

## **P91. Vitamins and microelements at the stage of pre-gravity preparation and during pregnancy in patients with endocrinopathies.**

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Context: Insufficient intake of vitamins and trace elements can lead to various complications of pregnancy, including the delay in intrauterine growth of the fetus, the birth of children with low body weight and malformations. Patients with obesity, thyroid disease, pathology of the pituitary-pectoral system are at high risk for various complications during pregnancy and from the mother and the fetus. Objective of the work was to assess the impact of women's vitamin status on the development of complications of pregnancy. Methods: a prospective comparative analysis of the initial clinical data, the course of pregnancy and its outcomes for the mother and fetus, depending on the intake of pregnant vitamins was conducted. Patients: pregnant women who had the risk of developing pre-eclampsia, increased blood pressure, gestational diabetes, and abnormal weight gain, which were observed at the Endocrinology Center from 2014-2015, and the age of patients from 23 to 35 years. Intervention: 1. a comparative assessment of the clinical course of pregnancy and childbirth, the condition of the fetus and the newborn baby in women who regularly took and did not take vitamins during pregnancy; 2. Collection of data on the intake of vitamin patients; 3. Analysis of documentation on the condition of the fetus using functional research methods. The results indicate a poor knowledge of the patient about the intake of vitally important vitamins and microelements at the pre-gravity preparation stage, during pregnancy and during breastfeeding; 40% of patients included in the study did not take any vitamins and trace elements during pregnancy. The frequency of detection of preeclampsia in patients with endocrinopathies was 23% in the study, gestational diabetes - 13%, abnormal weight gain - 4%, and blood pressure increase - 18%. The frequency of the above complications of pregnancy was lower in patients who took vitamin-mineral complexes. The results indicate the need for additional intake of vitamins and minerals during pregnancy as a condition for ensuring its normal course and outcome, especially in somatically burdened patients. Conclusions. The decision to choose a drug should be decided individually by the attending physician with each patient, taking into account his somatic. Evaluation of the influence of vitamin status of women at the stage of pregnancy planning, development of complications of pregnancy requires extensive national research.

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