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Peculiarities of pregnancy and condition of newborns in women with benign ovarian tumors

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The aim of the study: To learn the course of the gestation process and perinatal consequences in pregnant women with benign ovarian tumors.

Materials and Methods: To assess the course of pregnancy, childbirth, the postpartum period and the morphofunctional state of the fetoplacental system, 50 pregnant women were examined, which consisted of 3 clinical groups: group 1 – the main group – 14 pregnant women with benign ovarian tumors who underwent surgery; group 2 – comparison group – 16 pregnant women with benign ovarian tumors who received conservative treatment; group 3 – control group – 20 patients with physiological pregnancy. All patients underwent ultrasound examination of the fetus and placental complex, morphological examination of the placenta. The study was performed on a device "Toshiba-GF123" (Japan), worked in real time with sectoral and vaginal sensors with a frequency of 3.5 and 7.0 MHz. Ultrasonic fetometry was performed in real time by conventional methods.

Results and Discussion: The results of our studies showed that urgent childbirth in the main group occurred in 11 (80 ± 5.9 %) pregnant women, premature birth in 3 (17.8 ± 5.7 %) and late – in one (2.2 ± 2.2 %) pregnant. The frequency of premature birth in patients of the comparison group was observed 2.5 times less often. In the control group, all pregnancies ended in timely delivery. The syndrome of fetal growth retardation (FGR) was found in 3 (6.7 ± 6.7 %) newborns of the main group, and in 2 (9.5 ± 6.4 %) of the comparison group. At the same time in these patients the course of pregnancy was complicated by development of preeclampsia that is the possible reason of development of FGR.

Conclusions: The presence of benign tumors and tumor-like formations of the ovaries does not prevent the onset and progression of pregnancy. One of the problems of pregnancy management in women with benign tumors is the choice of tactics for their treatment.

Key words: pregnancy; benign ovarian tumors; placental insufficiency.

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