



**THE INFLUENCE OF UROGENITAL INFECTIONS IN WOMEN OF
REPRODUCTIVE AGE ON THE INCIDENCE AND SEVERITY OF PREGNANCY-
RELATED COMPLICATIONS**

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Objective of the study: The aim of the study is to investigate the impact of urogenital infections in women of reproductive age on the course of pregnancy and perinatal outcomes, to perform a comparative assessment of the clinical and obstetric indicators of pregnant women affected by infections and healthy pregnant women, and to determine the risk of developing pregnancy complications. The main objective of the study is to establish the frequency of pregnancy disorders, perinatal complications, and intrapartum difficulties associated with urogenital infections in women of reproductive age, and to develop scientifically substantiated recommendations for the prevention of these conditions.

Materials and methods: The study materials and methods: The study was conducted in the obstetrics department of the Multidisciplinary Clinic of Samarkand State Medical University during 2024–2025. A total of 60 pregnant women of reproductive age were enrolled, of whom 40 women with diagnosed urogenital infections comprised the main group, while 20 women with physiologically normal pregnancies formed the control group. The study results were retrospectively analyzed based on delivery medical records, laboratory investigations, and ultrasound diagnostic findings. Pregnant women in the main group were further subdivided into two subgroups according to the gestational age at which the infection was detected: the first subgroup included 20 women in whom urogenital infections were identified between 12 and 24 weeks of gestation, and the second subgroup included 20 women in whom infections were diagnosed between 25 and 36 weeks of gestation. The mean age of the participants was 26 ± 1.5 years. During the study, a comprehensive assessment was performed, including the course of pregnancy, the type and severity of infections, the risk of preterm labor, fetal growth restriction, anemia, complications of the urogenital system, and perinatal outcomes. In addition, the characteristics of labor, mode of delivery, the condition of the newborns, and their adaptation indicators were analyzed. The obtained data were comparatively evaluated between the main and control groups, allowing a scientifically substantiated determination of the impact of urogenital infections on pregnancy progression and perinatal outcomes.

Results: The results of the study demonstrated that urogenital infections in women of reproductive age complicate the course of pregnancy, slow fetal growth, increase the risk of preterm labor, and significantly raise the likelihood of perinatal complications. Therefore, early detection, preventive measures, and timely treatment of these infections are of critical importance for maintaining maternal and fetal health, which is scientifically confirmed. Analysis



of the cohort of pregnant women of reproductive age with urogenital infections showed a significant impact on pregnancy course and perinatal outcomes. In the first subgroup of the main group, extragenital pathologies were frequently observed, including chronic urogenital system infections, anemia, and inflammatory processes. In the second subgroup, only 7 women (35%) experienced complications due to preterm labor. Among the total 60 enrolled pregnant women, 34 (56.6%) were primiparous, and 26 (43.4%) were multiparous. Pregnancy in women from the main group was associated with various complications: early toxicosis was observed in 23% of cases, risk of miscarriage in 48%, anemia in 61%, and urogenital infections persisted in 75% of cases. Analysis of the anamnesis revealed that among close relatives of the participants, 20% had urogenital system diseases, 18% had endocrine disorders, and 15% had cardiovascular pathologies. Furthermore, cases of complicated pregnancies and deliveries were reported in the medical histories of close female relatives. In the main group, only 35% of pregnant women exhibited the full spectrum of clinical and laboratory signs characteristic of urogenital infections, while combinations of two symptoms were most commonly observed (50%), and monosymptomatic cases were recorded in 15% of participants. Despite the therapeutic interventions, pregnancy complications due to infection occurred in 37% of women in the first subgroup and 22% in the second subgroup. Analysis of labor revealed that 11 patients (18.3%) required cesarean delivery, primarily due to preterm labor risk and fetal hypoxia. These findings indicate that urogenital infections in women of reproductive age are a significant etiopathogenetic factor in the development of pregnancy complications and adverse perinatal outcomes. The study scientifically confirms that early detection, as well as timely preventive and therapeutic interventions, are crucial for ensuring maternal and fetal health.

Conclusions: Analysis of urogenital infections in women of reproductive age demonstrates that these infections are a significant factor contributing to complications during pregnancy. In women with urogenital infections, delayed pregnancy progression, increased risk of preterm labor, fetal growth restriction, anemia, and complications of the urogenital system were observed with high frequency. Based on the study results, pregnancy complications occurred despite treatment in 37% of women in the first subgroup and 22% of women in the second subgroup, and in some cases, the risk of preterm labor necessitated surgical intervention. The findings indicate that early detection of urogenital infections, timely diagnostic evaluation, and appropriate therapeutic measures in women of reproductive age are critically important for the preservation of maternal and fetal health. Furthermore, these conditions significantly increase the risk of developing perinatal complications, highlighting the necessity for regular monitoring of the urogenital system and the implementation of preventive measures in clinical practice for pregnant women of reproductive age.