

acquisition of endometrial receptivity. However, pathological modification of its profile is associated with poor reproductive outcomes.

Key words: endometrium, microbiome, infertility.

87. THE USE OF LAST MENSTRUAL PERIOD AND THE LEVEL OF HUMAN CHORIONIC GONADOTROPIN AS SINGLE METHODS TO DETERMINE THE GESTATIONAL AGE BEFORE MEDICAL ABORTION

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Introduction. Most doctors prefer to make a pelvic examination or an ultrasound before abortion to estimate gestational age, which increases the cost and time for medical abortion and can be provided only by certified obstetrician gynecologists.

Aim of the study. To evaluate the certainty of women about their last menstrual period, to determine the gestational age and its correlation with the level of human chorionic gonadotropin, the safety of providing a medical abortion within less than 56 days without a prior pelvic examination and ultrasound.

Materials and methods. We conducted a retrospective study in which the last menstrual period of 150 women was evaluated. We have also determined the levels of human chorionic gonadotropin with a semi-quantitative pregnancy test in five concentration ranges: 25 mIU/ml, 100 mIU/ml, 500 mIU/ml, 2000 mIU/ml și 10000 mIU/ml and correlated the results with gestational age. Usually, the level of human chorionic gonadotropin at a gestational age of 8 weeks is less than 10000 mIU/ml and at the age of 10-12 weeks is more than 10000 mIU/ml. We have assessed the possibility of excluding pelvic examination and ultrasound for evaluation of gestational age by determining the efficacy of medical abortion and the complications that appeared.

Results. Out of 150 women seeking medical abortion, 149 (99.33%) were sure of their last menstrual period and only one patient, 0.67%, could appreciate the date of the unprotected sexual contact; 53.4% women had a gestational age of 4-5 weeks; 45.4% had 6-7 weeks and 1.2% had a gestational age of 8 weeks. Out of women with a gestational age of 4-5 weeks, 92.5% had the level of human chorionic gonadotropin of 500 mIU/ml; 5% had 100 mIU/ml; 1.25% had a value of 100 mIU/l and 1.25% had the level of 2000 mIU/ml. In the group of women with a gestational age of 6-7 weeks, 95.6% had the level 500 mIU/ml; 3% - 2000 mIU/ml, and 1.4% had the value of human chorionic gonadotropin of 100 mIU/ml. In women with 8 weeks of pregnancy only one woman, 50% had the level of human chorionic gonadotropin 500 mIU/ml and 50% had 2000 mIU/ml. No woman had a value of human chorionic gonadotropin over 10000 mIU/ml, which indicates that no woman had a gestational age over 10 weeks of pregnancy. The efficacy of medical abortion was 98.64 % and only 1.36% of women had complications, incomplete medical abortion and there were no suspicions that any woman had a gestational age over 9 weeks.

Conclusions. Last menstrual period and the level of human chorionic gonadotropin are sufficient to determine the gestational age and to provide a safe medical abortion without pelvic examination and ultrasound.

Key words: last menstrual period, human chorionic gonadotropin, medical abortion

88. PREMATURE RUPTURE OF MEMBRANES IN PRETERM BIRTH: RISK FACTORS AND PERINATAL OUTCOMES