



PSYCHO-EMOTIONAL ADDICTION FACTORS FROM THE RESTORATION OF REPRODUCTIVE FUNCTION IN NURSING MOTHERS

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ANNOTATION

We observed 40 lactating women who had undergone physiological childbirth. Restoration of menstrual function after normal childbirth in nursing mothers after 1.5-5 months occurs in 60% of cases. Lactational amenorrhea for 6-12 months or more after normal delivery occurs in 27.5% of women. The high incidence (27.5%) of unplanned pregnancies in nursing mothers during the first year after normal childbirth indicates the need to use contraceptives immediately after childbirth.

Keywords: Reproductive recovery, nursing mothers, lactation period.

АННОТАЦИЯ

Под нашим наблюдением находились 40 кормящих женщин, перенесших физиологические роды. Восстановление менструальной функции после нормальных родов у кормящих матерей через 1,5- 5 месяцев происходит в 60% случаев. Лактационная аменорея в течение 6-12 месяцев и более после нормальных родов встречается у 27,5% женщин. Высокая частота (27,5%) наступления непланируемой беременности у кормящих матерей в течение первого года после нормальных родов свидетельствует о необходимости использования контрацептивных средств сразу после родов.

Ключевые слова: Репродуктивной восстановления, кормящих матерей, лактационный период.

CHARACTETISTICS OF THE RESTORATION OF REPRODUCTIVE FUNCTION IN NURSING MOTHERS

ANNOTATSIYA

Fiziologik tug'ruqdan keyingi 40 ta emizikli ayolni kuzatdik. 1,5-5 oydan keyin emizikli onalarda normal tug'ruqdan keyin hayz ko'rish funksiyasini tiklash 60% hollarda bo'ladi. Oddiy tug'ilgandan keyin 6-12 oy yoki undan ko'proq vaqt davomida laktatsion amenoreya ayollarning 27,5 foizida uchraydi. Oddiy tug'ilgandan keyingi birinchi yil davomida emizikli onalarda rejasiz homiladorlikning yuqori darajasi





(27,5%) tug'ruqdan keyin darhol kontratseptiv vositalardan foydalanish zarurligini ko'rsatadi.

Kalit so'zlar: Reproduktiv tiklanish, emizikli onalar, laktatsiya davri.

Relevance of the Problem

The urgency of the problem. In obstetric and gynecological practice, the issue of restoring menstrual and reproductive function after childbirth is of great scientific and socio-economic interest. In connection with the widespread introduction of the principles of a benevolent attitude towards the child and breastfeeding into the obstetric institutions of the Republic of Uzbekistan, this problem is becoming relevant. Breastfeeding is vital not only for the newborn, but for the mother herself. In the postpartum period, great changes occur in the woman's body: the uterus is involution rapidly, hemodynamics, the functions of the lungs, liver, kidneys, endocrine and immune systems are restructured, lactation begins to function.[1] Being a qualitatively new stage at the end of pregnancy, it has a positive effect on the mother's body, improving a number of functions in the postpartum period: it has a positive effect on uterine contraction, thereby reducing the likelihood of postpartum bleeding and accelerating the involution of the uterus, due to mediated oxytocin to increase the contractive activity of the myometrium during breast sucking [2,4]. At the same time, lactation and breastfeeding are a unique state of the female body, which is an integral part of reproductive health. Lactation (breastfeeding a child) has long been considered by the people as one of the reliable methods of protection against unwanted pregnancy. This is the basis for recommendations to breastfeed a child up to 2-2.5 years. Physiologically, during lactation in the mother's body, the production of prolactin by the pituitary gland with inhibition of the synthesis and excretion of FSH and LH prevails. The ovaries and uterus during this period are inert, are at rest. In this regard, there is a physiological lactational amenorrhea. However, this mechanism is not typical for all women who have given birth, as evidenced by the facts of early restoration of menstrual function as early as 30, 45, 60 days after childbirth with regular breastfeeding of the newborn [3]. Their share among the studied category has not yet been established. Many authors attribute lactation to a natural method of contraception, but this problem has not been adequately reflected in the literature, there is not enough information about the restoration of fertility in the first year after childbirth when breastfeeding an infant. On the other hand, the restoration of reproductive function against the background of lactation is the cause





of unwanted pregnancy, a short intergenetic interval, abortions in lactating women, and the development of their negative consequences.

The frequency and duration of lactational amenorrhea after physiological delivery has not been established. There is no information on the timing of the restoration of menstrual function in lactating women after normal childbirth, on the frequency and timing of pregnancy in lactating women who did not use contraceptives.

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Material and Methods

Under our supervision were 40 lactating women who underwent physiological childbirth.

Results and Discussion

35 women out of 40 were mostly between the ages of 20 and 35, which accounted for 87.5%. Iron deficiency anemia was diagnosed in 72.5% (29) patients, mostly mild (27.5%) and moderate (40%). Childbirth proceeded through the natural birth canal. Of the interventions, there were indications of manual examination of the uterine cavity for placental defect in 10% (4), suturing of cervical tears in 7.5% (3) and episiorrhaphy in 10% (4) of mothers. The body weight of newborns was in the range from 2500 g to 4000 g in 90% (36) and over 4000 g in only 10% (4). All examined women regularly breastfed their children, of which 17.5% (7) began to give complementary foods from 2-3 months, 10% (4) from 4-5 months and 72.5% (29) from 6 months.

The first menstruation after childbirth came after 40 days in 30% (12) of nursing mothers, after 2 months - in 7.5% (3), after 3 months - in 17.5% (7), after 5 months - in 5% (2), after 6 months - in 12.5% (5), 7-8 months - in 25% (10) and after 12 months - in 2.5% (1). Thus, the data obtained indicate that after physiological childbirth, the restoration of menstrual function occurs early in the first 40 days of the postpartum period in 1/3 of women, and during the first 3 months - in 55.0%, within 6 months after normal childbirth. - in 72.5% (29) of nursing mothers. These data indicate insufficient suppression of FSH and LH production by prolactin during breastfeeding, which contributes to the restoration of the menstrual cycle. Lactational amenorrhea from 6 to 12 months was observed in 27.5% (11) of nursing mothers. The high frequency of restoration of menstrual function in the first 6 months after physiological



birth is a high risk of pregnancy during the lactation period. To reduce the intergenetic interval and abortion, the use of contraceptives immediately after childbirth is recommended.

Contraceptives were used by 60% of women: IUD - 55% (22) and exclusion - 5% (2). Within 1 year after birth, pregnancy occurred in 27.5% (11) of nursing mothers, after 2-3 years - in 25% (10), after 4 years or more - in 20% (8). The onset of pregnancy ended in childbirth in 42.5% (17), artificial abortion - in 17.5% (7), spontaneous abortion - in 7.5% (3) and non-developing pregnancy - in 5% (2). From the data obtained, it follows that in order to solve this problem, it is necessary to use methods for determining possible ovulation during the lactation period and a differentiated approach to the need to prescribe contraceptives.

Conclusions

1. Restoration of menstrual function after normal delivery in nursing mothers after 1.5-5 months occurs in 60% of cases.
2. Lactational amenorrhea for 6-12 months or more after normal delivery occurs in 27.5% of women.
3. The high frequency (27.5%) of unplanned pregnancy in nursing mothers during the first year after normal delivery indicates the need to use contraceptives immediately after childbirth.
4. Relationship between the reproductive activity of lactating women and their emotional state.

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