"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: Postpartum septic diseases. Perinatal infections.

Prevention of vertical transmission of HIV.

Number of hours - 3.

**Purpose:** to study postpartum septic diseases: postpartum septic wound, postpartum metroendometritis, metrothrombophlebitis, mastitis, postpartum peritonitis, peritonitis after cesarean section, obstetric sepsis: classification etiology, pathogenesis, diagnosis, diagnosis, evidence, modern care, methods of suppression of lactation .. perinatal infections in pregnant women: clinical course, diagnosis, management tactics, treatment from the standpoint of evidence-based medicine, prevention, principles of pregnancy and childbirth in women with HIV, prevention of vertical transmission of HIV.

**The student must:** be able to prevent postpartum infectious diseases, assess risk factors for postpartum infectious diseases, predict the risk of postpartum infectious diseases, make a plan of examination in case of suspected postpartum infectious diseases, analyze the results of postpartum infectious diseases, diagnose postpartum treatment infectious diseases, evaluate the indications for surgery for postpartum infectious diseases, to prevent postpartum infectious diseases, to be able to develop an algorithm for emergency care in septic shock.

### **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. Physiological and functional features of women's genitals.
- 2. Blood and lymph circulation of the pelvic organs.
- 3. Ways of infection.
- 4. Classification and characteristics of pathogens, methods of their diagnosis.

5. The work of the women's clinic for preventive measures to prevent infectious complications.

6. Carrying out of actions of struggle against purulent-septic complications in extensions of obstetric hospital.

7. Modern view of the etiology, pathogenesis of postpartum infectious complications.

8. Classification of postpartum septic diseases according to Sazonov-Bartels.

9. Postpartum ulcer and endometritis. Clinic, diagnosis, treatment.

10. Parameter. Clinic, diagnosis, treatment.

11. Adnexitis. Clinic, diagnosis, treatment.

12. Postpartum pelvioperitonitis. Clinic, diagnosis, treatment.

13. Postpartum thrombophlebitis. Clinic, diagnosis, treatment.

14. Infectious and toxic shock. Clinic, diagnosis.

15. Principles of intensive care of infectious-toxic shock.

16. Obstetric sepsis. Modern view on the etiology and pathogenesis. Clinic, diagnosis, treatment.

17. Long-term consequences of sepsis and infectious-toxic shock.

18. Principles of pregnancy and childbirth in women with HIV, prevention of vertical transmission of HIV.

### **III. Practical experience:**

1. To make an algorithm for the diagnosis of postpartum septic diseases (endomyometritis, thrombophlebitis, peritonitis, sepsis, septic shock).

2. Develop an algorithm for providing emergency care for postpartum septic diseases.

3. Technique of puncture of the abdominal cavity through the posterior arch.

4. Determine the symptoms of peritonitis by percussion, palpation and auscultation.

5. Interpret the data of the general analysis of blood.

6. Be able to drain the mammary glands.

### **IV. Solving situational problems.**

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

1. Nosocomial infection (nosocomial) is any clinically pronounced infectious disease that has arisen

A During a stay in an obstetric hospital.

B Within 7 days after discharge.

- C Due to intranatal lesions.
- D In medical staff, as a result of his work in an obstetric hospital.

## E All of the above.

2. The causes of generalization of infection can be:

### A Presence of antibiotic-resistant strains of microorganisms.

- B The presence of a large fruit.
- C Presence of premature birth.
- D Extensible presentation of the fetal head.
- E Age of the mother.

### 3. Postpartum mastitis occurs under the following conditions:

- A Hypogalactia.
- B Hypothermia.
- C Hypersecretion of milk.

## D Penetration of infection through cracked nipple.

E All of the above.

### 4. Postpartum endometritis is:

- A Inflammation of parametric tissue.
- B Inflammation of the uterus.

## C Inflammation of the inner layer of the uterus.

- D Inflammation of the cervix.
- E Inflammation of the serous membrane of the uterus.

## 5. Postpartum metroendometritis is always accompanied by:

A Bleeding.

B Hyperthermia.

### C Increasing the size of the uterus.

D Symptoms of abdominal irritation.

E Septic shock.

6. Postpartum metroendometritis after cesarean section may be due to:

A Long dry period.

B Colpitis during pregnancy.

C Violation of the principles of asepsis and antiseptics.

D Intra-abdominal infection during pregnancy.

E All of the above.

7. Septic shock is not characterized by:

# A Hypertension.

B Oliguria, anuria.

C Hypotension.

D Acute dysfunction of organs and systems.

E Pithechial rash, necrosis of the skin.

8. Name the antibiotics that are not used during lactation.

A Ampicillin.

B Ceftriaxone.

## C Erythromycin.

D Flemoxin.

E Amoxicillin

9. The mother complains of pain in the breast. In the area of pain, the infiltrate is 3x4 cm with softening in the center. Body temperature  $38.5 \degree C$ .

*Question:* What is the most likely diagnosis? What are the tactics of childbirth? Identify tactics for breastfeeding a newborn.

*Answer*: The postpartum period. Acute purulent mastitis. The hospitalization of a woman in labor in a surgical hospital is shown. Against the background of detoxification and antibacterial therapy - surgical treatment - the opening of the abscess with subsequent drainage. Natural feeding is contraindicated - adapted milk formulas are prescribed.

10. On the 5th day after delivery due to the natural birth canal, the patient had a sharp rise in temperature, chills, tachycardia, pain in the abdomen, lower back, extremities, a sharp drop in blood pressure 60/40 mm Hg. Pulse 120 beats / min. The skin and mucous membranes are hyperemic, dry, there is a macular erythematous rash, raspberry tongue. The patient is worried

about vomiting, diarrhea. In the blood test: thrombocytopenia, decreased prothrombin index, leukocytosis, rod-shaped shift to the left, toxic granularity of neutrophils. Reduced diuresis.

Question: What is the diagnosis? What are the tactics of managing the patient?

Answer: Postpartum period 5 days. Infectious and toxic shock. Urgent hospitalization of the woman in labor is shown.

11. In the woman in labor on the 3rd day after delivery there were complaints of weakness, poor sleep, loss of appetite, lower abdominal pain. There was an increase in temperature to 39  $^{\circ}$  C, accelerated heart rate. During the examination, the pain of the uterus is determined, the bottom of which is 1 p / p below the navel. Lochia - muddy-bloody, with an unpleasant odor.

Question: What is the diagnosis? What are the tactics of managing the patient?

*Answer*: Postpartum period 3 days. Postpartum metroendometritis. The mother should be transferred to the observation department of the maternity hospital. Against the background of detoxification therapy to conduct a comprehensive antibacterial and anti-inflammatory therapy with the appointment of tonomotor drugs.

# **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 p.

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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