

INFLUENCE OF TUBERCULOSIS INFECTION ON GESTATION, POSTPARTUM PERIOD AND HEALTH CONDITION OF NEWBORNS

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Abstract

Aim of the study: to evaluate the gestation and delivery in women with the history of tuberculosis or active tuberculosis; to analyze the rate and nature of obstetric and perinatal complications, and to identify new cases of tuberculosis in postpartum period.

Materials and methods. 69 pregnant women were examined in 2011-2015 years at Odesa maternity house No. 2 (specialized on tuberculosis). Among them, 49 (71,0 %) women were allocated to category 5.1 of dispensary follow-up, 16 (23,2 %) were infected during pregnancy, and in 4 (5,8 %) tuberculosis was diagnosed in postpartum period.

Results. In 56,0 % of pregnant women with the history of tuberculosis or ongoing disease there were pregnancy interruption: 8,0 % — spontaneous abortion, 8,0 % — premature delivery, 40,0 % — medical abortion. These data confirm the adverse influence of the tuberculosis on pregnancy. Total blood count demonstrated high rates of anemia (86,0 %), ESR acceleration (85,0 %), moderate leukocytosis (20,0 %). These changes were typical both for pregnancy and tuberculosis. However, the predominance of band neutrophils and lymphopenia were more frequently observed in patients with long-term tuberculosis. The following complications of pregnancy were registered: anemia, impaired placenta function, fetal-placental complex infection, and oligohydramnios. In newborns from mothers with active tuberculosis the body mass was reduced; asphyxia and hypotrophy signs were observed frequently. Furthermore, in 37,5 % of newborns the neurological abnormalities were diagnosed. On the third day after delivery the active tuberculosis was revealed in 4 women (5,8 %).

Conclusion. The results of the survey demonstrate the limitations of current tuberculosis detection in women of reproductive age, possibility of tuberculosis infection in late postpartum period, pointing on the need in chest X-ray examination in women in 6 and 18 months after delivery. It is recommended to classify women being 18 month after delivery as high risk for tuberculosis category.

Key words: tuberculosis, pregnancy, clinical signs, newborns.