



COVID-19 TRANSITION PROCESS AND PREVENTION IN PREGNANT WOMEN DURING A PANDEMIC

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ABSTRACT: - Every day we have more information about the effects of COVID-19 on pregnant women, the data is updated. So far, evidence suggests that the risk of miscarriage in pregnant women with COVID-19 is not high. To date, existing scientific studies have reported some cases of intrauterine or perinatal infection, but this is very rare and COVID-19 infection is unlikely to cause fetal malformation. The few cases known in infants infected with a coronavirus infection in the early days are mild. There are no serious cases in our observations. In terms of maternal complications, the most complex pneumonias occur in this period in the third trimester of pregnancy or in the postpartum period, i.e., a few weeks after birth, in unvaccinated pregnant

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women. COVID-19 infection in the first and second trimesters of pregnancy is associated with several complications. However, due to complications in the mother (especially in the third trimester of pregnancy), the frequency of preterm births has increased.

KEYWORDS: Pregnancy, COVID 19, Abortion, Birth Frequency.

INTRODUCTION

The treatment and prevention of COVID 19 is one of the main concerns of world medicine today. Outbreaks seem to get worse during pregnancy and in pregnant women. As a result, preterm delivery in pregnant women and an increase in maternal acute pneumonia have led to an increase in miscarriages in pregnant women due to impaired respiratory function and impaired fetal oxygenation. This situation has increased the risk of the mother's life. Prevention of coronavirus infection is the most important task for pregnant women. Pregnant women can experience changes in their immune systems, making them more susceptible to respiratory viruses. These changes mean that expectant mothers need to be proactive about safety measures. However, we do know that high fevers during pregnancy, especially in the first trimester, can increase the risk of birth defects. We therefore urge our patients to be protected from all diseases that can cause fever, including influenza. COVID 19 may increase the risk of preterm or preterm birth. If you experience any of the following symptoms during pregnancy, you should contact the obstetric service immediately:

- Changes in baby's movements
- Vaginal bleeding
- Constant clear vaginal discharge
- Abdominal pain
- Shrinkage before 37 weeks
- Fever
- Headache
- Sudden swelling of your hands or face

A new corona virus can pose a risk for the pregnant woman herself. Publications on cases of corona infections during pregnancy report a higher proportion of disease-related complications in pregnant women than in non-pregnant women of the same age. Exactly how the virus affects the female body is difficult to say. In general, there are no clear differences in how other patients become ill. However, there may be some difficulties and complications. If a woman suffers from chronic diseases such as kidney or liver disease, diabetes or asthma, she is at risk. Even if a woman is seriously ill, problems can arise. The growing fetus puts pressure on the heart and lungs, blocking blood and blood circulation.

The purpose of our research. Reducing the process of natural abortion in pregnant women infected with COVID-19 and forming a prophylactic process to prevent birth defects in the child in the postpartum process. A comparative comparison of preterm births during a pandemic.

Materials and Methods: Our aim was to compare the incidence of premature miscarriage, preterm birth in pregnant women with COVID-19 over the period 2020-2021. Also in pregnant women affected by COVID-19, these processes were assessed based on the pregnant woman's functional status, and we analyzed the following cases with a high rate of exacerbation of COVID-19.

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The following conditions or factors can lead to serious illness from COVID-19 during pregnancy:

- Over 35 years old
- Being overweight or obese
- High blood pressure (before pregnancy)
- Diabetes – type 1 or 2 (before pregnancy)

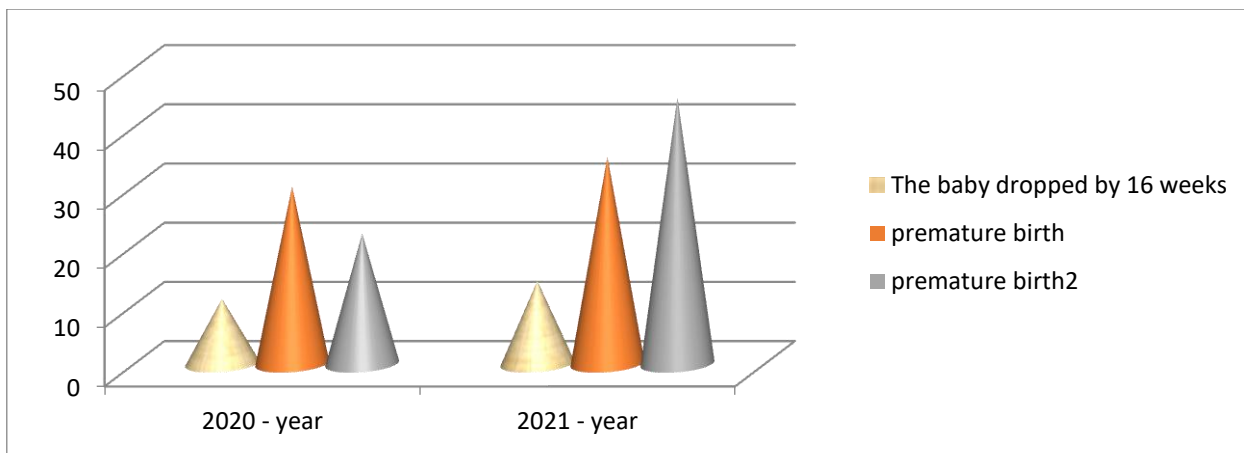
Such cases can increase your risk of serious illness from COVID-19.

Inspection results and conclusions

The main symptoms in pregnant women in our follow-up were as follows. The symptoms of coronavirus infection in pregnant women did not differ from the symptoms that usually occur in other infected people:

- increased body temperature - 90% of cases;
- dry or mild sputum cough – in about 80% of clinical cases;
- shortness of breath;
- chest tightness;
- high level of fatigue, reduced performance;
- diarrhea, nausea, vomiting;
- Headache.

However, the complex of symptoms can vary individually for each pregnant woman. Sometimes a woman feels a slight discomfort that can be mixed with the appearance of a simple cold. In Surkhandarya region, we developed comparison of pregnant women with COVID-19 in 2020-2021 in the facility for treatment of patients with coronavirus infection, with 55 pregnant women under 16 weeks of age in 2020 and 59 in 2021. educated. The incidence of miscarriage in pregnant women less than 16 weeks gestation was 20% in 2020 and 23.73% in 2021. The number of pregnant women aged 16-28 weeks was 110 in 2020 and 132 in 2021. Prematurity in pregnant women accounted for 27.28% of cases, and in 2021 this number rose again to 26.51%. The number of pregnant women aged 28-37 weeks was 90 in 2020 and 293 in 2021. Pregnant women during this period had 24.44% of preterm births in 2020 and 15.36% of preterm births in 2021.



The date of the start of operations in the Termez Central Hospital in 2021 is 07/07/2021. At the end of operations, as of 08/26/2021, 537 pregnant women were hospitalized, 160 of whom gave birth at the same time. In July and August 2021, 116 cesarean sections were performed in

pregnant women with COVID-19. All newborns tested negative for COVID-19.

CONCLUSION

1. Organize a general examination of pregnant women with COVID-19 twice a year in postnatal infants during the first 5 years of life to determine the extent of

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the impact of COVID-19 on the functional status of the child.

2. Conducting a virological examination at the 13th week of pregnancy in the Surkhandarya region to establish a list of pregnant women with cardiovascular diseases and respiratory diseases in the districts with high rates of respiratory diseases, thus preventing intrauterine infection and exposure to the coronavirus prevent fetus.
3. Regular monitoring of the use of immunosuppressive drugs in pregnant women up to the 16th week of pregnancy prevents the mother from contracting various diseases and reduces the incidence of miscarriage in pregnant women.

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