BIOMEDICAL SCIENCES
Conclusion. Thus, cesarean section is a complex surgical intervention with high incidence of intra- and postoperative complications associated with intervention techniques requiring its individualization.

Cheremskaya D., Suchkova N.
ADAPTIVE-COMPENSATORY CAPABILITIES OF FETUSES WITH FETO-FETAL TRANSFUSION SYNDROME
Kharkiv national medical university
Department of Obstetrics and Gynaecology No. 1
Kharkiv, Ukraine
Research advisor: ass. Sharashidze K.Z.

Introduction. The problem of multiple pregnancy remains relevant in modern obstetrics due to the increase in its prevalence worldwide, which is 3% for births and 14% for perinatal mortality. A multiple pregnancy refers to high risk pregnancies as it results in high rate of premature births, high perinatal mortality and infant morbidity. During pregnancy with monochorionic twins, which is 20-30% of all pregnancies, specific complications characteristic to monochorionic type of placentation may develop. One of these complications is fetal transfusion syndrome, which leads to delayed growth of one of the fetuses in 7.5% of cases.

Materials and methods. A 24-year patient N, having the first pregnancy, diagnosed with premature 34-week birth, who delivered monochorionic biamniotic twins, the first of which had a head presentation, and the second — a longitudinal lie, position I, front view.

Results. Diagnostic ultrasound and Doppler examination at the term of 28 weeks revealed the signs of moderately discordant growth of monochorionic biamniotic twins – the smaller size of one of the fetuses; and disorder of fetal-placental arterial hemodynamics of both fetuses. At 34 weeks of gestation, active labor began spontaneously, the patient delivered two male newborns through the natural birth canal. At birth, the weight of the first newborn was 2500 g, and of the second —1700 g. According to the Apgar score, newborn I (a recipient) had 7/8 points, and newborn II (a donor) – 7/7 points. The postnatal condition of the newborn-recipient significantly worsened, which led to his death in the early neonatal period.

Conclusion. The course of adaptation in newborns with monochorionic type of placentation was severe due to peculiarities in the vascular system of the chorion. As a result, fetal transfusion syndrome developed, which led to a delay in the growth of the fetus-donor, and the lack of adaptive compensatory mechanisms (decrease in contractile and pumping function of the heart) of the fetus-recipient became the cause of his death in the early postnatal period.