Pathology of Pregnancy
Eutopic pregnancy
Graviditas tubaria
Graviditas extrauterina - cervicalis
Abortion

- stillborn less than 1000g, 28 weeks
- fetus less than 500g living less than 24 hours
- missed – death and resorption of the fetus
- residua
Preterm Delivery – partus prematurus

- less than 36 weeks
- does not fulfill the abortion criteria

- underdeveloped immature tissues – lung – surfactant & oxygen therapy
- complication: impaired sight, lung atelectasis and infection, bowel perforation, periventricular bleeding…
Placenta – shape & insertion disturbances

- shape: biloba, triloba, succenturiata, circumvalata, membranacea...
- umbilical cord- insertion: marginalis, velata-amnialis; real and false node
- insertion: praevia, accreta, increta, percreta
- abruptio placentae praecox – retroplacentar haematomas – DIC - shock
Placenta – pathology

- inflammation: chorioamnionitis, funisitis, villitis: etiology: tbc, listeriosis, lues, virosis, toxoplasmosis,
- pseudotumors and precanceroses
  - hydatidiform mole partial and complete
- tumours: choriocarcinoma (gestational)
Mola hydatidosa
Hydatidiform Mole

- **partial:**
  - triploid – two sperms fertilisation, karyotype 69XXY,
  - several weeks fetus survival
  - partial villar hydrops
  - minimal malignant transf. risk

- **complete** (androgenic)
  - expulsion of ovarian genome
  - two sperms fertilisation karyotype 46XX, 46XY
  - risk of malignant transformation cca 2%
  - 1/3 of choriocarcinomas originate in the mole
Preeclampsia - Eclampsia

- third trimester:
  - hypertension
  - proteinuria
  - edema
  - convulsions – eclampsia
  - DIC – shock
  - if not fatal, spontaneous recovery

preeclampsia