

## DEVELOPMENT OF TACTICS FOR MANAGING PREGNANCY COMPLICATED BY INTRAUTERINE INFECTION OF A VIRAL NATURE

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**Annotation:** While most pregnancies and births are uneventful, all pregnancies are at risk. Around 15% of all pregnant women will develop a potentially life-threatening complication that calls for skilled care, and some will require a major obstetrical intervention to survive. This manual is written for midwives and doctors at the district hospital who are responsible for the care of women with complications of pregnancy, childbirth or the immediate postpartum period, including immediate problems of the newborn.

**Keywords:** pregnancy; newborn; motherhood; stillbirth; infection.

Multiple factors may influence women's psychological status before, during and after pregnancy. A woman's psychological status in turn influences her ability to care for herself and her baby and to follow health care recommendations. Pregnancy is typically a time of joy and anticipation. It can also be a time of anxiety and concern. Listening and talking respectfully and sensitively with a woman and her family can help build the woman's trust and confidence in her health care providers. Women who develop complications may have difficulty talking to the provider and explaining their problem. It is the responsibility of the entire health care team to speak with the woman respectfully and put her at ease. In every country and community in the world, pregnancy and childbirth are momentous events in the lives of women and families, and represent a time of intense vulnerability. The concept of safe motherhood is usually restricted to physical safety, but childbearing is also an important rite of passage, which may have deep personal and cultural significance for a woman and her family. The notion of safe motherhood must be expanded beyond the prevention of morbidity and mortality to encompass respect for women's basic human rights, including women's autonomy, dignity, feelings, and choices and preferences, including the choice of companionship, wherever possible.

Infection is an important cause of stillbirths worldwide: in low-income and middle-income countries, 50% of stillbirths or more are probably caused by infection. By contrast, in high-income countries only 10–25% of stillbirths are caused by infection. Syphilis, where prevalent, causes most infectious stillbirths, and is the infection most amenable to screening and treatment. Ascending bacterial infection is a common cause of stillbirths, but prevention has proven elusive. Many viral infections cause stillbirths but aside from vaccination for common childhood diseases, we do not have a clear prevention strategy. Malaria, because of its high prevalence and extensive placental damage, accounts for large numbers of stillbirths. Intermittent malarial prophylaxis and insecticide-treated bednets should decrease stillbirths. Many infections borne by animals and vectors cause stillbirths, and these types of infections occur frequently in low-income countries. During pregnancy, the organization of complex tolerance mechanisms occurs to assure non-rejection of the semiallogeneic fetus. Pregnancy is a period of vulnerability to some viral infections, mainly during the first and second trimesters, that may cause congenital damage to the fetus. During pregnancy, the organization of complex tolerance mechanisms occurs to assure non-rejection of the semiallogeneic fetus. Pregnancy is a period of vulnerability to some viral infections, mainly during the first and second trimesters, that may cause congenital damage to the fetus. Pregnancy represents a unique immunological condition with several regulatory mechanisms that ensure the non-rejection of the semiallogeneic fetus and its development, but it is also a time of greater vulnerability to infections. Associated with this, neonates also have a developing immune system with qualitative and quantitative differences from adults and poor immune memory, which increases their susceptibility to infectious agents. Complications during pregnancy, such as viral infections, can directly affect maternal-fetal health, since some viruses can be transmitted vertically and cause congenital infections

In addition, maternal immune activation induced by many common viruses is sufficient to cause neurological changes in the offspring

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