

# The influence of syphilis on pregnancy

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## Introduction

Nowadays syphilis is a serious infectious disease because its complications and consequences can lead to disability and death.

## Materials & methods

155 pregnant women (aged 16-45 years) with syphilis were examined and treated from 2013 to 2016. The analysis of these pregnant women's case history as well as of medical records of their newborn children was carried out. All patients were examined of serological tests for syphilis (Complement Fixation Test (CFT) with treponemal and non-treponemal antigens, Reaction of Immunofluorescence (RIF) in modification 200 and ABS., Reaction of Immobilization of Treponema pallidum (RIT), ELISA) and blood and urine test. The children's examination included X-ray of long tubular bones and wrists, serological tests for syphilis, consultation other specialist such as: a pediatrician, neurologist, ophthalmologist, otolaryngologist and dermatovenereologist. Ultrasound examination was carried out on an ultrasonic device SAL-38 produced by Toshiba company (Japan).

## Results

In 75 cases (48.8 %) the observed pregnancy was pathologic in this or that way. The major gynecological complications in women with syphilitic infection were anaemia in 48 cases (31.05 %), threatened miscarriages in 46 cases (29.8 %), toxemia of pregnancy in 44 cases (28.4 %) (table 1). The main peculiarity was a combination of several complications of pregnancy. In the first part of pregnancy impairment of blood circulation (manifested in the shape of moderate intervillus hematoma, edemas of villus stroma, plethora of villus blood-vessels, irregular blood inflation) prevails in placenta of women infected with syphilis. In the second part of pregnancy inflammatory changes and tendencies towards villus sclerosis accumulate. In the cases of placentitis and its complications the following tendencies were observed: thickening and distinctive 'cloudy' non-homogeneity of placenta in 14 cases (30 %), small-cystic degeneration and hypophysical cachexia in 5 cases (10 %), hematomae, cysts, petrifications of placenta – each in two cases respectively (4 %).

## Conclusions

The pathological changes in the fetus in pregnant women with syphilis such as: increased echogenicity of internal organs, change of quantity of amniotic fluid, violation of the maturation of the placenta are not rude. But this can not be attributed to congenital anomalies and can not be interpreted as a norm.

Table 1. The major gynecological complications in pregnant women with syphilis

Kind of complication	Number of women (n=155)
Anaemia	48 (31.05 %)
Threatened miscarriages	46 (29.8 %)
Toxemia of pregnancy	44 (28.4 %)