"Затверджено"	
на методичній нараді к	афедри акушерства,
гінекології та плануван	ія сім'ї
медичного інституту С	умДУ
протокол №	
від "	2021p.

# **Methodical development**

independent work of a student in the discipline "Obstetrics"

**Topic**: Pregnancy and childbirth with extragenital diseases.

Number of hours - 3.

**Purpose:** to study the course of pregnancy and childbirth in diseases of the cardiovascular system (heart disease, hypertension, hypotension, diseases of the hematopoietic organs, diseases of the urinary system, liver and gallbladder, respiratory system, digestive system, endocrine system, nervous system; organs of vision, acute and chronic infectious diseases, tuberculosis, gynecological diseases, acute surgical pathology from the standpoint of evidence-based medicine.

The student should: explain the general principles of providing specialized care to pregnant women with extragenital pathology. to analyze the course and management of pregnancy in women with diseases of the cardiovascular system, to interpret the course and management of pregnancy in women with hematopoietic diseases, to explain the course and management of pregnancy in women with respiratory diseases, kidney and urinary tract diseases, endocrine diseases systems, in particular with diabetes, thyroid disease, liver and gallbladder, digestive system, to appoint and conduct a comprehensive examination of pregnant women with extragenital pathology, timely identify contraindications to pregnancy in women with extragenital pathology, its effect on the condition of the pregnant woman, fetus and newborn, deontologically explain to a pregnant woman with extragenital diseases the need for timely examination and regular supervision in a women's clinic, or in the heat institutions, deontologically and reasonably convince a pregnant woman with severe extragenital diseases of the need to terminate a pregnancy according to the indications at any stage of pregnancy.

# **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:

#### II. Key issues:

- 1. What are the general principles of providing specialized care to pregnant women with extragenital pathology?
- 2. How many times during pregnancy and in what terms it is necessary to hospitalize a pregnant woman with extragenital pathology in a planned manner?
- 3. What diseases of the cardiovascular system most often occur in pregnant women?
- 4. What complications occur in pregnant women with hypertension and what is their mechanism?
- 5. What methods of delivery are used in pregnant women with diseases of the cardiovascular system.?
- 6. What are the features of the course and management of pregnancy in venous diseases in pregnant women?
- 7. What thrombotic complications due to venous diseases are possible in pregnant women, what are the tactics of pregnancy?
- 8. What are the features of the course and management of pregnancy in women with diseases of the hematopoietic organs (anemia of pregnancy)?
- 9. What are the features of the course and management of pregnancy in women with respiratory diseases?
- 10. What are the features of the course and management of pregnancy in women with kidney disease and urinary tract?
- 11. What are the features of the course and management of pregnancy in women with diseases of the endocrine system, what pathology is most common?
- 12. What complications of pregnancy are observed in women with diabetes?
- 13. With what complications of diabetes is pregnancy contraindicated?
- 14. What factors influence the choice of time and method of delivery in the case of diabetes?
- 15. How do thyroid disease affect pregnancy?

# **III. Practical experience**:

- 1. Appoint and conduct a comprehensive examination of pregnant women with extragenital pathology.
- 2. Timely identify contraindications to pregnancy in women with extragenital pathology.
- 3. Predict the deviation of pregnancy and childbirth in women with extragenital pathology, its impact on the condition of the pregnant woman, fetus and newborn.
- 4. Deontologically explain to a pregnant woman with extragenital diseases about the need for timely examination and regular supervision in a women's clinic or in specialized institutions.
- 5. Deontologically and reasonably convince a pregnant woman with severe extragenital diseases of the need to terminate a pregnancy according to the indications at any stage of pregnancy.

# IV. Solving situational problems.

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

- 1. In a pregnant woman suffering from hypertension of the I degree, within 35 weeks there was edema on the lower extremities and anterior abdominal wall, protein in the urine to 3 g / l, blood pressure rose to 170/120 mm Hg. century, began to worry about headaches and impaired vision. Carried out for 4 hours, intensive treatment did not work. What tactics are needed in this case?
- A. Carrying out childbirth
- B. Continuation of intensive care
- C. Immediate delivery by cesarean section
- D. Conservative birth
- E. Immediate delivery by obstetric forceps surgery
- 2. A 22-year-old pregnant woman was admitted to the maternity hospital with complaints of headache, fever up to 39 °C, runny nose, pain in the lumbar region and lower abdomen, frequent and painful urination, pain in the costo-lumbar angle. Low back pain is aggravated by breathing, radiating to the groin. There was vomiting, nausea. From the anamnesis it was found out: the first pregnancy, 24 weeks; has been suffering from chronic sinusitis for the last 5 years. What disease should a doctor think about in the first place?
- A. Gestational pyelonephritis
- B. Threat of late miscarriage
- C. Acute appendicitis
- D. Acute cystitis
- E. Influenza
- 3. For the first time pregnant at 37 weeks, was admitted to the hospital with complaints of shortness of breath, palpitations, fatigue. As a child she suffered from sore throats, from the age of 15 rheumatism, inactive phase, mitral stenosis 2 tbsp., NK 2 A tbsp. What are the tactics of managing a pregnant woman in this case?
- A. Conservative treatment, delivery with the exception of attempts in the 2nd period
- B. Prolongation of pregnancy in the cardiology department
- C. Conducting childbirth with stimulation of labor
- D. Fruit-destroying operation
- E. Childbirth with the exception of the 2nd period by vacuum extraction of the fetus

- 4. Pregnant, 24 years, 29 weeks of pregnancy, complains of malaise, nausea, headache, fever up to  $38\,^{\circ}$  C, fever, pain in the lumbar region, which spreads in the direction of the ureter, frequent and painful urination. Pasternatsky's symptom is positive. In blood leukocytosis, in urine protein to  $0.5\,\mathrm{g}$  / 1 is defined, leukocytes cover all field of vision. Your diagnosis?
- A. Acute glomerulonephritis
- B. Acute appendicitis
- C. Acute cholecystitis
- D. Acute pancreatitis
- E. Acute gestational pyelonephritis
- 5. Pregnant at 36 weeks in a supine position complains of weakness, difficulty breathing. During the examination in the supine position after 5 minutes there is asthma up to 24 per minute, lowering blood pressure to 70/50 mm Hg. st; in the side position respiratory rate 20 per minute, blood pressure 115/65 mm Hg. Art. Indicate the cause of this condition.
- A. Hypovolemia
- B. Neurocirculatory dystonia of hypotonic type
- C. Syndrome of inferior vena cava compression
- D. Preeclampsia
- E. Eclampsia
- 6. The second pregnant woman at 11 weeks is worried about dry mouth, thirst, polyuria, significant weight loss, general weakness. In the anamnesis of a stillbirth weighing 4,600. Blood sugar 10.8 mmol / liter. Ophthalmologist's conclusion retinopathy. Tactics of further management of pregnancy?
- A. Urgent termination of pregnancy for medical reasons
- B. Prolongation of pregnancy on the background of insulin therapy
- C. Metabolic therapy
- D. Treatment in an endocrinology clinic
- E. Abortion after improvement
- 7. Pregnant for the first time, 24 years old. She was admitted to the maternity hospital in the first period of timely delivery. The course of pregnancy without complications. Pelvic dimensions: 26-28-30-20. The head pressed to an entrance to a small pelvis is presented. The heartbeat of the fetus is clear, rhythmic 136 beats / min. One and a half years ago she underwent heart surgery mitral commissurotomy with a positive result. What are the tactics of childbirth?
- A. Vacuum extraction

- B. Cesarean section
- C. Conservative delivery
- D. Early amniotomy
- E. With the exception of the second period of childbirth
- 8. First pregnant, 21 years old. At the age of 15 she suffered an acute attack of rheumatism. At the age of 18 he was diagnosed with a heart defect. During the examination it was established: pregnancy 9 weeks. Rheumatism, active phase. Endomyocarditis. Combined mitral water. HNK, II-B. Doctor's tactics?
- A. Continue pregnancy
- B. Treatment of the active phase of rheumatism followed by abortion
- C. Continuation of pregnancy on the background of treatment of rheumatism
- D. Continuation of pregnancy on the background of surgical treatment of heart disease
- E. Abortion
- 9. The mother was taken to the maternity hospital in serious condition. Childbirth is active. Cyanosis of the skin and mucous membranes. Swelling of the lower extremities. At auscultation presystolic noise, accent of the I tone on top, the top and left borders of heart are changed. There was a cough. The therapist diagnosed pulmonary edema. At vaginal research: opening of a neck of a uterus is full, a head of a fruit in a cavity of a small pelvis, an arrow-shaped seam in the direct size of the exit plane. The fetal heartbeat is rhythmic, up to 142 beats / min. What is the birth plan?
- A. Imposition of cavitary obstetric forceps
- B. Give birth a natural course
- C. Cesarean section
- D. Imposition of original obstetric forceps
- E. Accelerate delivery by intravenous oxytocin
- 10. Pregnant Ch., 28 years old, observed in connection with the first pregnancy. She was not ill before pregnancy. Within 26 weeks after eating spicy food I felt low back pain, fever, fever up to  $38.8\,^{\circ}$  C. In the general analysis of blood leukocytes -12,8x109 / l, ESR 28 mm / h, in the general analysis of urine protein 0,045 g / l, leukocytes 38-40 in the field of view, bacteriuria. Which diagnosis is most likely?
- A. Acute glomerulonephritis
- B. Chronic pyelonephritis in the acute phase
- C. Acute pyelonephritis

- D. Mild preeclampsia
- E. Moderate preeclampsia

# **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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