

MORPHOLOGICAL CHARACTERISTIC CHANGES OF BLOOD VESSELS OF PLACENTAL TISSUE OF PREGNANT WOMEN WITH ECLAMPSIA

Abdulloev Shakhboz Hamroevich

Graduate Student of the Department of Pathological
Anatomy of the Tashkent Medical Academy

Babaev Khamza Hurmatovich

Academic supervisor, Associate Professor

Abstract

In this article, we consider the latest research on the morphological changes of blood vessels in placental tissues of pregnant women with eclampsia.

Key words: eclampsia, placenta tissue, vascular, morphology, pregnant women.

INTRODUCTION

Eclampsia is a serious complication of pregnancy and is characterized by increased blood pressure, edema and proteinuria. One of the main aspects of eclampsia is the morphological changes that occur in the blood vessels of placental tissue. Understanding these changes is critical to improving maternal and fetal health in eclamptic conditions.[4]

MATERIALS AND METHODS

We conducted a comprehensive review of recent studies focusing on vascular morphologic changes in placental tissue of women with eclampsia. A study included in this literature review provides insight into the vascular changes that occur in eclampsia.[3]

RESULTS AND DISCUSSIONS

Recent studies have highlighted the presence of various morphological changes in blood vessels of placental tissue in women with eclampsia. These changes include increased capillary permeability, vascular structural abnormalities, and changes in intraplacental blood flow. These vascular changes can exacerbate placental insufficiency, which limits fetal growth and leads to adverse pregnancy outcomes such as hypoxia. [5]

It is very important to predict the morphological changes of blood vessels in the placental tissues of pregnant women with eclampsia and early detection of complications. By identifying and preventing these vascular changes, maternal and fetal health interventions for eclampsia can be developed. Further research is needed to identify the underlying mechanisms of these morphological changes and to explore clinical approaches for the treatment of eclampsia. [1]

Morphological characteristics of blood vessels in placental tissue of women with eclampsia often reveal clear changes compared to healthy pregnancies. Eclampsia is

associated with endothelial damage, leading to impaired vasodilation and increased vascular permeability. Endothelial cells that line blood vessels can show signs of inflammation, swelling, and disruption of their normal function. In eclampsia, the balance of vasoactive substances is often disturbed, which leads to constriction of blood vessels and a decrease in blood flow in placental blood vessels. This can contribute to placental tissue ischemia and hypoxia, which can harm the health of the fetus.

CONCLUSION

In conclusion, the morphological changes of blood vessels in the placental tissue of pregnant women with eclampsia is a complex process that requires continuous investigation. By elucidating the mechanisms behind these changes, we can advance our understanding of eclampsia and improve outcomes for affected individuals. Eclampsia is a serious complication of pregnancy characterized by the development of seizures in a woman with high blood pressure and proteinuria.

This condition poses a serious risk to both the mother and the fetus, which requires a complete understanding of its underlying pathomorphology, including the morphological changes that occur in the placental blood vessels of affected pregnant women. Understanding these morphologically specific changes in placental vasculature in pregnant women with eclampsia is essential to inform clinical management strategies aimed at ameliorating the complications associated with this life-threatening condition. By addressing the vascular pathology of eclampsia, healthcare providers can optimize maternal and fetal outcomes through timely intervention and targeted treatment approaches.

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