

FCP114**PREVALENCE OF CYTOMEGALOVIRUS, HERPES SIMPLEX VIRUS-2, HUMAN PAPILLOMAVIRUS 16-18 IN THE CERVICAL SMEAR OF PREGNANT WOMEN IN TURKEY- PRELIMINARY STUDY**

***Biri A., **Bozdayı G., **Kalkancı A., *İkinci Z., **Dinç B., **Rota S.,** *Gazi University Faculty of Medicine Department of *Gynecology and Obstetrics, **Microbiology and Clinic Microbiology, Ankara – Turkey*

Human cytomegalovirus (CMV) is the leading cause of prenatal viral infection. Affected infants may suffer intrauterine growth retardation and serious neurological impairment. Herpes simplex virus (HSV) is frequently shed after infection of the genital or perianal area. HSV often produces asimilar clinical picture. Uterine cervix carcinoma is the second most common female type of cancer and also the second highest mortality cause for women. The aim of this study is to detect the CMV DNA, HSV-2 DNA and HPV DNA 16-18 from the cervical smear of the pregnant women by PCR.

Cervical swab samples in PBS were used for the DNA extraction by phenol chloroform isoamyl alcohol. CMV, HSV-2 and HPV 16-18 detection were carried out by PCR using specific primers. The PCR products were run on agarose gel and the bands corresponding to expected length were accepted as positive.

Three (3/71; 4%) and 2 (2/71; 4%) of the samples of the pregnant women were found to be positive for HPV and HSV-2, respectively. Dual infection with HPV and HSV positivity was found in one patient. HPV18 were detected in all positive samples. CMV was found to be negative in all samples.

In conclusion, HPV and HSV should be screened due to high prevalence of these viruses in pregnant by using sensitive molecular methods. Medical treatment and labor should be planned with care.

FCP115**A COMPARISON BETWEEN TRAMADOL AND PETHIDINE IN LABOUR PAIN**

Keskin H.L., Tabuk M., Keskin E., Çağlar G.S., Avşar F, *Zekai Tabir Burak Women's Health Education and Research Hospital, Ankara - Turkey*

Aim: To evaluate the analgesic efficacy and adverse effects of tramadol and pethidine in pregnant women in labour.

Material-Method: Fifty-nine women reaching term were included in this study and evaluated into two groups, retrospectively. Group 1 received 100 mg pethidine intramuscularly, group 2 100 mg tramadol intramuscularly. Analgesic efficacy, maternal side effects namely; nausea and vomiting, fatigue and drowsiness, changes in the blood pressure and heart rate were assessed at 10, 30, 60, 120, 180, 240 minutes after administration of the study drugs. Progress of labour and fetal well-being at 1.,5. minutes with APGAR scores were evaluated.

Results: Pain relief effect was superior at 30 and 60.minutes in the pethidine group than tramadol. The frequencies of nausea and fatigue were higher in the tramadol group. Systolic and diastolic blood pressure decreased and heart rate increased after injection in both groups, but only the change in diastolic blood pressure showed a significant difference in pethidine group. There was no evidence of a difference between treatment groups in terms of vomiting and drowsiness, changes in diastolic blood pressure and heart rate, duration of labour, APGAR scores of neonates. There was no respiratory depression in the neonates.

Conclusion: These findings indicate that pethidine can be preferred to tramadol for obstetrical analgesia because of its superiority in analgesic efficacy with its low incidence of maternal adverse effects.