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**RETROSPECTIVE ASSESSMENT OF GESTATIONAL PYELONEPHRITIS FACTORS**

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**Relevance**. There has recently been a significant exacerbation in the problem of gestational pyelonephritis in modern obstetrics. According to the Ministry of Health data, its incidence in pregnant women increased by 3.6 times from 2005 to 2014. In most cases, women tend to develop pyelonephritis at the age of up to 40 years, usually during pregnancy. This limits their reproductive function, can cause premature birth, resulting in the birth of children, prone to kidney disease. Gestational pyelonephritis has a negative impact on the course of pregnancy and the health of fetus.

**The purpose of the study**. To provide retrospective identification of gestational pyelonephritis risk factors.

**Materials and methods**. The study was performed at Kharkiv City Maternity Hospital No.1. The study included 60 pregnant women at 30-40 weeks of gestation. All the women were divided into 3 clinical groups. Group I comprised women with gestational pyelonephritis, who underwent surgical intervention (stenting), group II involved women with gestational pyelonephritis without surgical intervention, group III included women with physiological pregnancy. The study implied retrospective analysis of delivery records (form 096/o), prenatal records of pregnant women (form 113/o) for the period of 2012-2014.

**Results and discussion**. Retrospective analysis of the delivery and prenatal records showed that group I included 13 patients (65%) under investigation whose mothers had gestational pyelonephritis, as for groups II and III, there were 9 (45%) and 2 (10%) of such patients, respectively. Common infectious diseases shortly before pregnancy occurred in 14 (70%) of group I patients and 8 (40%) of group II patients, and 4 (20%) of group III women. Ten (50%) pregnant women in group I had a history of inflammatory genital diseases and there were 8 (40%) and 3 (15%) of such patients in group II and III, respectively. Nine (45%) pregnant women in group I, 6 (30%) and 3 (15%) in group II and III, respectively, had kidney diseases before pregnancy (chronic pyelonephritis, urolithiasis).

**Conclusion**. Gestational pyelonephritis is a polymorphically mediated disease. Family history, reproductive system diseases and infectious factor affected by the pregnancy, play an important role in its development. Consideration of all these factors when planning pregnancy can substantially reduce the risk of gestational pyelonephritis and thus prevent complications of childbirth and adverse consequences for the unborn child.