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Features of the Hormonal Background During Premature Relation of Ambitional Fluid

Guzal Mukhtarovna Kayumova
Department of Gynecology, Bukhara State Medical Obstetrics Institute
No. 1 named after Abu Ali Ibn Sina

Premature rupture of amniotic fluid is not only a medical, but also a social problem, which is primarily due to its consequences for children - perinatal morbidity and mortality in premature newborns is 35-40 times higher than in full-term ones [2, 3, 4, 5]. Premature birth (PB) is the main problem of perinatology in the world. At least every tenth child (11.1%) is born prematurely [1,6]. PTB is the leading cause of child mortality worldwide [2,7]. Premature infants also have an increased risk of death from other causes, especially infectious complications[3,8]. Reducing the number of premature births, as well as complications in premature babies, can be achieved by: timely diagnosis and treatment of the threat of premature termination of pregnancy; optimal methods of delivery, taking into account the gestational age and obstetric situation; timely diagnosis and correction of isthmic-cervical insufficiency (ICI); expectant management in case of premature rupture of amniotic fluid and premature pregnancy; treatment of premature babies in intensive care units and neonatal intensive care units using modern technologies; follow-up of premature newborns in the second stage of nursing. Diagnosis of preterm labor is fraught with certain difficulties, since symptoms reminiscent of the onset of preterm labor often occur during normal pregnancy. Hormones of the fetoplacental system are important in the formation and development of pregnancy. The leading role in the gestation process is played by steroid hormones - estrogens, progesterone and peptide hormones - human chorionic gonadotropin and placental lactogen. Estrogens determine the growth, maturation and ovulation of the egg, take part in the regulation of progesterone biosynthesis, affect immunocompetent cells, regulate biochemical processes in the myometrium, increase the level of uteroplacental blood flow and the volume of circulating blood, and prepare the pregnant woman’s body for childbirth. The level of estrogen, especially the main fraction - estriol, synthesized by the placenta from the second trimester of pregnancy, increases significantly towards the end of pregnancy [3, 4, 7]. Progesterone, being the main hormone of pregnancy, ensures decidual transformation of the endometrium and preparation for implantation of the fertilized egg, promotes the development and vascularization of the endometrium, reducing the tone and excitability of the myometrium, and maintains the tone of the isthmic-cervical region. Progesterone provides immune tolerance of the mother's body to the developing fetus and local hemostasis in the endometrium, is a precursor to the synthesis of fetal steroids [2, 6]. Chorionic gonadotropin, being a glycoprotein, from early gestation stimulates the functional activity of the corpus luteum and the production of progesterone, promotes the synthesis of estrogens in the fetoplacental complex and the process of aromatization of androgens of fruit origin, influences the functional activity of the gonads and adrenal glands fetus. Chorionic gonadotropin helps to inhibit the immunological reactions of a pregnant woman by inducing suppressor T cells and plays the role of a new immunosuppressant in the prevention of immunoconflict and fetal rejection. Human chorionic gonadotropin level up to 10-12 weeks. pregnancy

increases, after which it is maintained at a certain level until the end of pregnancy [1, 6, 8]. Placental lactogen helps stimulate the formation of the secretory parts of the mammary glands in pregnant women, regulates carbohydrate and lipid metabolism, being a metabolic hormone that provides energy resources for the growth and development of the fetus [8].

The purpose of the study was to determine the characteristics of hormonal levels during premature rupture of amniotic fluid.

Materials and methods. We examined 86 patients with threatened miscarriage (main group) and 42 patients with physiologically progressing pregnancy (control group) at gestation periods from 22 to 35 weeks. Clinical and diagnostic criteria for threatened miscarriage were: pain of various types in the lower parts of the abdomen and lower back, irregular a clear increase in myometrial tone, confirmed by objective data (uterine contractions during cardiotocographic study, local tone myometrium according to ultrasound data). The objects of the study were venous blood serum taken on an empty stomach in the morning. Hormones of the fetoplacental complex were determined by enzyme immunoassay using a kit from Human (Germany). Results and discussion In the main group, 41 (47.6%) patients underwent studies in the second trimester of gestation, and 45 (52.3%) - in the third trimester of pregnancy. The average age of patients in the main group was 25.13±0.9 years, in the control group - 27.42±1.01 years. In the examined groups of patients, an analysis of the structure of the extragenital pathology, obstetric and gynecological history and the nature of the pregnancy. Primiparas in the main group accounted for 68%, of which 17.6% were primigravidas. Among those examined in the main group, in 33 (36.7%) patients, the threat of miscarriage was registered from 12 weeks, in 67 (77.9%) it persisted in the second trimester. 26 (30%) patients suffered from combined extragenital pathology: neurocirculatory dystonia of the hypotonic type, diseases of the urinary system, endocrinopathies, diseases of the upper respiratory tract and varicose veins. 79 (91.8%) patients of the main group had gynecological diseases: chronic inflammatory diseases of the genital organs, menstrual irregularities, primary or secondary infertility, uterine fibroids. Had a scar on the uterus 8 (9.3%) women, in 3 (3.4%) pregnancy occurred after stimulation of ovulation. Previous treatment for various genital infections was carried out in 39 (45.3%) female patients. All patients of the main group were burdened by the presence of artificial and spontaneous abortions. 31 (36.3%) patients had one or more medical abortions, 28 (32.1%) had one spontaneous miscarriage, 27 (31.6%) had two or more spontaneous miscarriages.The analysis showed that the most common concomitant obstetric pathology in patients of the main group was placental insufficiency- in 72.6%, gestational anemia - in 38.1%, gestosis of varying severity - in 21.6%. All patients with threatened miscarriage received complex pathogenetic therapy according to the generally accepted scheme. In order to study the characteristics of changes in hormones of the fetoplacental complex, the levels of estriol, progesterone, human chorionic gonadotropin and placental lactogen were determined. In uncomplicated pregnancy (control group), the average level of hormones in the II (22-26 weeks) and III (27-35 weeks) trimesters of gestation is presented in Table. 1.

Table 1 Hormone content during physiological pregnancy

Index	Gestation period	
	22-26 weeks (n=42)	27-35 weeks (n=42)
Estriol (nmol/l)	38,12±3,71	57,24±3,95*
Progesterone (nmol/l)	59,28±5,24	116,41±7,21*
Human chorionic gonadotropin (mIU/ml)	39000±1200	34000±1100
Placental lactogen (mg/l)	5,81±0,35	8,72±0,54

Note. *—differences are statistically significant (p<0.05).

Table 2 Hormone content during threatened miscarriage

Index	Gestation period	
	22-27 week (n=86)	35 week (n=86)
Estriol (nmol/l)	26,31±2,14	45,51±2,89*
Progesterone (nmol/l)	44,21±3,21	38,19±2,84
Human chorionic gonadotropin (mIU/ml)	21100±1100	12500±850*
Placental lactogen (mg/l)	5,65±0,41	7,24±0,83

If there is a threat of miscarriage in the main group at a gestational age of 22-27 weeks. We have established a decrease in the level of steroid and peptide hormones:estriol, progesterone, human chorionic gonadotropin. In the group of patients with threatened miscarriage at a gestation period of 28-35 weeks. Most values of the hormones studied were greatly reduced. Thus, despite significant fluctuations in the level of hormones of the fetoplacental complex, their decrease has been established in case of threatening premature birth, bomore pronounced with increasing gestational age.

Conclusions.Studies have confirmed the development of a threat of premature birth in patients with antenatal risk factors. The results of laboratory data show the diagnostic value of determining hormone levels fetoplacental complex in patients with threatened miscarriage.

Literature

1. 1.Ikhtiyarova Gulchehra, Dustova Nigora, Qayumova Guzal.(2017).Diagnostic characteristics of pregnancy in women with antenatal fetal death. European Journal of Research. Social Science and Humanities. Vienna, Austria.IMPACT FACTOR SJIF 3, 5/ IFS 3, 8 № 4 (4),95-107.
2. 2.G.M. Kayumova., X.N. Khamroev.,G.A. Ixtiyarova. (2021).Morphological features of placental changes in preterm labor.Тиббиётда янги кун, 3 (35/1). 104-107.
3. 3.Qayumova G.M. Dustova N.Q.(2023)Muddatdan oldin qog’onoq parda yorilishi kuzatilgan homiladorda tug’ruq yo’llari mikrobiosenoz holatini baholashda femoflor testining ahamiyati. Научно-практическая конференция с международным участием.
4. ”Будущее акушерства гинекологии,репродуктологии и перинатальной медицины,посвященная памяти профессор Аюповой Ф.М.” 56-57.
5. 4.Guzal Mukhtarovna Kayumova,Nigora Qahramonovna Dustova,Yulduz Mukhtarovna Mukhtarova.(2023).Muddatdan oldin qog’onoq suvining ketishida klinik omillarning ta’sirini baholash Тиббиётда янги кун, 6(56).103-108.
6. 5.Қаюмова Гўзал Мухтор қизи, Дўстова Нигора Қаҳрамоновна (2023).Муддатдан олдин қоғоноқ суви кетган ҳомиладорларда туғруқ йўллари микробиоценоз ҳолатини баҳолашда фемофлор тестининг аҳамияти. Биология ва тиббиёт муаммолари.№3 (144) 109-112.
7. G.M. Kayumova.,X.N Hamroyev.(2023).Significance of the femoflor test in assessing the state of vaginal microbiocenosis in preterm vaginal discharge. International Journal of Medical Sciences And Clinical Research (ISSN – 2771-2265) VOLUME 03 ISSUE 02 SJIF IMPACT FACTOR (2021: 5. 694) (2022: 5. 893) (2023: 6. 184) OCLC – 1121105677. PAGES: 58-63.

8. Г.М.Қаюмова.Н.Қ.Дўстова.(2023).Muddatdan oldin qog'onoq suvining ketishida xavf omillarning ta'sirini baholash.Журнал гуманитарных и естественных наук № 2 (07).11-18.
9. L.V. Sarkisova ,Kayumova G.M. (2019).Exodus of premature birth. Тиббиётда янги кун, 1(25)155-159.
10. Саркисова Л.В., Каюмова Г.М.(2018).Перинатальный риск и исход преждевременных родов Проблемы медицины и биологии 12-13 апреля 2018 года 169-175.
11. 10. Sarkisova Lyalya. Valeryevna, Kayumova Guzal Mukhtorovna, Egamova Sitora Kobylovna (2019). Premature Birth In A Modern Aspect. International Journal of Bio-Science and Bio-Technology (IJBSBT) ISSN: 2233-7849 Vol-11-Issue-9.10.23.Impact factor 6.31-37.
12. Г.М.Каюмова.,Л.В.Саркисова.,Н.Н.Умидова. (2018).Современные взгляды на проблему преждевременных родов. Тиббиётда янги кун 183-185.
13. Саркисова Л.В., Каюмова Г.М., Умидова Н.Н. (2018).Морфологические изменения фетоплацентарного комплекса при герпетической инфекции. Тиббиётда янги кун.188-191.
14. Г.М.Каюмова.,Хамроев Х.Н.,Ихтиярова Г.А.(2021).Причины риска развития преждевременных родов в период пандемии.139-148.
15. Саркисова Л.В., Каюмова Г.М.(2018).Перинатальный риск и исход преждевременных родов.Проблемы медицины и биологии.169-175.
16. G.M. Kayumova, N.K. Dustova (2023).Significance of the femoflor test in assessing the state of vaginal microbiocenosis in preterm vaginal discharge. Problems and scientific solutions. International conference: problems and scientific solutions. Abstracts of viii international scientific and practical conference vol 2, issue 2, australia, Melbourne 150-153.
17. Каюмова Г.М, Мухторова Ю.М, Хамроев Х.Н.(2022).Причина преждевременных родов.Scientific and innovative therapy.Научный журнал по научный и инновационный терапии.57-58.
18. Каюмова Г.М, Мухторова Ю.М, Хамроев Х.Н.(2022).Определить особенности течения беременности и родов при дородовом излитии околоплодных вод.Scientific and innovative therapy.Научный журнал по научный и инновационный терапии. 58-59.
19. Каюмова Г.М, Мухторова Ю.М.(2022).Пороговые значения антител к эстрадиолу, прогестерону и бензо[а]пирену как факторы риска преждевременного излития околоплодных вод при недоношенной беременности.Scientific and innovative therapy.Научный журнал по научный и инновационный терапии. 59-60.
20. Каюмова Г.М, Мухторова Ю.М. (2022).Применение теста «фемофлор-16» для оценки состояния биоценоза генитального тракта у женщин с преждевременном излитии околоплодных вод.Scientific and innovative therapy.Научный журнал по научный и инновационный терапии. 60-61.
21. G.M. Kayumova, N.K. Dustova. (2023).Assessment of the state of the genital tract microbiocenosis in pregnant women with premature rupture of the membranes using the femoflor test. modern scientific research international scientific Journal 2023 Vol1 Issue1.70-72.
22. G.M. KAYUMOVA, N.K. DUSTOVA.(2023)Features of the hormonal background with premature surge of amniotic fluid. Of the international scientific and practical conference of young scientists «Science and youth: conference on the quality of medical care and health literacy»Ministry of healhcare of the republic of kazakhstan kazakhstan's medical university«KSPH».ISBN 978-601-305-519-0.29-30.
23. G.M. KAYUMOVA, N.K. DUSTOVA.(2023).Assessment of the state of the genital tract microbiocenosis in pregnant women with premature rupture of the membranes using the femoflor test. Of the international scientific and practical conference of young scientists «Science and youth:

conference on the quality of medical care and health literacy».ministry of healhcare of the republic of kazakhstan kazakhstan's medical university «KSPH». ISBN 978-601-305-519-0 . 5-6.

24. 23. Каюмова Г.М., Хамроев Х.Н., Ихтиярова Г.А. (2021).Причины риска развития преждевременных родов в период пандемии организм и среда жизни к 207-летию со дня рождения Карла Францевича Рулье: сборник материалов IV -ой Международной научнопрактической конференции (Кемерово, 26 февраля 2021 г.).ISBN 978-5-8151-0158-6.139-148.
25. Qayumova G.M Xamroyev X.N Muxtorova Y. (2021).Changes of the placenta in preterm labor.Новые проблемы медицинской науки и перспективы их решений.XVI научно-практическая конференция молодых учёных и студентов с международным участием ГОУ "ТГМУ им.Абуали ибни Сино", посвященная 30-летию Государственной независимости Республики Таджикистан и годам развития села, туризма и народных ремесел.217.
26. Khamroyev X.N. Qayumova G.M. (2021).Improving the results of treatment of choledocholithiasis in liver diseases.Новые проблемы медицинской науки и перспективы их решений.XVI научно-практическая конференция молодых учёных и студентов с международным участием ГОУ "ТГМУ им.Абуали ибни Сино", посвященная 30-летию Государственной независимости Республики Таджикистан и годам развития села, туризма и народных ремесел.217.
27. 26. Каюмова Г.М., Ихтиярова Г.А.(2021).Причина перинатальных потер при преждевременных родов у женщин с анемией.(2021).Материалы республиканской научно-практической онлайн конференции.«Актуальные проблемы современной медицины в условиях эпидемии»76-7
28. Каюмова Г.М., Саркисова Л.В., Саъдуллаева Л.Э.(2018).Показатели центральной гемодинамики и маточно-фетоплацентарного кровотока при недонашивании беременности.Республиканской научно практической конференции «Актуальные вопросы охраны здоровья матери и ребенка, достижения и перспективы».56-57.
29. Каюмова Г.М., Саркисова Л.В., Рахматуллаева М.М.(2018).Особенности состояния плаценты при преждевременных родах.Республиканской научно практической конференции «Актуальные вопросы охраны здоровья матери и ребенка, достижения и перспективы».57-59.
30. 29..КаюмоваГ.М.(2019).Особенности клинического течения преждевременных родов и перинатальные исходы. Первая Бухарская международная конференция студентов-медиков и молодежи.262-263.
31. 30.Хамроев Х.Н, Туксанова Н.Э. «Characteristic of morphometric parameters of internal organs in experimental chronic alcoholism». «Тиббиётда янги кун" 2 (34) 2021. https://newdaymedicine.com/index.php/2021/05/01/44-2-34-2021-khamroev-x-n-tukhsanova-n-e-characteristic-of-morphometric-parameters-of-internal-organs-in-experimental-chronic-alcoholism/
32. 31.Хамроев Х.Н , Хасанова Д.А. "Морфофункциональные изменения печени в динамике хронической алкогольной инокцикации». «Тиббиётда янги кун» 5 (37)2021. https://newdaymedicine.com/index.php/5-37-2021/
33. 32.Хамроев Х.Н. «Toxic liver damage in acute phase of ethanol intoxication and its experimental correction with chelate zinc compound» . European journal of modern medicine and practice vol.2no.2(2022)ejmmp issn:2795-921x. https://inovatus.es/index.php/ejmmp/article/view/286
34. 33.Khamroyev Kh.N. «**The morphofunctional changes in internal organs during alcohol intoxication».** European journal of modern medicine and practice vol. 2 no. 2 (2022) ejmmp issn:

2795-921x. https://inovatus.es/index.php/ejmmp/article/view/285
35. 34.Хамроев Х.Н , Хасанова Д.А . «Жигар морфометрик кўрсаткичларининг меъёрда ва экспериментал сурункали алкоголизмда қиёсий таснифи». Журнал гуманитарных и естественных наук № 2 (07), 2023. http://journals.tnmu.uz/index.php/gtfj/issue/view/7/10
36. 35.Хамроев Х.Н , Хасанова Д.А . «Жигар морфометрик кўрсаткичларининг меъёрда ва экспериментал сурункали алкоголизмда қиёсий таснифи». Медицинский журнал Узбекистана | Medical journal of Uzbekistan 2023 №2
37. 36..Hamroev Khudoyshukur Nutfilloevich, Khasanova Dilnoza Akhrorovna. «Comparative classification of liver morphometric parameters in the liver and in experimental chronic alcoholism». International Journal of Cognitive Neuroscience and Psychology IJCNP, Volume 1, Issue 1, 2023 https://medicaljournals.eu/index.php/IJCNP/article/view/18
38. 37.Хамроев Х.Н , Хасанова Д.А . «Сравнительная характеристика морфометрических показателей печени». Журнал Проблемы биологии и медицины ПБиМ 2023 №5. https://www.sammu.uz/ru/journals.
39. 38..Khamroyev Kh.N. «To assess liver morphological changes in the norm and features of the character of its changes during chronic alcohol intoxication». Международной научно-практической конференции молодых ученых «наука и молодежь: конференция по качеству медицинской помощи и медицинской грамотности» 25 апреля, 2023. https://ksph.edu.kz/ru/2023/04/%d0%bc%d0%b0%d1%82%d0%b5%d1%80%d0%b8%d0%b0%d0%bb%d1%8b%d0%ba%d0%be%d0%bd%d1%84%d0%b5%d1%80%d0%b5%d0%bd%d1%86%d0%b8%d0%b8/
40. 39.Хамроев Х.Н. «Провести оценку морфологических изменений печени в норме и особенностей характера ее изменений при хронической алкогольной интоксикации». Republican scientific and practical conference with international participation 30.05.2023. A p p l i c a t i o n o f h i g h i n n o v a t i v e t e c h n o l o g i e s i n p r e v e n t i v e m e d i c i n e. https://adti.uz/konferensiyalar/
41. 40.Хамроев Х.Н, Ганжиев Ф.Х. «Динамика структурно-функциональных нарушение печени крыс при экспериментальном алгоколние циррозе». P r o b l e m s o f m o d e r n s u r g e r y 06.10.2023. https://adti.uz/konferensiyalar/
42. 41.Хамроев Х.Н , Хасанова Д.А, Ганжиев Ф.Х, Мусоев Т.Я. «Шошилинч тиббий ёрдам ташкил қилишнинг долзарб муаммолари: Политравма ва ўткир юрак-қон томир касалликларида ёрдам кўрсатиш масалалари» XVIII Республика илмий-амалий анжумани 12.10.2023 й.
43. 42.Хамроев Х.Н . «Влияние диффузных заболеваний печени на течени и прогноз механической желтухи» Сборник материалов первой Бухарской международной конференции “студентов-медиков и молодежи” том 2019г. 136-137 стр. https://repo.knmu.edu.ua/bitstream/123456789/24890/1/%D0%9D%D0%B5%D1%87%D0%B8%D0%BF%D0%BE%D1%80%D1%83%D0%BA_%D0%91%D1%83%D1%85%D0%B0%D1%80%D0%B0%20(pdf.io).pdf
44. Muxiddinovna, I. M. (2022). IMPACT OF ENERGY DRINKS AND THEIR COMBINATION WITH ALCOHOL TO THE RATS METOBOLISM. Gospodarka i Innowacje., 22, 544-549.
45. 44..Mukhiddinovna, I. M. (2022). EFFECTS OF CHRONIC CONSUMPTION OF ENERGY DRINKS ON LIVER AND KIDNEY OF EXPERIMENTAL RATS. International Journal of Philosophical Studies and Social Sciences, 2(4), 6-11.
46. Muxiddinovna, I. M. (2022). Effects of Energy Drinks on Biochemical and Sperm Parameters in Albino Rats. *CENTRAL ASIAN JOURNAL OF MEDICAL AND NATURAL SCIENCES*, *3*(3), 126-

131
47. 46..Muxiddinovna, I. M. (2022). Demage of Energy Drinks on the Spermatogenesis of Male Rat's. *Research Journal of Trauma and Disability Studies*, *1*(9), 111-118.
48. 47..Muxiddinovna, I. M. (2022). Effects of Energy Drinks on Biochemical and Sperm Parameters in Albino Rats. *CENTRAL ASIAN JOURNAL OF MEDICAL AND NATURAL SCIENCES*, *3*(3), 126-131.
49. 48..Muxiddinovna, I. M. (2022). Ameliorative Effect of Omega-3 on Energy Drinks-Induced Pancreatic Toxicity in Adult Male Albino Rats. *INTERNATIONAL JOURNAL OF HEALTH SYSTEMS AND MEDICAL SCIENCES*, *1*(5), 13-18.
50. 49..Muxiddinovna, I. M., & Sobirovna, A. Z. (2022). Pregnancy with Twins with Preeclampsia. *Central Asian Journal of Literature, Philosophy and Culture*, *3*(11), 212-221.
51. Muxiddinovna, I. M., & Sobirovna, A. Z. (2022). Anemia Iron Deficiency in Pregnancy. *Central Asian Journal of Literature, Philosophy and Culture*, *3*(11), 191-199.
52. Mukhiddinovna, I. M. (2022). ENERGY DRINKS MAY AFFECT THE OVARIAN RESERVE AND SERUM ANTI-MULLERIAN HORMONE LEVELS IN A RAT MODEL. *BARQARORLIK VA YETAKCHI TADQIQOTLAR ONLAYN ILMIY JURNALI*, *2*(12), 626-632.
53. Mukhiddinovna, I. M. (2023). High Caffeine Exposure Increases Ovarian Estradiol Production in Immature Rats. *JOURNAL OF HEALTHCARE AND LIFE-SCIENCE RESEARCH*, *2*(3), 8-11.
54. Mukhiddinovna, I. M. (2023). Energy Fluids May Affect the Ovarian Reserve and Serum Anti-Mullerian Hormone Level. *Scholastic: Journal of Natural and Medical Education*, *2*(5), 358-364.
55. Mukhiddinovna, I. M. (2022). ENERGY DRINKS MAY AFFECT THE OVARIAN RESERVE AND SERUM ANTI-MULLERIAN HORMONE LEVELS IN A RAT MODEL. *BARQARORLIK VA YETAKCHI TADQIQOTLAR ONLAYN ILMIY JURNALI*, *2*(12), 626-632.
56. Ismatova, M. M. (2023). Energy Drinks May Affect the Ovarium. *American Journal of Pediatric Medicine and Health Sciences (2993-2149)*, *1*(8), 34-38.
57. Suratovna, S. S., & Muxiddinovna, I. M. (2023). Genetic Polymorphisms in Interleukin-1β (Rs1143634) and Interleukin-8 (Rs4073) Are Associated With Survival after Resection of Intrahepatic Cholangiocarcinoma. *American Journal of Pediatric Medicine and Health Sciences (2993-2149)*, *1*(8), 39-46.
58. Хайдарова, Н. Б. (2023). Прогноз Недостаточности Плацентарной Системы У Беременных, Получавших Лечение От Covid-19 И Sars-Cov-2. Central Asian Journal of Medical and Natural Science, 4(5), 693-700.
59. 58.Sharipova N. M. (2023). Impact of Vitamin D Deficiency on Pregnancy. Central Asian Journal of Medical and Natural Science, 4(5), 705-712. Retrieved from https://cajmns.centralasianstudies.org/index.php/CAJMNS/article/view/1895
60. 59.Н. М., Ш. . (2023). Влияние Дефицита Витамина D На Течение Беременности. AMALIY VA TIBBIYOT FANLARI ILMIY JURNALI, 2(10), 59–63. Retrieved from https://sciencebox.uz/index.php/amaltibbiyot/article/view/8173