

Modern Aspects and Features of the Manifestation of Preeclampsia against the Background of Chronic Hypertension

Kosimova Dilnoza Sayotovna

Article Information

Received: January 29, 2022

Accepted: February 30, 2023

Published: March 31, 2023

Keywords: *PE-preeclampsia, AH-arterial hypertension, AP-arterial pressure.*

ABSTRACT

The main objectives of the demographic policy of the Republic of Uzbekistan to continue depopulation, reduce fertility and mortality, including maternal and infant mortality, are aimed at improving the health of the entire population, including the reproductive one. (3) Improving the material and technical base of obstetric institutions through the implementation of the national project priority "Health", funds from the reserve fund of the President of Uzbekistan, as well as regional targeted programs have significantly expanded the possibilities for diagnosing complications of pregnancy and childbirth (6).

The advances of modern medicine have allowed many women with extragenital diseases to realize their reproductive function, and therefore the prevalence of various extragenital diseases among pregnant women has increased significantly. One of the symptoms that complicate the course of pregnancy in women with various extragenital diseases is an increase in blood pressure (BP). Arterial hypertension caused by somatic diseases of a woman may be a background for the development of combined forms of preeclampsia, including its severe forms (eclampsia), premature detachment of a normally located placenta, accompanied by bleeding, antenatal fetal death and requiring emergency measures to save the lives of patients (8) Currently, preeclampsia is one of the most urgent problems of modern obstetrics due to its wide prevalence, the complexity of etiopathogenesis, the lack of early and reliable measures for prevention and treatment, the high rate of maternal and perinatal morbidity and mortality, the economic costs of intensive care and resuscitation of patients. The frequency of preeclampsia, unfortunately, does not tend to decrease, while there is an increase in severe, as well as oligosymptomatic and atypical forms, which are the cause of maternal and perinatal mortality (5). Currently, many researchers consider PE as an acute pathology of the endothelium (generalized damage to the vascular endothelium or endothelial dysfunction), leading to impaired vascular tone, vascular permeability, and the balance between the thrombogenic potential of the vascular wall and its thrombosis resistance. (Zazerskaya I. E., 1991., Zanuilina M. I. 1995., Kiseleva N. I. 2004., Shebeko V. I. 1999., Shifman E. M. 2003., Solov I. A., 2006., Pavlov G.V.s. et al. 2009., Sidorova I.S.s. et al. 2008..)

Qualitative and quantitative assessment of renal blood flow is carried out using a program for vascular Doppler studies, while calculating V max - the maximum systolic blood flow velocity, V min - the final diastolic blood flow velocity.

The following indicators are used

P= 50 Data scatter

- 1 Hb, g/l, 10.6 ± 0.5 9.2-11.8
- 2 Erythrocytes, $10^{12}/l$ 3.06 ± 0.31 2.90-11.8
- 3 Ht, % 36.0 ± 1.7 34.1-39.0
- 4 Total protein, g/l 62.4 ± 1.9 60.4-66.7
- 5 Blood urea $\mu\text{mol}/l$ 4.8 ± 0.9 4.0-5.8
- 6 Blood creatinine mmol/l 68.8 ± 3.0 62.7-78.4
- 7 Uric acid $\mu\text{mol}/l$ in blood 169.6 ± 5.4 158-201.4
- 8 Daily diuresis, ml 1127.4 ± 23.7 1011-1270
- 9 MAU, $\mu\text{g}/\text{mg}$ 29.7 ± 3.4 19.3-37.4
- 10 Uric acid, mmol/hour in urine 2.1 ± 0.4 1.4-2.6

From the data presented in the table, it is easy to see that for most of the studied indicators, there were no pronounced changes with the progression of pregnancy. Anemia was still noted, somewhat more pronounced at 28-32 weeks of gestation, which we associated with hydremia, as evidenced by a statistically significant decrease in hematocrit by 10.9%. Statistically significantly increased the concentration of uric acid in the blood of pregnant women in the control group by 20.5% in terms of gestation 28-32 weeks. This diagnosis was established on the basis of placentometry, fetometry and determination of the fetal bioprofile by ultrasound.

Undoubtedly, unfavorable conditions of intrauterine development largely determine the course of the postnatal period, in connection with this, the treatment of diseases through careful dynamic monitoring of the gestational process, timely and adequate choice of the method and time of delivery are of particular importance. All pregnant women of this group, despite the results obtained, indicating more pronounced changes in the circulatory system of the mother and fetus, caused by the total effect of concomitant arterial and gestational hypertension, we were subjected to differentiated corrective therapy with strict monitoring of all studied parameters during treatment. We considered that adequate antihypertensive therapy is the basis of pathogenetic therapy, while a differentiated approach to the choice of antihypertensive drugs is of no small importance. According to the recommendations of the Clinical Protocol, antihypertensive therapy was started at DBP $>/100$ mm Hg, in women with HA of the 2nd degree - from the second trimester. In our opinion, amlodipine (normodipine) is currently the drug of first choice for long-term antihypertensive therapy in pregnant women with CAH. Amlodipine is a 3rd generation calcium antagonist of the dihydropyridine series, its effect is due to peripheral vasodilation. Amlodipine differs from 1st and 11th generation dihydropyridines in its high efficiency, very low incidence of side effects, large dosage range, duration of action (more than 24 hours), and can be used once a day. Pregnant women with CAH of the 2nd degree were prescribed normodipine at a dose of 5.0-7.5 mg/day. in 1 or 2 doses. Pregnant women with hypertension of the 1st degree in subtherapeutic doses (2.5-3.75 mg / day) were prescribed normodipine, taking into account its vasodilating effect for hemodynamic correction. Taking into account the above, in order to normalize the content of magnesium in the body, we prescribed Magne -B6 at a dose of 2 tablets or 10 ml of drinking solution (contents of 1 ampoule) three times a day. Taking this drug in the above doses by pregnant women with EH from the 2nd trimester of pregnancy significantly reduced the number of cases of PE layering, especially severe, early forms. To prevent the progression of preeclampsia and fetal disorders, we widely used low doses (100 mg 1 time per day) of acetylsalicylic acid (aspirin) in GB 2nd degree, in GB

1st degree in combination with overweight and obesity.

References:

1. Patochkina N.A., Komelkova M.V., Tseylikman O.B., Lapshin M.S. Stress: psychological, biochemical and psychophysiological aspects. Chelyabinsk, 2017).
2. R.N. Alyautdin, M.D. Guseinov, I.N. Zilfikarov, B.K. Romanov. Stress-protective phytotherapy. Biomedicine, No. 3, 2011, С. 115-119.
3. Zinc and Oxidative Stress: Current Mechanisms. Marreiro DD, Cruz KJ, Morais JB, Beserra JB, Severo JS, de Oliveira AR. *Antioxidants* (Basel). 2017 Mar 29;6(2):24.
4. Dinstel R.R., Cascio J., Koukel S. The antioxidant level of Alaska's wild berries: high, higher and highest // *Int. J. Circumpolar Health*. 2013. Vol. 72.
5. ROS, pro-inflammatory cytokines: interleukin (IL) -1, -8; interferon- γ (IFN- γ
6. DS Kosimova, AU Adashev. Directions to increase productivity competitiveness in industrial enterprises // *Economics and Innovative Technologies*. 2019. №2. С. 17. 13.
7. Olimova Aziza Zokirovna. Частота Встречаемости Миомы Матки У Женщин В Репродуктивном Возрасте. *JOURNAL OF ADVANCED RESEARCH AND STABILITY (JARS)*. Volume: 01 Issue: 06 | 2021. 551-556 p
8. Дилноза Саётовна Косимова. ИЗУЧЕНИЕ ЭЛЕМЕНТНОГО СПЕКТРА В КРОВИ У МЫШЕЙ С САХАРНЫМ ДИАБЕТОМ. // *Современные инновации* № 4 (38), 2020
9. Азиза Садиллоевна Жалилова, Дилноза Саётовна Косимова. Клинико– Лабораторная Характеристика Пациентов С Covid-19 И Предиктор Антибактериальной Терапии // *CENTRAL ASIAN JOURNAL OF MEDICAL AND NATURAL SCIENCES*. 2021. С. 81–86.
10. DS Kosimova, AV Paliuk. Prohibition of Discrimination: Concepts, Features and Obligations of the State according to the Convention for the Protection of Human Rights and Fundamental Freedoms // *L. & Innovative Soc'y*. 2021. С. 99.
11. АА Элмурадова, ДС Косимова, НШ Шадыева. Вклад Абу али ибн Сино в развитие фитотерапии // *Новый день в медицине*. 2020. №4. С. 604-606.
12. Рахимова Г. Ш. ИНТЕРПРЕТАЦИЯ МАКРОСКОПИЧЕСКОЙ ТОПОГРАФИИ СЕМЕННИКОВ ПОДОПЫТНЫХ БЕЛЫХ КРЫС ПОСЛЕ МОДЕЛИРОВАННОЙ ЧЕРЕПНО-МОЗГОВОЙ ТРАВМЫ // *ЎЗБЕКИСТОН РЕСПУБЛИКАСИ СОҒЛИҚНИ САҚЛАШ ВАЗИРЛИГИ ТОШКЕНТ ТИББИЁТ АКАДЕМИЯСИ*. – С. 83.
13. Shamsievna R. G. Modern Aspects of Studying the Features of Morphofunctional Characteristics of Testes under Various Factor Influences // *Eurasian Scientific Herald*. – 2022. – Т. 7. – С. 279-286.
14. Sh R. G. Experimental modelling of traumatic brain injury in white rats // *Тиббиётда янги кун*. – 2021. – Т. 2. – №. 34. – С. 197-200.
15. Рахимова Г. Ш. Тажрибадаги оғир бош мия шикастланишидан кейин 3 ойлик оқ каламуш уруғдонларининг макроскопик хусусиятлари // *Barqarorlik va yetakchi tadqiqotlar onlayn ilmiy jurnali*. – 2022. – С. 303-306.
16. Рахимова Г. Ш. Креативный метод преподавания “Учебная стопка” для студентов медицинских институтов и оценка эффективности его использования // *BARQARORLIK VA YETAKCHI TADQIQOTLAR ONLAYN ILMIY JURNALI*. – 2022. – С. 56-61.

17. Rakhimova G. S., Kadirova L. V. THE USE OF INTERACTIVE METHODS TO ASSESS THE LEVEL OF ASSIMILATION OF THE MATERIAL STUDIED IN PATHOLOGICAL PHYSIOLOGY //Oriental renaissance: Innovative, educational, natural and social sciences. – 2022. – Т. 2. – №. 1. – С. 463-469.
18. Sayotovna K. D. The course of the postpartum period in women with severe preeclampsia, depending on the method of delivery //Web of Scientist: International Scientific Research Journal. – 2022. – Т. 3. – №. 6. – С. 899-904.
19. Rakhimova G. S., Kadirova L. V. THE INTERACTIVE USAGE OF METHODS TO ASSESS THE LEVEL OF ASSIMILATION OF THE MATERIAL STUDIED IN PATHOLOGICAL PHYSIOLOGY //Oriental renaissance: Innovative, educational, natural and social sciences. – 2022. – Т. 2. – №. 1. – С. 513-518.
20. Sh R. G., Kadirova L. V. The condition of some endocrine glands of white rats after an experimental traumatic brain injury //The new day in medicine. – 2021. – №. 5. – С. 37.
21. Рахимова Г. Ш. Современные Аспекты Изучения Особенностей Морфофункциональных Характеристик Семенников В Норме И При Различных Факторных Воздействиях //Central Asian Journal of Medical and Natural Science. – 2022. – Т. 3. – №. 6. – С. 15-23.
22. Rakhimova G. Sh. The Importance of Proteinuria as a Predictor of Diagnosis Risk Factor for Chronic Kidney Disease// The Pharmaceutical and Chemical Journal. – 2021. – Т. 8. - №. 1. – С. 79-81.
23. Rakhimova G. MODELING OF ACUTE TRAUMATIC BRAIN INJURY IN WHITE MONGREL RATS //Академические исследования в современной науке. – 2022. – Т. 1. – №. 19. – С. 206-208.
24. Sayotovna K. D. The Effect of Stress on the Body of Animals //Central Asian Journal of Medical and Natural Science. – 2022. – Т. 3. – №. 1. – С. 164-171.
25. Косимова Д. С. О моделях экспериментального развития СД2 //Современные инновации. – 2020. – №. 4 (38). – С. 13-14.