerebral palsy, severe visual and hearing impairments, and various chronic respiratory diseases.

**Purpose of the learn:** to study the main causes of preterm birth, determine the various consequences for the mother and fetus, and systematically evaluate changes in the placenta in women who gave birth prematurely.

**Materials and methods.** The material for the study was obtained from 96 case histories in which preterm birth was diagnosed between the ages of 22 and 27 years. The data was obtained from the database of the Samarkand City RIOVBMKIATM branch for the period from 2022 to 2023.

**Learn results:** In 2023, there was a more than 2-fold increase in very early births. Compared to the same period in 2022, preterm births accounted for about



1% of all hospital births during that period. A retrospective analysis of 96 birth histories from 2022 to 2023 was carried out. Preterm birth was most often observed in women aged 28 to 34 years and amounted to 74. The analysis of somatic pathology revealed:

- Arterial hypertension 31%,
- Pyelonephritis 17%,
- Myopia 15%,
- Varicose veins 12%,
- Obesity 6%,
- Bronchial asthma-3%,
- Diabetes mellitus 2%

In 52% of cases, the main cause of premature birth is isthmic-cervical insufficiency, intrauterine infection, fetoplacental insufficiency was noted in 48% of respondents. Complications in the form of gestosis were observed in every 3rd pregnant woman, fetal hypohydration - in 39%, early separation of a normally located placenta - in 27% of respondents. 72 of 96 pregnant women gave birth by When assessing newborns using the Apgar score, the caesarean section. following information was obtained: 5/5 - 32.3%, 12.5%, 5/6 and 6/6 - 55.2%. The condition of the newborns was assessed as very serious, body weight from 420 to 1100 g (average weight 760 g), height from 27 to 36 cm (average 31.5 cm). In newborns, breathing difficulties, hypoxia of the central nervous system, patent ductus arteriosus, pneumonia, asphyxia, retinopathy, intrauterine infection, and hearing loss were observed mainly. If we pay attention to the changes in the fetoplacental complex, then according to the results of histological examination there are round placental infarctions with a diameter of 1-3 cm, serous-purulent parietal deciduids; membranitis, combination membranitis with deciduit; serouspurulent villusitis and vasculitis. This indicates the following: degenerative processes, insufficient blood supply, chronic fetal hypoxia. After resuscitation, 36% of newborns were transferred to a children's hospital and 57% were sent home. The main causes of death are: respiratory arrest, neonatal pneumonia and sepsis. This accounted for 7% of the indicators.

**Conclusions.** Premature birth is a serious perinatal problem. Low body weight in 96 newborns was 92.7% (in 89 newborns). To reduce these numbers, it is necessary to identify the causes of preterm birth and reduce risk factors.



## LITERATURES:

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