

lapse and later afibrinogemical bleeding. 3. Embolism with contaminated amniotic fluid always causes the death and resembles to those clinical cases with true diagnosis "Amniotic Embolism", when the cause of death is allergic reaction complicated by embolic discirculatory processes in lungs.

## FCO29

### OXITOCINONE, INDUCING FETUS MATURATION

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Objectives: The aim of this study was to present the possibility of making earlier maturation of fetus lungs, by provoking the "stress phenomena".

Study Methods: In the last three months, we started an interesting study of provoking faster production of lecithin L and sphingomyelin S in fetus lungs by giving mothers the infusions of sintocinone in the course of 7 days, in low doses, looking after cardiococography, ultrasound and doppler, and making the analysis of L/S ration after and before the experiment.

Results: We have tested 30 women between 35wg-37wg, with diabetes mellitus gestational in 24 of them and insulin dependent in 3 cases. The L/S ratio was 1,5/1 and they had 0,7-1,1 x10 cells. After 5-7 days of oxitocinone infusions at 6-8 hours intervals in 0,9%NaCl solutions we have checked their ansimes concentration and in 87% (26 cases) it was for planning delivery, L/S=2/1 and we had 1,2 to 2,1 x 10 cells. in 13% the L/S ratio was 1,75/1 and it is nearly enough for delivery.

Conclusions: We wanted to suggest a possible way of speeding fetus lung maturation, using oxitocinone infusions, and initiating stimulus to realise endogenous TRH and T3, by making fluctuations in fetus PO2. This is a pilot idea, but very successful, and needs more experience.

## FCO30

### DETERMINATION OF FETAL NUCHAL THICKNESS IN 2ND TRIMESTER OF PREGNANCY IN PREGNANT WOMEN RESIDE IN GEORGIA REGION

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Background: In earlier studies the high risk of chromosomal anomalies has been detected in fetuses with Fetal Nuchal Thickness (FNT) more than 6 mm and there are the appreciable peculiarities of FNT specified of local and ethnic difference. The aim of our study was to determine the FNT in Georgia resident pregnant women in 2nd trimester of pregnancy.

Methods: From 1994 to June 2002 the 4750 pregnant women at 15 to 27 weeks of pregnancy were prospectively studied by routine ultrasound and any abnormalities of fetuses were observed.

FNT measurement was obtained by standard ultrasound section in transverse plane of the fetal head. Under procedure of examination the 5th, 50th and 95th percentiles were determined.

Results: The mean index of FNT increased from 15 to 22 weeks of gestation (M ± 2SD):

15 weeks -- 3,0 ± 0,27mm	19 weeks – 3,5 ± 0,81 mm
16 weeks – 3,0 ± 0,19 mm	20 weeks - 3,8 ± 0,45 mm
17 weeks – 3,3 ± 0,90 mm	21 weeks – 3,8 ± 0,35 mm
18 weeks – 3,5 ± 1,90 mm	22 weeks – 4,0 ± 0,27 mm

The mean index of FNT from 23 to 27 weeks of gestation varied (M ± 2SD):

23 weeks – 4,0 ± 0,20 mm	26 weeks – 3,9 ± 0,27 mm
24 weeks – 3,8 ± 1,0 mm	27 weeks – 4,0 ± 0,16 mm
25 weeks – 3,9 ± 0,14 mm	

Conclusions: The mean measurement of FNT in our study varied but in all cases was not more then 5 mm in normal fetuses at 15 to 27 weeks of gestation. The obtained FNT mean index can be useful in routine ultrasound screening program to detect the genetic disorders as a selective test before the basic genetic examination.