



than in patients who received preventive therapy melatonin ($5,15 \pm 0,67$), and 9,7 times lower than the control group ($18,06 \pm 1,66$), $p < 0,001$.

Conclusions. Using ant- HtRH and agonists HtRH the purpose of superovulation induction leads to increased oxidative stress processes in follicular fluid that detrimentally affecting the egg, thereby reducing the effectiveness of IVF. 8-isoprostan reliable indicator of oxidative stress and antioxidant system works, its content is dependent inverse correlation with levels of MLT and the number of oocytes obtained after ovarian stimulation. MLT has a strong antioxidant effect, thereby increasing the number of oocytes obtained in patients with reduced ovarian reserve parameters. It may be considered appropriate designation of melatonin antioxidant protective purposes in conjunction with preparation measures for the IVF.

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EARLY DIAGNOSIS OF PRETERM LABOR
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Introduction. Preterm labor is the actual problem of modern obstetrics. The use of the diagnostic capabilities of the various methods of research and medical technology may contribute to early prediction of preterm labor and timely correction of this complication. Disorder of immunoreactivity of the organism is the cause of miscarriage in 40% of cases, up to 30% of preterm labor make to the development of infection, 15% - preeclampsia, 10-15% - cervical incompetence and other complications. Therefore, in parallel with the definition of the role of infection are extremely interesting study pathogenesis significance of disorder of the cytokine profile in the mechanisms of preterm labor.

The aim and problems of work - the definition of non-specific markers for early diagnosis of preterm labor.

Material and methods. We study of the cytokine profile in 32 pregnant women, who were divided into two clinical groups: basic group - 16 patients in whom preterm labor occurred in the period 22-27 weeks, the control group - 16 women with normal pregnancy at term 22-27 weeks. Material for the study served as a blood serum. The content of interleukin (IL) IL-1 β , IL-2, IL-6, IL-8 were determined by enzyme-linked immunosorbent assay (ELISA) in the complex echographic study included fetometry, placentometry, tservikometriya and ultrasonic Doppler examination. The data obtained by sonographic study compared with normative indicators developed for the corresponding period of pregnancy.

Results. The study found that the level of cytokines IL-1 β , IL-2, IL-6, IL-8 in the group of women with preterm labor at different levels in the normal pregnancy period of 22-27 weeks. The level of IL-8 in the main group $30,0 \pm 3,6$ pg / ml was much higher than in the control group $2,0 \pm 0,1$ pg / ml ($p < 0,001$). Similar trends were observed in the level of IL-2. In the basic group, IL-2 correspond to the index $20,0 \pm 2,2$ pg / ml, and much higher than $0,06 \pm 0,001$ pg / ml ($p < 0,001$). A significant increase in IL-8 and IL-2 for preterm labor indicates denote that these index may serve as predictor of pregnancy outcome. These cytokines play a activate role in the mechanism of delivery. In little degree change the number of IL-1 β , IL-6. In the postpartum period in the blood serum was observed slight



increase in IL-1 β and IL-6, as in the basic group ($2,0 \pm 0,03$ pg / ml) and in control - $1,0 \pm 0,02$ pg / ml ($P > 0.05$).

Conclusions. These data suggest that the premature labor content in blood serum cytokines vary in different directions. No significant difference in the concentrations of IL-1 β , IL-6 levels in pregnant women with primary group definition were identified elevated levels of IL-8, IL-2 in peripheral blood can be used as non-specific markers for early detection of preterm labor. The method has high sensitivity, specificity, and safe for mother and fetus.

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COURSE OF PREGNANCY AND CHILDBIRTH WITH COAGULOPATHY

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Introduction. In violation of blood coagulation can meet the doctor in the practice of any profession, but even hematologist sometimes feels some difficulties in identifying the real reason, and in the choice of adequate therapy. This abnormality is found in 14-18% of pregnant women and growing every year, and is on the third leading cause of mother mortality.

Aim: to identify the impact of coagulopathy on the course of pregnancy and childbirth.

Results. The investigation was conducted at the maternity house №2 m. Odessa. We was parsing 90 women from 20 to 35 years. It was created 2 groups of observation, the first included 60 women with coagulopathy, the second - 30 healthy (control group). All patients were comprehensively examined. The results of special studies: D-dimers - 400, fibrinogen - 15 g / l in 2 semester, prothrombin index - 200% in 3 trimester ,platelet aggregation - 80%). Among the study group, mild preeclampsia at 50 people, placental dysfunction in 40, mild anemia at 55, polyhydramnios in 30 ,early postpartum hemorrhage in 35 people.

Conclusions. After analyzing the results it must be concluded that the presence of coagulopathy complicating pregnancy and childbirth, so you need to allocate women with this pathology at risk of obstetric complications and thoroughly diagnose coagulopathy

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CHANGE UTERINE BLOOD FLOW BEFORE LABOR

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Introduction. Readiness to leave the pregnant women for childbirth has great practical significance; it allows the possibility predicted by anomalies of labor activity. At the present time, no data of research on the hemodynamic of the cervix before labor and during labor.

The aim - the study of a blood flow of the uterus on the eve of physiological labor.

Material and methods. The study included 30 pregnant women between the ages of 18 to 24 years in terms of 37-42 weeks of gestation, which was determined by Doppler blood flow in the general uterine artery, in its ascending and descending branches, arteries and veins in the stroma of the cervix, in the descending branch of the uterine artery at the level of projection of the isthmus. During the study calculated the peak systolic velocity of blood flow (PSV), end diastolic velocity (EDV), resistance index (RI) and systolic-diastolic ratio (SDR). The studies were conducted in the dynamics, 3-5 and 1-2 days prior to delivery. For statistical analysis used Student's t-test .



- Dudnichenko N.A., Pirozhenko Yu. S., Kolisnyk A. I., Fesenko E.A. 135**
CLINICAL DIAGNOSTIC PECULIARITIES OF ENDOMETRIAL HYPERPLASIA ACCOMPANIED BY HYSTEROMYOMA 135
- Dynnik O.O. 136**
THE ROLE OF SEX STEROID-BINDING GLOBULIN IN ABNORMAL UTERINE BLEEDING AT PUBERTY 136
- Fedkovich L. A., Epshtein M. M., Piloyan A. Zh., Sheyko A. I. 138**
STRUCTURAL ABNORMALITY OF FEMALE GENITALIA (CASE REPORT) 138
- Gradil O.G. 139**
THE ROLE OF OVARIAN RESERVE IN ART PROGRAMS 139
- Khan Aqeel Aftab, Taiwo Toyeeb 140**
EARLY DIAGNOSIS OF PRETERM LABOR 140
- Korolevych R.R. 141**
COURSE OF PREGNANCY AND CHILDBIRTH WITH COAGULOPATHY 141
- Litvinova A.V. 141**
CHANGE UTERINE BLOOD FLOW BEFORE LABOR 141
- Liubomudrova K.S., Parashchuk V.Y., Serdiuk V.V. 142**
MODERN APPROACH TO THE PROBLEM OF OVARIAN HYPERSTIMULATION SYNDROME 142
- Lutsky A.S. 143**
PREGNANCY RATES AFTER TRANSFER OF CRYOPRESERVED EMBRYOS VITRIFICATION METHOD 143
- Marakushina E.A., Vygovskaya L. A., Pokryshko S.V. 144**
RETROSPECTIVE ASSESSMENT OF GESTATIONAL PYELONEPHRITIS FACTORS 144
- Mu'awya Salem Nasr Almaradat 144**
COMPARATIVE ANALYSIS OF DIFFERENT METHODS OF CORRECTION CERVICAL INCOMPETENCE 144
- Palamarchuk V. V., Vygivska L.A., Blagoveshchensky E. V., Rogachova N.Sh. 146**
CLINICAL PATHOGENETIC CHARACTERISTICS OF HORMONAL HOMEOSTASIS IN WOMEN WITH ARTERIAL HYPERTENSION FOLLOWING SURGICAL MENOPAUSE 146
- Palamarchuk V. V., Vygivska L.A., Blagoveshchensky E. V., Rogachova N.Sh. 146**
PSYCHOLOGICAL ASPECTS OF MENOPAUSAL SYNDROME SECONDARY TO UTERINE LEIOMYOMA 146
- Prudivus A. A., Chumak A. M., Buravel B. O. 147**
METHODS OF CERVICAL INCOMPETENCE CORRECTION IN PREGNANT 147
- Pylypenko N.S., Reznik M. A., Rakityansky I.Yu., Rubinskaya A. N. 148**
EXPERIENCE INDOLE-3-CARBINOL IN THE TREATMENT OF RETENTION CYSTS (CASE REPORT) 148
- Reznik M. A., Rakityansky I.Yu., Rubinskaya A. N., Dyakova I.V. 149**
ULTRASOUND INDICES OF OVARIAN ENDOMETRIOSIS 149
- Riabushko I.R., Mikhanovskiy A.A. 150**
THE ANALYSIS OF 5-YEAR TREATMENT OUTCOME OF PATIENTS WITH CANCER OF VULVA 150
- Saytarly D. P., Demidenko O.D., Rubinska T. V., Merenkova I. M. 151**
MENSTRUAL FUNCTION PECULIARITIES IN REPRODUCTIVE AGE WOMEN WITH SIGNS OF CONNECTIVE TISSUE DYSPLASIA 151
- Skibina K.P. 152**