



**OBSTETRIC AND EARLY POSTPARTUM OUTCOMES IN WOMEN WITH  
URINARY TRACT INFECTIONS DURING PREGNANCY.**

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**Abstract:** This article describes obstetric and early postpartum outcomes in women with urinary tract infections during pregnancy.

**Keywords:** anemia, arterial hypertension, pyelonephritis, asymptomatic bacteriuria, colpitis, chorionic amnionitis.

**Relevance.** Urinary tract diseases are the most common pathology in women during pregnancy, accounting for 9-13%. These diseases most often develop or manifest during pregnancy, leading to perinatal and obstetric pathologies such as anemia, hypertension, premature rupture of membranes, and low birth weight (<2500 g) infants, which in turn leads to increased perinatal mortality.

An increasing incidence of pyelonephritis is also considered a factor in the rise in pyelonephritis. These include asymptomatic bacteriuria and latent pyelonephritis. Asymptomatic bacteriuria, despite the absence of pronounced symptoms and the apparent good quality of the microorganism and microflora, is a disorder associated with complicated pregnancy, childbirth, the postpartum, and early neonatal periods. Thus, in pregnant women with asymptomatic bacteriuria, complex pyelonephritis develops in 20-40% of cases. Despite the proven relevance of this problem, no studies have yet been conducted on the occurrence, course, and incidence of pregnancy, childbirth, and neonatal pathologies in pregnant women with urinary tract diseases.

**Objective:** To evaluate perinatal and obstetric outcomes in pregnant women with urinary tract infections.

**Study materials and methods:** We retrospectively studied birth outcomes in 1,369 birth records from May 2022 to May 2023 among pregnant women undergoing inpatient treatment in the Department of Pregnancy Pathology at the Bukhara Perinatal Center. Among the pregnant women who sought treatment, urinary tract infection (UTI) was diagnosed in 13.3% of cases.

Urinary tract infection in pregnant women manifests as asymptomatic bacteriuria (65%), acute cystitis (20%), and pyelonephritis (15%). The age of 182 pregnant women with urinary tract infection ranged from 18 to 35 years (mean age  $22.5 \pm 1.2$  years). Among women with intrauterine pregnancies, multiple births were observed in 56% of cases, while primiparous births occurred in 44% of cases, 23% of which were primiparous. The interval between the previous and current pregnancy was 1 year in 24.4%, and multiple births occurred in 11.1%. A history of one or two abortions was noted in 4.4% of cases, spontaneous miscarriage in 6.7%, and cesarean section and the presence of a uterine scar were noted in 8.9%. The study utilized the following methods: anamnestic, clinical, instrumental, and laboratory, the volume of which was sufficient to make a diagnosis. Results of the study: bacterioscopic examination of a vaginal smear revealed colpitis, mainly of candidal etiology, in 48.9% of pregnant women. Urine culture revealed the following pathogens: *S. epidermidis* (9%), *C. hofmani* (6%), *E. coli* (84%), other corynebacteria about 1%. In the dynamics of observation, it was established that the complications of pregnancy with intrauterine infection were as follows: placental insufficiency -



in 42.2% of women, moderate preeclampsia - in 22.2%, threatened spontaneous abortion - in 17%, gestational pyelonephritis - in 18%. The study of the development of complications in pregnant women showed premature rupture of the fetal bladder, 20.1% - premature labor, 11.9% - chorionic amnionitis. In 12.5% of pregnant women, a defect of postpartum tissue was detected. We also identified other complications, such as endometritis (8.5%), lochiometritis (7.6%), and placental abruption (7.1%). Postpartum cystitis was observed in 5.5% of women, and pyelonephritis in women in labor was reported in 3.5%. Thus, among all examined pregnant women with urinary tract infections, 42.2% experienced complications during childbirth and in the postpartum period.

**Conclusions:** 1. The incidence of urinary tract infections among pregnant women is 13.3%. 2. In 48.9% of pregnant women (50%), microscopic examination of a vaginal smear revealed colpitis, primarily of candidal etiology. 3. Urine culture revealed the following pathogens: *S. epidermidis* (9%), *C. hofmani* (6%), *E. coli* (84%), and other corynebacteria (approximately 1%). 4. The significance and negative impact of urinary tract infections on the course of pregnancy, childbirth, and the postpartum period were identified.

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