

n=25) and healthy women (G3, n=25) were included in a randomised block design, cross-sectional prospective study program. Neopterin, Procalcitonine and CRP levels in the maternal serum were examined. Kruskal Wallis variance analysis was made to compare continuous and ordinal data. Mann Whitney U test was conducted for those values $p < 0.05$. And $p < 0.05$ was considered significant.

Results: In the healthy pregnant cases group, both neopterin and procalcitonine levels were high, while CRP level was low ($p < 0.05$, Mann Whitney U test). CRP level was found to be higher in abortus imminens group than in missed abortus group, though insignificantly ($p > 0.05$, Mann Whitney U test).

Conclusion: In the healthy expectant cases group neopterin and procalcitonine were high, while in the abortus cases, the increase was in the CRP level. CRP may be more significant in the identification of abortus cases.

FCP41

EXAMINATION OF TNF- α , IL-6 AND IL-8 LEVELS IN MATERNAL SERUM IN PIH CASES:

*Çelik H., *Sapmaz E., **Akbulut H., *Tuğ N., *Altıngül Çelik A., *Beytur L.C., *Fırat University, School of Medicine, Department of Obstetrics and Gynecology*, Immunology**, Elazığ - Türkiye*

Objective: To compare TNF- α , IL-6 and IL-8 levels in maternal serum in pregnancy induced hypertension (PIH) cases both among themselves and with those of healthy pregnant women in a similar week of pregnancy.

Material - Method: Fifty six expectant women who came to our clinic between October 1, 2000 and December 1, 2001 and who were diagnosed as PIH (G1= mild pre-eclampsia, n=7; G2= severe pre-eclampsia, n=14; G3=eclampsia, n=7) and healthy pregnant women (G4= control of G1, n=7; G5= control of G2, n=14; G6= control of G4, n=7) who were in similar weeks of pregnancy and who comprise the control group were included in a randomised block design, cross-sectional prospective study program. TNF- α , IL-6 and IL-8 levels in maternal serum were investigated. Each PIH group was compared with its own control group (G1-G4, G2-G5, G3-G6) and then, among each other (G1-G2, G1-G3, G2-G3).

Mann Whitney U test was used to compare continuous and ordinal data.

Results: In all PIH groups, TNF- α , IL-6 and IL-8 levels were found to be higher than in their own control groups ($p < 0.05$, Mann Whitney U test). However, the comparison of PIH groups among themselves did not reveal any statistically significant difference ($p > 0.03$, Mann Whitney U test).

Conclusion: TNF- α , IL-6 and IL-8 levels in maternal serum in the pre-eclamptic and eclamptic cases increase in comparison to those in healthy pregnant cases. These levels do not show significant differences among themselves.

FCP42

THE CORRELATION BETWEEN LIPIDS, HORMONS AND PROTEINURIA IN WOMEN WITH ASYMPTOMATIC (ISOLATED) PROTEINURIA IN LATE PREGNANCY

Czajkowski K., Smolarczyk, Wojcicka-Bentyn J., Bros M., Grymowicz M., Romejko E., Szczecina R., Teliga J., *The II Department of Obstetrics and Gynecology, Warsaw Medical University, Warsaw - Poland*

Objective: The aim of the study was to evaluate the correlation between protein concentration in urine and the serum concentrations of lipids and chosen hormones in women with asymptomatic (isolated) proteinuria in late pregnancy.

Methods: The study covered 45 women with asymptomatic proteinuria. The women were at the mean age of 27.6 \pm 6.17 years and at 37.6 \pm 2.62 weeks of gestational age. Their mean arterial blood pressure was 123.0 \pm 15.4/76.1 \pm 12.0 mmHg, proteinuria – 2.02 \pm 1.95 g/24 hours, body mass index (BMI) before pregnancy – 23.8 \pm 2.79, BMI before labor – 29.9 \pm 3.8. On average, BMI increased 24.5 \pm 9.7%. Three women presented lower extremities edema (6.67%). All women included in the study have had measured renal function biochemical parameters (uric acid, urea, osmolality, creatinine, electrolytes, acid base

balance) and they have had done blood morphology parameters. Moreover, women included in the study had no urinal tract infection (no bacteriuria present, leucocyturia within normal limits). Laboratory tests revealed hypoproteinemia $58,0 \pm 5,0$ g/l and hypoalbuminemia $443,4 \pm 58,0$ μ mol/l. All women included in the study have had measured their serum concentrations of: total lipids (TL), total LDL fraction (TLDL), total cholesterol (TCh), free cholesterol (fCh), phospholipids (PhL), triglycerides (TG), HDL-cholesterol (HDL-cholesterol) and LDL-cholesterol (LDL-Ch), total estrogens (TE) and human placental lactogen (HPL). Moreover, fCh/TCh ratio, TCh/PhL and LDL/HDL-Ch ratios were calculated. Their Pearson's correlation coefficient between proteinuria and above stated parameters was evaluated.

Results: The positive correlation was observed between proteinuria and: TL ($r=0,43$, $p<0,003$), TLDL ($r=0,47$, $p<0,001$), TCh ($r=0,37$, $p<0,01$), fCh ($r=0,68$, $p<0,001$), PhL ($r=0,45$, $p<0,001$), TG ($r=0,50$, $p<0,001$), HDL-Ch ($r=0,34$, $p<0,002$), fCh/TCh ratio ($r=0,42$, $p<0,004$). Moreover, the negative correlation was detected between proteinuria and: TE ($r=0,31$, $p<0,05$) and HPL ($r=0,34$, $p<0,04$).

Conclusion: In women with asymptomatic (isolated) proteinuria, the observed increase in lipid parameters levels and decrease in TE and HPL serum concentrations with the degree of proteinuria.

FCP43

PERINATAL OUTCOME IN WOMEN WITH ASYMPTOMATIC (ISOLATED) PROTEINURIA IN LATE PREGNANCY

Czajkowski K., Smolarczyk, Wojcicka-Bentyn J., Bros M., Grymowicz M., Romejko E., Szczecina R., Teliga J., *The II Department of Obstetrics and Gynecology, Warsaw Medical University, Warsaw - Poland*

Objective: The aim of the study was to evaluate the influence of the asymptomatic (isolated) proteinuria in late pregnancy for the perinatal outcome.

Methods: The study covered 45 women with asymptomatic proteinuria in late pregnancy (the study group) and 136 healthy women (the control group). Proteinuria was $2,02 \pm 1,95$ vs $0,2 \pm 0,3$ g/24hours. Moreover, the women in both groups were at the same mean age: $27,6 \pm 6,17$ vs $28,1 \pm 6,54$ years (NS). The women in both group were at the same gestational age: $37,6 \pm 2,62$ vs $37,1 \pm 2,15$ (NS). Body mass index (BMI) before pregnancy was $23,8 \pm 2,79$ vs $22,5 \pm 2,60$ ($p<0,05$). BMI before labor was $29,9 \pm 3,8$ vs $27,7 \pm 2,8$ ($p<0,01$). On average, BMI increased $24,5 \pm 9,7\%$ vs $24,1 \pm 7,0$ (NS). Mean arterial blood pressure was $123,0 \pm 15,4/76,1 \pm 12,0$ mmHg vs $115 \pm 6,0/68,0 \pm 7,0$ mmHg ($p<0,01$ and $p<0,01$). Three women in the study group presented lower extremities edema (6,67%). All women included in the study have had measured renal function biochemical parameters (uric acid, urea, osmolality, creatinine, electrolytes, acid base balance) and they have had done blood morphology parameters. Moreover, all women included in the study had no urinal tract infection (no bacteriuria present, leucocyturia within normal limits). Laboratory tests revealed hypoproteinemia $58,0 \pm 5,0$ vs $67,0 \pm 6,0$ g/l ($p<0,001$) and hypoalbuminemia $443,4 \pm 58,0$ vs $522,0 \pm 87,0$ μ mol/l ($p<0,001$). We compare in both groups percentage of primigravidas, weight and length of the newborn, ponderal index, Apgar score measured in 1 minute, percentage of caesarean sections.

Results: There was 61,1 % primigravidas in the study group vs 48,5% in control group (NS). The mean weight of the newborn was $3596,8 \pm 664,7$ vs $3356,8 \pm 597,8$ g (NS). The mean length of the newborn was $54,1 \pm 3,09$ vs $53,3 \pm 3,31$ cm (NS). The ponderal index was $22,57 \pm 2,07$ vs $22,21 \pm 2,78$ (NS). The 1- minute Apgar score was $9,8 \pm 0,77$ vs $9,7 \pm 1,1$ (NS). 22,2% patients in the study group had caesarean sections compared with 23,5% of patients in the control group (NS).

Conclusion: We conducted that asymptomatic (isolated) proteinuria in late pregnancy does not effect perinatal outcome.