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Conclusion. Thus, on the basis of the obtained data, evidence of increased expression of Ki-67 proliferation protein and intensification of the neovascularization process in endometrial biopsies with underlying myometrium in adenomyosis and under conditions of combination of adenomyosis with hyperplastic processes, endometrial, be used as a diagnostic in detecting adenomyosis, including associated with hyperplastic endometrial processes.

The prospect of our further research in this area is to study other markers of progression of adenomyosis in order to improve its early diagnosis on material obtained not only invasively but also non-invasively (blood serum), as well as finding methods for diagnosing the preclinical stage of the disease.

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FETAL ACIDAEMIA BE PREDICTED BY ANTE-NATAL RISK FACTORS

Introduction. The most common method of intrapartum fetal surveillance in women with high-risk pregnancies is continuous cardiotocography. The purpose of monitoring the condition of the fetus is the timely diagnosis of hypoxia, which can cause fetal death or damage, leading to disability. Despite its widespread use, the incident of intrapartum fetal hypoxia has remained unchanged. The promising method for diagnosis of fetal hypoxia is the definition the pH of the umbilical cord.

Aim. To study the acid-base state of umbilical cord blood and to determine the antenatal risks that are predictors of fetal acidemia.

Materials and methods. Data was collected from a group of women who had singleton births. Patients were divided into two groups from the total of 50. Main group include 32 pregnant women with fetal acidaemia and umbilical artery cord pH<7.20 . Control group include 18 pregnant women with normal umbilical artery cord pH>7.20. Data on antenatal risk factors included: chronic extragenital diseases, and complications in current pregnancy

Results. The research results showed that most of the antenatal risk factors were significantly associated with development of acidaemia, $\text{pH} < 7.20$ in comparison with control group with $\text{pH} > 7.20$.

Risk factors such as gestational diabetes were 10 patients, urinary tract infection were 8 patients, sensitized pregnancy were 4 patients, post-term pregnancy were 4 patients, pre-eclampsia were 6 patients, that found to be significant for acidemic group of $\text{pH} < 7.20$.

Conclusion. Determination of antenatal risk factors is an important predictor of the development of fetal acidaemia, contributes to the early detection of fetal pathology and timely intervention, improving perinatal outcomes.

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CLINICAL CASE OF ECTOPIC PREGNANCY: ASPECTS OF ULTRASONIC DIAGNOSTICS

Introduction. According to Kumar V. et al. (Kumar V. et al., 2015) approximately 1% of pregnancies are ectopic, and the embryo is usually implanted into the fallopian tube (Sivalingam V. et al., 2011). Its further development leads to its rupture. Bleeding due to an ectopic pregnancy (Lawani O. et al., 2013) is the main cause of maternal death in the first trimester (4-10%), therefore, research in this direction is relevant.

Aim: to analyze the clinical case of ectopic pregnancy with implantation in the right fallopian tube.

Materials and methods. A retrospective analysis of the clinical case of right salpingectomy for an ectopic pregnancy was carried out.

Results. Pregnant V., 37 years old, was admitted to the hospital of the clinical base of the Department of Obstetrics, Gynecology and Pediatric Gynecology with complaints of sharp pain in the lower abdomen on the right, bloating, scanty bleeding from the genital tract. From the anamnesis: pregnancy -1 (real), contraception - interrupted sexual intercourse. Clinical and laboratory examination of blood and urine showed absences of pathological changes.

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