

P214. The modern hemodynamic features of predictive diagnosis of preeclampsia

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Context: Annually due to PE 500,000 babies and 76,000 mothers had been dying in the world. PE survivors will have at twice the risk of heart disease and stroke, and four times the risk of high blood pressure in the future.

Objective: To evaluate the predictive values of the circulatory syndromes of the cardiovascular system (CVS) induced by gestational endotheliopathy.

Methods: Investigations of the circulatory syndromes of CVS and hemodynamic supporting of pregnancy was carried out in the first trimester in 114 women with physiological pregnancy (FP) and in 132 pregnant women with gestational endotheliopathy (GE). We determined of circulatory syndromes by correlation of minute volume of blood while standing/lying – I type (hypokinetic condition) and III type (hyperkinetic condition) of hemodynamics. The hemodynamic risk was determined in accordance with the index of hemodynamic nonoptimality (IHN).

Results: According to our investigations the optimization of hemodynamical supporting in FP was mechanism of vasodilator "slippage" of arterial vessels from the systemic vasoconstriction as the hemodynamic equivalent of endothelial activity. The predictors of PE in pregnant women were hyperkinetic type of circulation (by an anthropophysiological ratio of standing/lying), integral indicators of functional depreciation of the circulatory syndromes of CVS - hemodynamic risk (by IHN > 30%), circulatory syndromes of arterial or venous blood insufficiency in abdominal and pelvic regions.

Conclusion: Our results obtained that the predictors of PE were hemodynamic syndromes of insufficiency and circulatory limitation in the standing position.

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