



PECULIARITIES OF RENAL BLOOD FLOW PARAMETERS IN WOMEN WITH ACUTE RENAL FAILURE AGAINST THE BACKGROUND OF PRE-ECLAMPSIA AND ANAEMIA

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<https://doi.org/10.5281/zenodo.14625775>

ARTICLE INFO

Qabul qilindi: 01-Yanvar 2025 yil

Ma'qullandi: 06-Yanvar 2025 yil

Nashr qilindi: 10-Yanvar 2025 yil

KEYWORDS

equity contribution,
gynecological diseases,
physiological norms

ABSTRACT

One of the largest global environmental disasters in recent history experienced by countries and about 75 million people in Central Asia is the tragedy of the Aral Sea, which, by its ecological, economic and humanitarian consequences, poses a direct threat to the sustainable development of the region, the health of the gene pool and the future of the people living in it.

The Aral Sea crisis zone directly includes the territories of Turkmenistan, Kazakhstan and Uzbekistan, and indirectly - the territories of Tajikistan and Kyrgyzstan. The scientific problem of assessing the impact of environmental factors on human health and creating a system of measures to improve health is a priority task of the national environmental policy of practically all developed countries.

This is a priority task of the national environmental policy of practically all industrialised countries. Identification of cause-and-effect relationships between environmental risk factors and health status allows controlling risk factors for preventive purposes (2; 9; 10; 11). According to the World Health Organisation, environmental factors account for no more than 20-30% of the various factors affecting public health. With significant anthropogenic loads, the negative impact of the environment is expressed in the deterioration of demographic indicators, reduced functional capabilities and defence forces of organisms, increased morbidity and mortality of the population (5; 6; 7; 10).

At present, the environmental disadvantage of the region affects the health of the population, especially the health of mothers and children. According to statistics from the Ministry of Health of the Russian Federation, extragenital pathology in women has increased, which is associated with the growth of socially significant diseases, including diseases of the urogenital system (9;10;11;12). The health of women of childbearing age, their fertility and safe motherhood are important aspects of public health.

Chronic kidney and pelvic organ diseases during pregnancy lead to very severe complications of pregnancy, such as pre-eclampsia, miscarriage, intrauterine foetal infections, developmental delays and thrombotic conditions that increase the risk of haemorrhage at delivery (8;12;14). The above pregnancy pathologies and various extreme conditions characterised by sudden renal dysfunction lead to multi-organ failure and increase the risk of

maternal mortality (8;19;20;21;22;23;). It is crucial to study the impact of gestosis on the course and complications of pregnancy and labour and to develop principles of rehabilitation.

RESEARCH OBJECTIVE

To study the parameters of renal blood flow in women with pre-eclampsia and anaemia who have opnoea

RESEARCH RESULTS

The study group consisted of 34 women receiving obstetric OPN for pre-eclampsia and 3-5 concomitant extragenital diseases.

All women suffered from anaemia. Other diseases were predominantly chronic pyelonephritis, glomerulonephritis, hepatitis, bronchitis and diabetes mellitus. Rheumatism, diffuse goitre, chronic tonsillitis with frequent recurrences, stomatitis and gout were less common. In this group of 34 women, 9 (26.4%) underwent 3 gastroenterographic examinations, 18 (52.9%) underwent 4 gastroenterographic examinations and 7 (20.5%) underwent 5 gastroenterographic examinations, 7 (20.5%) patients underwent 5 gastroenterographic examinations. The age of the patients ranged from 22 to 29 years, the mean age was 26.7+-1.4 years.

The mean age of the patients was 26.7+-1.4 years.

Ultrasound examinations in all women showed an increase in kidney size with decreased TPT and enlargement of the CSF, high and homogeneous echogenicity.

Table¹ 1

Table No. 1

Renal blood flow parameters in women with acute renal failure associated with preeclampsia and anemia. (n-22)

Indicator		Referents meaning	Under examination Group	P
Main trunk	LMS	2.21±0.09	2.52±0.11	<0.05
Renal arteries	IR	0.56±0.02	0.61±0.03	>0.05

The data presented in Table¹ 1 clearly show that in women who underwent RPF with mild preeclampsia, according to our data, only the blood flow in the main trunk of the renal artery underwent reliable changes, where the indices of RR and IR increased by 14.0 and 8.9%, respectively. If the increase in the RR was statistically significant, the IR only showed a tendency to increase.

Isotope renography, performed by us in 30 women of the above group, clearly indicated unresolved pathology in them. All isotope curves were low amplitude, symmetrical without clear differentiation of secretory and excretory phases. Isotopic renography also stated an increase in kidney size. Renogram curves were symmetrical and were isosthenuric. Summarising the findings from the comprehensive survey of women, Obstetric OPN developed against the background of pre-eclampsia and 3 - 5 EGD, it is possible to note significant renal dysfunctions in the specified period in almost all examined patients, stated in addition to general clinical data, by the data of special examination. In our opinion, it is important that the severity of renal function disorders in this group of women was the greatest, which clearly emphasises the importance of the "initial background", i.e.

concomitant EGD, which in turn depends on the environmental circumstances of the Aral Sea region.

Priority directions in the prevention of obstetric OPN in the conditions of negative environmental impact in the Aral Sea region are: anaemia control, and active medical examination of girls and women of fertile age in terms of timely detection and treatment of EHS. All of the above should contribute to reducing the frequency of OPN caused by pathology of pregnancy and childbirth, reducing maternal mortality.

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