"Затверджено" на методичній нараді кафедри акушерства, гінекології та плануваня сім'ї медичного інституту СумДУ протокол № \_\_\_\_\_ від "\_\_\_\_" 2021р.

# Methodical development

independent work of a student in the discipline "Obstetrics"

Topic: Anomalies of contractile activity of the uterus

Number of hours - 3.

**Purpose:** to study the classification, risk factors, pathogenesis of various types of birth defects, modern methods of diagnosis and treatment of labor disorders from the standpoint of evidence-based medicine, prevention of labor disorders, perinatal consequences for the fetus.

**The student must:** assess the nature of labor, to make a differential diagnosis between the normal course of labor and anomaly of labor, to prescribe the necessary treatment for various types of anomalies.

#### **Class organization:**

Organizational moment	2% study time;
Motivation of the topic	3% study time;
Control of the initial level of knowledge	20% study time;
Independent work of student	35% study time;
Control of the final level of knowledge	20% study time;
Assessment of students' knowledge	15% study time;
Generalization of the teacher, homework	5% study time ;

#### I. Testing: 20 tests.

### II. Key issues:

- 1. Classification of anomalies of labor.
- 2. Etiology of anomalies of labor.
- 3. The main methods of diagnosing the weakness of labor.
- 4. On what principles is the treatment of weakness of labor based?
- 5. What are the main causes of secondary weakness of labor?
- 6. What causes excessive labor?
- 7. What is uncoordinated labor?
- 8. What complications for the mother are possible with the weakness of labor?

- 9. What complications for the mother are possible with excessive labor?
- 10. What complications in childbirth are possible with uncoordinated labor?
- 11. What excludes excessive labor?
- 12. Prevention of birth defects.

## **III. Practical experience:**

- 1. Determining the nature of labor.
- 2. Determining the degree of maturity of the cervix.
- 3. Prescribe treatment for the pathological preliminary period.
- 4. Assign a treatment regimen for weakness of labor.
- 5. Prescribe treatment for uncoordinated labor.
- 6. Prescribe treatment for excessive sexual activity

# **IV. Solving situational problems.**

## Tasks for self-training and self-correction of the initial level of skills

1. Reborn 26 years within 40 weeks. The contractions started 8 hours ago. 2 hours ago amniotic fluid departed. The position of the fetus is longitudinal, the main presentation. Coolant - 100 cm, VDM - 42 cm. Contractions in 4-5 minutes, 25 seconds. The cervix is smoothed, the opening is 4 cm. There is no amniotic sac. The head of the fetus is pressed to the entrance to the small pelvis. What complication arose in childbirth?

### A. Primary weakness of labor

- B. Premature discharge of amniotic fluid
- C. Secondary weakness of labor
- D. Uncoordinated labor
- E. Clinically narrow pelvis

2. A 25-year-old woman has been in labor for 16 hours. Attempts are ineffective, lasting 1.5 hours. The head of the fetus in the pelvic cavity. The fetal heartbeat suddenly became dull, arrhythmic 100 / min. At vaginal research: opening of a neck of a uterus is full, a fruit bubble is absent. Head in the pelvic cavity. What are the further obstetric tactics?

### A. Imposition of obstetric forceps

- B. Further conservative delivery
- C. Cesarean section
- D. Vacuum extraction of the fruit

## E. Oxytocin rodostimulation

3. First-born, childbirth lasts 10 hours, contractions at first strong become weaker and weaker and at the time of examination for 10-15 s in 10-15 minutes. The fruit is in the main presentation. The fetal heartbeat is clear, 136 beats / min. At vaginal research of opening of a uterine eye of 9 cm. The amniotic sac - the whole. The head is pressed to the entrance to the small pelvis. Arrow-shaped suture in the right oblique size, a small crown on the left, closer to the womb. Cape is not reached. Which of the following is most appropriate:

# A. Amniotomy, administration of oxytocin

- B. Cesarean section
- C. Obstetric forceps
- D. Sleep-rest, antispasmodics
- E. Skin and head forceps

4. A 32-year-old woman was admitted to an obstetric hospital in connection with the beginning of regular labor, early ejaculation of amniotic fluid. At the end of the first period of labor contractions slowed down, lasting 25-30 seconds, every 4-5 minutes. In the last three hours, the opening of the cervix is 1 cm. What complication occurred?

## A. Secondary weakness of labor.

- B. Primary weakness of labor.
- C. Uncoordinated labor.
- D. Excessive labor.
- E. Cervical dystocia.

5. The mother, 25 years old, is in labor for 16 hours. 2 period of childbirth. Attempts are ineffective, lasting 1.5 hours. The head of the fetus in the pelvic cavity. The fetal heartbeat is deaf, arrhythmic 100 beats per minute. At vaginal research: opening of a neck of a uterus is full, a amniotic sac is absent. Head in the pelvic cavity. What tactics?

### A. Use obstetric forceps.

- B. Conservative delivery.
- C. Perform a cesarean section.
- D. Vacuum extraction of the fetus.
- E. Oxytocin stimulation.

6. Repeated childbirth in women 30 years lasts 18 hours. Attempts began 2 hours ago. The fetal heartbeat is clear, rhythmic 136 beats / min. Vaginal examination: the opening of the cervix is

complete, the fetal head in the plane of exit from the pelvis. Sagittal suture in a straight size, a small band near the womb. Diagnosed with primary weakness of labor. Determine further tactics of childbirth.

# A. The operation of imposing the original obstetric forceps.

- B. Stimulation of labor.
- C. Cesarean section.
- D. Skin and head forceps according to Ivanov
- E. Vacuum extraction of the fetus.

7. The newborn within 40 weeks was taken to the maternity hospital with contractions lasting 9 hours, the water receded 2 hours ago. The contractions are weak, short, thin after 12-15 minutes for 20-25 seconds. Fetal heart rate 140 beats / min, rhythmic Vaginal examination: the neck is smoothed, opening 4 cm, the amniotic sac is absent, the fetal head is pressed to the entrance to the pelvis. What is the further conduct of childbirth?

## A. Stimulation of labor

- B. Conservative observation
- C. Cesarean section
- D. Vacuum extraction of the fetus
- E. Intravenous methylergometrine

8. In the first-born, 30 years old, against the background of a pathological preliminary period lasting more than two days, amniotic fluid spilled 6 hours ago, the gestation period was 39 weeks. There is no regular labor. The head of the fetus is presented above the entrance to the small pelvis. The fetal heartbeat is clear, rhythmic 142 beats. in 1 minute At vaginal examination: the cervix is "immature". What are the next tactics tactics?

### A. Perform a cesarean section

- B. Prepare the cervix with prostaglandins
- C. Stimulate labor with oxytocin
- D. Wait for spontaneous labor
- E. Prolong pregnancy on the background of antibacterial therapy

9. In the first-born, childbirth lasts 6 hours. Contractions for 25 seconds. after 4-6 minutes accompanied by pain that spreads from the lower uterus to the top. Rhythmic heartbeat of the fetus 156 beats. in min. At vaginal research: the neck of a uterus is shortened to 1 cm, the external eye is opened on 3 cm, during contractions its edges narrow. Head over the entrance to the small pelvis. What pathology complicated childbirth?

### A. Uncoordinated labor

B. Weakness of labor

C. Excessive labor

D. Threat of uterine rupture

E. Cervical dystocia

10. In the first-born, 37 years of age, labor lasts for 10 hours. Contractions for 20-25s in 6-7 minutes. The position of the fetus is longitudinal, the head is pressed against the entrance to the small pelvis. At vaginal research :: a neck of uterus up to 1 cm long, passes 2 cross fingers. The amniotic sac is absent. Your diagnosis?

#### A. Primary weakness of labor

B. Secondary weakness of labor

C. Normal labor

D. Discoordination of labor

E. Pathological preliminary period

#### **Recommended reading:**

1. Obstetrics and gynecology: textbook: in 2 books. Book 1 Obstetrics: Obstetrics / BM Ventskivsky, MO Shcherbina, VI Grishchenko [etc.]; - 4th ed., Ed. - К.: Медицина, 2020. - 424 р.

2. Obstetrics and gynecology: textbook: in 2 books. Book 2 Gynecology / VB Ventskivsky, MO Shcherbyna, VI Grishchenko [etc.]; - 3rd ed., Ed. - К.: Медицина,

2020. - 376 p.

3. Workshop on obstetrics / II Bachynska - K .: "Medicine", 2021. - 104 p.

4. Workshop on phantom obstetrics / P. Yavirsky, V. Shatylo, T. Yavirska - K .: "Medicine", 2017-144 p.

5. Workshop on gynecology / A.M. Vavilova - K .: "Medicine", 2019. - 96 p.

6. Clinical obstetrics and gynecology / A. Brian, Magovan, Philip Ouden, Andrew

Thomson; scientific editor of the translation by M. Shcherbyna - K .: "Medicine", 2021. - 512 p.

7. Oxford Texbook of Obstetrics and Gynecology / Sabaratram Arulkumaran, Wiliam Ledgar, Lynette Denny, Stergious Doumouchtsis - Oxford University Press, 2020, 928 p.

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