

**AN INNOVATIVE APPROACH TO PROVIDING OBSTETRIC CARE TO A
PREGNANT WOMAN WITH ECLAMPSIA**

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Abstract: Eclampsia is a serious and conceivably dangerous condition that can be during gestation. It's described by the enhancement of seizures in a pregnant lady who lately had toxemia, a condition set piecemeal by hypertension and suggestions of detriment to other organ fabrics, utmost constantly the liver and feathers. Eclampsia is a health-related extremity that requires quick and feasible treatment to guarantee the security of both the mama and the future youth. In this composition, we will examine a creative way to deal with giving obstetric consideration to a pregnant lady with breakdown, zeroing in on the application of cutting-edge clinical invention and multidisciplinary cooperation to work on understanding results.

Keywords: Approaches, interventions, medical aid, different conditions, fragrance.

Introduction: The customary way to deal with overseeing eclampsia includes settling the patient, controlling seizures, and dealing with the entanglements related with the condition. This normally incorporates the organization of anticonvulsant meds, for example, magnesium sulfate, to forestall further seizures, as well as close checking of the mother's important bodily functions and fetal prosperity. While these intercessions are fundamental for the prompt administration of eclampsia, they don't address the hidden pathophysiology of the condition or it drawn out suggestions for maternal and fetal wellbeing.

An imaginative way to deal with giving obstetric consideration to a pregnant lady with eclampsia includes the coordination of cutting-edge clinical innovation, for example, telemedicine and remote observing, to work with early recognition and intercession. Telemedicine permits medical care suppliers to remotely survey and screen patients, empowering convenient direction and intercession.

On account of eclampsia, telemedicine can be utilized to screen the mother's pulse, pulse, and other fundamental signs, as well as fetal prosperity, from a distant area. This continuous checking empowers medical services suppliers to identify and answer changes in the patient's condition immediately, diminishing the gamble of complexities and further developing results.

Gestational hypertension is perhaps of the most well-known illness in human pregnancy. Albeit moderately protected to show up alone, in close to half of instances of gestational hypertension, the sickness advances to toxemia, a possibly lethal condition for the eager mother. Birddog, gestational hypertension is an exceptionally uncommon condition in different creatures.

Albeit some new data is realized that comparable circumstances might foster in a primate because of various components, for a long-time established researcher accepted that gestational hypertension and toxemia were selective to people. The primary driver of gestational hypertension in people is generally viewed as a skewed placenta. Human egg to an exceptionally intrusive placenta to more readily move oxygen from mother to baby and support the development of its cranial mind.

The beginning of gestational hypertension can be related with the advancement of the hemochorial placenta in people. The hemochorial placenta upgrades how much oxygen and supplements that can be ingested into the fetal blood, while guaranteeing the fast appropriation of byproducts from the hatchling. This hemochorial placenta contrasts from the epitheliochorial satellites of primates in the lower classes in that it permits fetal tissue to associate straightforwardly with the mother's blood. In this way, the hemochorial placenta adds to the quicker dissemination of substances in the blood to and from the baby.

In creatures with epitheliochorial placenta, for example, ponies and pigs, the best protection from maternal blood stream in the vascular framework was tracked down inside the placenta. Simultaneously, creatures with hemochorial placenta structures, like rodents and primates, had a low opposition of veins in the placenta, as per which researchers reached the resolution that the best protection from maternal blood stream happens somewhere else in the maternal vascular framework. Having high vascular opposition outside the placenta prompts an expansion in pulse in the mother all through the body.

Fetal cells situated in the uterine wall are known as trophoblasts. The hemochorial placenta structures lacunae or bowls in the maternal blood encompassing the fetal tissue, providing the fetal trophoblast with maternal blood. The lacuna is loaded up with twisting supply routes, and that implies that the mother's pulse is the main thrust for the presentation of oxygen into the framework and new blood, which is nourishment for the baby. It is expected that in people, expanded dissemination gave by the hemochorial placenta is vital for the development of an enormous cerebrum as per body size, which is recognized from different primates.

Notwithstanding telemedicine, the creative way to deal with overseeing eclampsia includes multidisciplinary cooperation among obstetricians, maternal-fetal medication subject matter experts, anesthesiologists, neonatologists, and other medical services experts. This cooperative methodology guarantees that the patient gets thorough and composed care, tending to the perplexing clinical, obstetric, and neonatal contemplations related with eclampsia. By cooperating, medical care suppliers can foster individualized administration plans custom-made to the particular requirements of the patient, advancing the security and prosperity of both the mother and the unborn kid.

Moreover, the inventive way to deal with giving obstetric consideration to a pregnant lady with eclampsia stresses patient training and strengthening. By teaching the patient about the signs and side effects of eclampsia, as well as the significance of normal pre-birth care and checking, medical services suppliers can enable the patient to play a functioning job in dealing with her wellbeing and prosperity. This patient-focused approach cultivates a feeling of organization and coordinated effort between the patient and her medical services group, elevating better adherence to therapy and follow-up care.

Conclusion

In conclusion, an innovative approach to providing obstetric care to a pregnant woman with eclampsia involves the integration of advanced medical technology, multidisciplinary collaboration, and patient education to improve patient outcomes. By leveraging telemedicine and remote monitoring, healthcare providers can detect and respond to changes in the patient's condition promptly, reducing the risk of complications and improving outcomes.

Additionally, multidisciplinary collaboration ensures that the patient receives comprehensive and coordinated care, addressing the complex medical, obstetric, and neonatal considerations

associated with eclampsia. Patient education and empowerment further enhance the effectiveness of this innovative approach, fostering a sense of partnership and collaboration between the patient and her healthcare team. Ultimately, the innovative approach to managing eclampsia holds great promise for improving the safety and well-being of pregnant women and their unborn children.

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