

STUDY OF RISK FACTORS FOR PREECLAMPSIA AND DEVELOPMENT OF MONITORING METHODS IN THE SURKHANDARYA REGION

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Relevance of the topic

Preeclampsia is one of the most severe and complex obstetric disorders and remains a leading cause of maternal and perinatal morbidity and mortality worldwide. Due to its late clinical manifestation, rapid progression, and high risk of severe complications, early identification and prevention of preeclampsia are of paramount importance. In the Surkhandarya region, high birth rates, socio-economic challenges, and limited access to healthcare services in certain areas further increase the risk of preeclampsia-related complications. Therefore, a comprehensive assessment of regional risk factors and the development of effective monitoring strategies are of significant scientific and practical relevance.

Objective of the study

To identify the main risk factors contributing to the development of preeclampsia in the Surkhandarya region, to assess their prevalence, and to improve preventive and monitoring measures aimed at reducing maternal and perinatal complications.

Materials and methods

The study was conducted from 2022 to 2024 in central outpatient clinics and maternity hospitals of Termez city, Kumkurgan, and Shurchi districts of the Surkhandarya region. A total of 500 pregnant women were included in the study. All participants underwent comprehensive clinical examinations. Anamnestic data were collected using a specially designed structured questionnaire.

Methods used

- Identification of risk factors using a structured questionnaire
- Measurement of arterial blood pressure
- Urinalysis and assessment of basic biochemical parameters

- Statistical analysis of the obtained data using SPSS software, including correlation and regression analyses

Results

The study identified the following major risk factors for the development of preeclampsia:

1. Maternal age: Pregnant women older than 35 years had a 2.5-fold higher risk of developing preeclampsia.
2. Obstetric history: Women with a history of preeclampsia or arterial hypertension in previous pregnancies had a 30–40% higher risk of recurrence.
3. Obesity: Preeclampsia cases among women with a body mass index (BMI) greater than 30 accounted for 22% of all cases.
4. Chronic extragenital diseases: Renal diseases, diabetes mellitus, and cardiovascular disorders were identified as significant risk factors.
5. Social factors: A higher prevalence of high-risk cases was observed in areas with low income levels, high unemployment rates, and limited access to healthcare services.

Conclusions

Early identification of pregnant women at high risk of preeclampsia and their inclusion in structured antenatal follow-up programs is essential;

Preventive healthcare measures should be strengthened, especially through the active involvement of rural healthcare providers;

Health education programs focusing on balanced nutrition, weight control, and stress management should be enhanced among women of reproductive age; A specialized preeclampsia monitoring card for pregnant women should be introduced based on international best practices;

An automated system for identifying high-risk pregnant women should be developed within the electronic healthcare framework.