

balance) and they have had done blood morphology parameters. Moreover, women included in the study had no urinal tract infection (no bacteriuria present, leucocyturia within normal limits). Laboratory tests revealed hypoproteinemia $58,0 \pm 5,0$ g/l and hypoalbuminemia $443,4 \pm 58,0$ μ mol/l. All women included in the study have had measured their serum concentrations of: total lipids (TL), total LDL fraction (TLDL), total cholesterol (TCh), free cholesterol (fCh), phospholipids (PhL), triglycerides (TG), HDL-cholesterol (HDL-cholesterol) and LDL-cholesterol (LDL-Ch), total estrogens (TE) and human placental lactogen (HPL). Moreover, fCh/TCh ratio, TCh/PhL and LDL/HDL-Ch ratios were calculated. Their Pearson's correlation coefficient between proteinuria and above stated parameters was evaluated.

Results: The positive correlation was observed between proteinuria and: TL ($r=0,43$, $p<0,003$), TLDL ($r=0,47$, $p<0,001$), TCh ($r=0,37$, $p<0,01$), fCh ($r=0,68$, $p<0,001$), PhL ($r=0,45$, $p<0,001$), TG ($r=0,50$, $p<0,001$), HDL-Ch ($r=0,34$, $p<0,002$), fCh/TCh ratio ($r=0,42$, $p<0,004$). Moreover, the negative correlation was detected between proteinuria and: TE ($r=0,31$, $p<0,05$) and HPL ($r=0,34$, $p<0,04$)

Conclusion: In women with asymptomatic (isolated) proteinuria, the observed increase in lipid parameters levels and decrease in TE and HPL serum concentrations with the degree of proteinuria.

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PERINATAL OUTCOME IN WOMEN WITH ASYMPTOMATIC (ISOLATED) PROTEINURIA IN LATE PREGNANCY

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Objective: The aim of the study was to evaluate the influence of the asymptomatic (isolated) proteinuria in late pregnancy for the perinatal outcome.

Methods: The study covered 45 women with asymptomatic proteinuria in late pregnancy (the study group) and 136 healthy women (the control group). Proteinuria was $2,02 \pm 1,95$ vs $0,2 \pm 0,3$ g/24hours. Moreover, the women in both groups were at the same mean age: $27,6 \pm 6,17$ vs $28,1 \pm 6,54$ years (NS). The women in both group were at the same gestational age: $37,6 \pm 2,62$ vs $37,1 \pm 2,15$ (NS). Body mass index (BMI) before pregnancy was $23,8 \pm 2,79$ vs $22,5 \pm 2,60$ ($p<0,05$). BMI before labor was $29,9 \pm 3,8$ vs $27,7 \pm 2,8$ ($p<0,01$). On average, BMI increased $24,5 \pm 9,7\%$ vs $24,1 \pm 7,0$ (NS). Mean arterial blood pressure was $123,0 \pm 15,4/76,1 \pm 12,0$ mmHg vs $115 \pm 6,0/68,0 \pm 7,0$ mmHg ($p<0,01$ and $p<0,01$). Three women in the study group presented lower extremities edema (6,67%). All women included in the study have had measured renal function biochemical parameters (uric acid, urea, osmolality, creatinine, electrolytes, acid base balance) and they have had done blood morphology parameters. Moreover, all women included in the study had no urinal tract infection (no bacteriuria present, leucocyturia within normal limits). Laboratory tests revealed hypoproteinemia $58,0 \pm 5,0$ vs $67,0 \pm 6,0$ g/l ($p<0,001$) and hypoalbuminemia $443,4 \pm 58,0$ vs $522,0 \pm 87,0$ μ mol/l ($p<0,001$). We compare in both groups percentage of primigravidas, weight and length of the newborn, ponderal index, Apgar score measured in 1 minute, percentage of caesarean sections.

Results: There was 61,1 % primigravidas in the study group vs 48,5% in control group (NS). The mean weight of the newborn was $3596,8 \pm 664,7$ vs $3356,8 \pm 597,8$ g (NS). The mean length of the newborn was $54,1 \pm 3,09$ vs $53,3 \pm 3,31$ cm (NS). The ponderal index was $22,57 \pm 2,07$ vs $22,21 \pm 2,78$ (NS). The 1- minute Apgar score was $9,8 \pm 0,77$ vs $9,7 \pm 1,1$ (NS). 22,2% patients in the study group had caesarean sections compared with 23,5% of patients in the control group (NS).

Conclusion: We conducted that asymptomatic (isolated) proteinuria in late pregnancy does not effect perinatal outcome.