

“Затверджено“
на методичній нараді кафедри акушерства,
гінекології та планування сім’ї
медичного інституту СумДУ
протокол № _____
від “ _____ “ _____ 2021р.

Methodical development

independent work of a student in the discipline "Obstetrics"

Subject: Miscarriage. Premature birth. Postterm pregnancy. The problem of macrosomia in obstetrics.

Number of hours - 3.

Objective: to study the causes of spontaneous abortion at different times, classification, clinic, diagnosis, treatment and prevention of spontaneous abortion from the standpoint of evidence-based medicine, the threat of preterm birth: diagnosis, treatment, obstetric tactics from the standpoint of evidence-based medicine, prevention of miscarriage, premature birth etiology and pathogenesis of delayed pregnancy, signs confirming the transfer of pregnancy, features of pregnancy and childbirth, indications and conditions and methods of induction of labor from the standpoint of evidence-based medicine.

The student must: determine the clinical stage of abortion and prescribe treatment, make a treatment plan for threatened abortion, make a treatment plan for incomplete abortion, assess the condition of the cervix in full-term pregnancy, premature birth, determine the clinical stage of premature birth and prescribe treatment, evaluate CTG, ultrasound at premature childbirth, to be able to appoint the scheme of prevention of RDS at threat of premature childbirth, to make algorithm of action of the doctor at premature childbirth.

Class organization:

Organizational structure of the lesson:

I. Testing: 20 tests.

II. Key issues:

1. What are the clinic and methods of diagnosing threatened abortion?
2. What are the tactics of threatening abortion?
3. What are the treatments for threatened abortion?
4. What are the methods of monitoring the effectiveness of treatment of threatened abortion?
5. What are the clinic and diagnosis of abortion in progress?
6. What are the tactics of abortion in progress?
7. What are the clinic and diagnosis of incomplete abortion?
8. What are the tactics of incomplete abortion?

9. What are the clinic, diagnosis and tactics of complete abortion?
10. What are the clinic, diagnosis and tactics of abortion that did not take place.
11. What does the concept of "premature birth" include?
12. What is the classification of premature birth?
13. What are the causes of premature birth?
14. What are the risk factors for preterm birth?
15. What are the methods of predicting premature birth?
16. What are the methods of diagnosing premature birth?
17. What are the principles of premature birth?
18. What are the methods of prevention of respiratory distress syndrome in premature infants?
19. What are the methods of tocolytic therapy at the risk of premature birth?
20. What are the contraindications for tocolysis at the risk of premature birth?
21. What are the tactics of intranatal antibiotic therapy in preterm birth?
22. What are the features of the I, II and III periods in premature birth?
23. What are the consequences of premature birth for the fetus of different gestational ages?
24. What are the methods of prevention of premature birth

III. Practical experience: .

1. Collect general and special obstetric and gynecological history.
2. Determine the duration of pregnancy.
3. Evaluate the results of a special obstetric examination.
4. Know the size of the uterus at different stages of pregnancy.
5. Know the mechanism of action on the myometrium of drugs from the group of uterotonics, antispasmodics, hemostatic agents.
7. Assess the risk factors for preterm birth when collecting medical history in pregnant women.
8. Draw up and substantiate a plan of individual pregnancy management for each pregnant woman with risk factors for premature birth.
9. Diagnose premature birth (according to the history of childbirth).
10. Prescribe treatment for threatened premature birth, write prescriptions.
11. Prescribe drugs for the prevention of respiratory distress syndrome in newborns.
12. To make and substantiate the plan of conducting premature births (according to the history of childbirth).
13. Provide assistance in premature birth (on a phantom).

IV. Solving situational problems.

1. Premature discharge of amniotic fluid is considered to be discharge of water:

- A. before contractions**
- B. with the appearance of irregular contractions
- C. with the appearance of regular contractions
- D. in the active phase of childbirth
- E. when the efforts

2. The causes of premature birth include:

- A. rhesus conflict
- B. gestosis
- C. multiple pregnancy
- D. gestational pyelonephritis
- E. list everything**

3. An early sign of premature birth is not:

- A. increased contraction of the myometrium
- B. pulling pains in the lower abdomen and lower back
- C. shortening of the cervix
- D. opening of the cervix by 4 cm**

4. The most common cause of death in premature infants:

- A. respiratory distress syndrome**
- B. hemorrhagic disease of newborns
- C. malformations
- D. jaundice of newborns
- E. infections

5. The signs of premature fetus include all signs except:

- A. body weight below 2500 g and length less than 45 cm
- B. umbilical ring in the middle between the navel and the xiphoid process**

- C. in boys, the testicles are not lowered into the scrotum
- D. subcutaneous layer is poorly developed
- E. The auricles and nasal cartilages are soft

6. A sign of maturity of the newborn is not:

- A. the value of the mass of the body length of the fetus
- B. placement of the umbilical ring
- C. the condition of the external genitalia
- D. the amount of crude oil

E. cyanosis of the skin

7. A pregnant woman was admitted to the obstetric hospital within 11-12 weeks with complaints of cramping pains in the lower abdomen, discharge of amniotic fluid, significant bleeding. Vaginal examination: the cervix is shortened, the finger passes, the elements of the fetus are palpated behind the inner eye, the discharge is bloody, significant. What are the driving tactics?

- A. Prescribing progesterone drugs
- B. Appointment of tocolytic drugs

C. Curettage of the walls of the uterine cavity

- D. Bed rest, observation

8. A pregnant woman was admitted to the obstetric hospital within 11-12 weeks with complaints of cramping pains in the lower abdomen, discharge of amniotic fluid, significant bleeding. Vaginal examination: the cervix is shortened, the finger passes, the elements of the fetus are palpated behind the inner eye, the discharge is bloody, significant. What is the stage of miscarriage?

- A. Threatened abortion

B. Abortion in progress

- C. Incomplete abortion
- D. Complete abortion

9. Pregnant 26 years. Pregnancy I, 12 weeks. Complaints of pulling pain in the lower abdomen. At vaginal inspection: the outer eye of the cervix is closed, the uterine body is enlarged to 12 weeks, uterine tone is increased, mucous secretions. What is the probable diagnosis? What are the driving tactics?

Answer: Threatened abortion at 12 weeks of pregnancy. Measures to preserve and support the development of pregnancy are shown.

10. A 24-year-old woman was admitted to the obstetric hospital at the age of 18 weeks with cramping pains in the lower abdomen, bloody discharge from the genital tract. On examination: the cervix is shortened, passes 3 fingers, the amniotic sac is absent, the fetal head is burned, blood secretions are moderate. What is the probable diagnosis? What are the driving tactics?

Answer: Late miscarriage in progress at 18 weeks of gestation. After spontaneous expulsion of the fetus and placenta, curettage of the walls of the uterine cavity and measures to stabilize hemodynamics are shown.

Recommended reading:

1. Obstetrics and gynecology: textbook: in 2 books. Book 1 Obstetrics: Obstetrics / ВМ Ventskivsky, МО 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, МО Shcherbyna, VI Grishchenko [etc.]; - 3rd ed., Ed. - К.: Медицина, 2020. - 376 p.
3. Workshop on obstetrics / II Bachynska - К .: "Medicine", 2021. - 104 p.
4. Workshop on phantom obstetrics / P. Yavirsky, V. Shatylo, T. Yavirska - К .: "Medicine", 2017 - 144 p.
5. Workshop on gynecology / A.M. Vavilova - К .: "Medicine", 2019. - 96 p.
6. Clinical obstetrics and gynecology / A. Brian, Magovan, Philip Ouden, Andrew Thomson; scientific editor of the translation M. Shcherbyna - К .: "Medicine", 2021. - 512 p.
7. Oxford Textbook of Obstetrics and Gynecology / Sabaratnam Arulkumaran, Wiliam Ledger, Lynette Denny, Stergios Doumouchsis - Oxford University Press, 2020, 928 p.

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