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**Pharmacological correction of placental insufficiency with syndrome of growth retardation fetus**

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**F**etoplacental Insufficiency (FPI) is an important problem of obstetrics. This pathological condition leads to the development of fetal growth retardation syndrome (FGRS). Standard treatment regimens exist cannot be due to a combination of individual etiological factors and pathogenetic mechanisms of development of this complication. An important place in the treatment of occupied angioprotective drugs that improve blood flow, coagulation and rheological properties of blood, tissue perfusion, to supply them with oxygen and nutrients.

**Objectives:** the aim of the study was to compare the effectiveness of pharmacological agents commonly used angioprotective pentoxifylline, diosmin and dipyridamole on the results of laboratory and instrumental methods of research conducted after treatment.

**Methods:** the retrospective and prospective survey of 120 pregnant women in terms of gestation from 28 to 36 weeks on a clinical basis of the Department of Obstetrics and gynecology KSMU on the basis of a burden «Regional perinatal center» of the city of Kursk.

**Results:** the study is developed and scientifically based option monotherapy placental insufficiency to fetal growth retardation syndrome drug diosmin, aimed at improving the microcirculation in the system «mother-placenta-fetus» for the purpose of having children with a higher weight and growth parameters. It is recommended to receive a course for 1 month for 1 tablet (600 mg) per day in the morning on an empty stomach.

**Conclusions:** When analyzing the results of instrumental research methods after pharmacological correction, an equivalent improvement in hemodynamic parameters was revealed in both the uterine vessels and in the artery of the umbilical cord, which is due to the action of the preparation diosmin, whereas pentoxifylline has a partial positive effect on uterine and placental Blood flow and dipyridamole predominantly affects uterine blood flow.