

## CAUSES, SYMPTOMS, DIAGNOSIS, TREATMENT OF INFANTILISM

**Kurbaniyazova Venera Enverovna**

Assistant of Obstetrics and Gynecology Department No.1, Samarkand State Medical University

<https://doi.org/10.5281/zenodo.7880615>

**Abstract.** *A safe pregnancy is evaluated by several parameters: the amount of amniotic fluid, the size of the fetus, its location (lay), the number of fetuses, etc. Disturbances in the formation of the reproductive system occur either during the prenatal period or during puberty. If a woman was exposed to infectious diseases during pregnancy, faced with hormonal imbalance, vitamin deficiency or other negative factors, her fetus may develop developmental anomalies, including anomalies of the reproductive system. This article give information about infantilism, one of the causes that prevent healthy pregnancy.*

**Keywords:** *causes of small uterus, how to get pregnant with a small uterus, what to do if diagnosed with a small uterus, small uterus during pregnancy, positive pregnancy outcome.*

A woman finds out about the smallness of the uterus after a gynecological examination or UT examination. Some women get acquainted with this diagnosis for the first time only during pregnancy. In some cases, the size of the uterus is slightly smaller than the norm, but in a number of cases this can be a specific conclusion: hypoplasia, aplasia, infantilism. The doctor may make the patient afraid that she is unlikely to get pregnant and bear a child. At the same time, many women with this pathology successfully give birth to a child. Adequate hormonal therapy plays an important role in this case. Such a conclusion can indicate both a subjective assessment and a pathology that leads to the inability to have children.

### CAUSES OF SMALL UTERUS

- The standard size of this member in gynecology:
- length 7-8 cm
- 4-5 cm wide
- the thickness of the myometrium is 2-3 cm
- the length of the cervix is 2.5 cm.
- These are average indicators accepted by doctors as standard. However, this organ, which is functioning normally in women, can be of a different size.

The uterus can be small, medium and large, but pathologies in its structure and function may not be observed. Small sizes are usually found in slim and thin women. It depends on the structure, composition and physiology of the body.

How can you get pregnant if this organ can't perform its main function - bearing children?

If complex examinations reveal the presence of a serious disorder that prevents pregnancy, the following diagnosis is made:

Hypoplasia is underdevelopment of organ sizes. This condition is accompanied by the underdevelopment of other sexual organs, hormonal imbalance;

Aplasia - the uterus of a mature woman is like that of a newborn girl (no more than 3 cm);

Infantilism - the size of the member does not exceed 5.5 cm.

In addition to a pathologically small penis, other signs of disorder are usually detected: irregular menstrual periods or the absence of menstruation at all, even if they are very painful, weak libido, pregnancy or childbirth difficulties with bringing.

Disturbances in the formation of the reproductive system occur either during the prenatal period or during puberty. If a woman was exposed to infectious diseases during pregnancy, faced with hormonal imbalance, vitamin deficiency or other negative factors, her fetus may develop developmental anomalies, including anomalies of the reproductive system.

In adolescents, pathology can be caused by various diseases (infectious-viral, urogenital system), poor or poor nutrition, vitamin deficiency, physical weakness, hard work or stress.

If the smallness of the uterus is not a physiological feature of the body, this condition is accompanied by other disorders, which together make it impossible to have children. If at the same time there is a hormonal imbalance, pathology of the tubes or the structure of the cervix, getting pregnant becomes a problem.

#### **HOW IS IT POSSIBLE TO BECOME PREGNANT IF THE UTERUS IS SMALL?**

If, along with pathology, other diseases of the reproductive system are detected, it is necessary to prepare for pregnancy planning in a special way. Often, such preparation does not include radical measures.

Gynecological massage and a number of physiotherapy methods can be prescribed to improve blood circulation and support the growth of the uterine epithelium. But hormonal therapy is used most often.

It is worth noting that these measures are very effective, and most women can get pregnant in the first and next period after canceling oral contraceptives.

Combined with other treatments, hormone therapy can help increase the size of the reproductive organ. But, for example, it is permissible to conduct extensive examinations in hypoplasia, because this disease is often accompanied by other pathologies, which, in turn, is considered a contraindication to the use of hormonal agents.

Fertilization can be successful even after vitamin therapy. For this, it is necessary to take a complex of vitamins and minerals, balance the diet, and change the daily routine.

#### **WHAT TO DO IF YOU ARE DIAGNOSED WITH A SMALL UTERUS**

As mentioned above, hormones affect the development of this organ. In addition, being in a regular sexual life can also stimulate its growth. The main cause of hypoplasia is a violation of the hormonal balance, so the treatment is related to the correction of the hormonal background. Treatment of small uterus with this method usually takes a long time.

Various physiotherapeutic procedures are aimed at improving blood circulation in the small pelvic organs.

When it comes to folk methods, the most popular home treatment is clay compresses. Clay can be purchased at a pharmacy. It is mixed with water until a thick, creamy mass is formed and applied to the lower part of the abdomen. Cellophane is placed on top.

Such compresses are kept for about 2 hours, then washed off in running water. Treatment should be done every day, using new clay each time. Traditional methods of treatment should be an addition to the main treatment recommended by the doctor.

#### **IF THE UTERUS IS SMALL DURING PREGNANCY**

After the diagnosis, it is necessary to conduct an ultrasound examination to confirm it. It is important to note that a small uterus and pregnancy are not usually incompatible. In addition, many women learn about this condition only during pregnancy.

Usually, as the term increases, the uterus increases along with the fetus. This process is facilitated by hormones actively produced in the female body. At the same time, it is possible to take special hormonal drugs in addition.

The main causes of difficulties during pregnancy are hormone deficiency, thin myometrium, short cervix and other diseases of the reproductive system. As a result of this, there is a miscarriage, premature birth, a weak birth process, and difficult opening of the neck. Modern medical methods help to significantly reduce negative risks.

After childbirth, the organ returns to its previous size, and the pathology may disappear without a trace. In addition, there are other disorders in the development of reproductive organs, for example, the loss of curvature of the tubes.

The real difficulties arise when the uterus is very small and underdeveloped. It is almost impossible to achieve a healthy pregnancy with aplasia. But even in such cases, reproductive technologies are able to help a woman become a mother.

#### POSITIVE TERM OF PREGNANCY

A safe pregnancy is evaluated by several parameters: the amount of amniotic fluid, the size of the fetus, its location (lay), the number of fetuses, etc. The height of the uterine fundus (it is this parameter that is taken into account during pregnancy) can vary significantly in each individual case, for example, in women with a large pelvis, this indicator is less than the norm, and in women with a narrow pelvis, it is more. ladi

If you are diagnosed with a small uterus during pregnancy, you should not panic. UT examination is conducted to determine its characteristics. If necessary, cardiotocography and dopplerometry are prescribed.

#### REFERENCES

1. Курбаниязова, В. Э., Н. А. Ахтамова, and Ш. М. Хамидова. "Интенсивное восстановление женщин репродуктивного возраста перенесших операцию Кесарево сечение." *Проблемы биологии и медицины* 4 (2019): 53-55.
2. Курбаниязова Венера Энверовна Ранняя реабилитация женщин, перенесших кесарево сечение, и оптимизация ведения последующих родов // *Достижения науки и образования*. 2020. №2 (56). URL: <https://cyberleninka.ru/article/n/rannnyaya-reabilitatsiya-zhenschin-perenessih-kesarevo-sechenie-i-optimizatsiya-vedeniya-posleduyuschih-rodov> (дата обращения: 24.04.2023).
3. Тилявова, С., et al. "Акушерские аспекты нарушений мочеиспускания у женщин." *Журнал проблемы биологии и медицины* 4, 1 (85) (2015): 173-175.
4. Курбаниязова, В. Э., and Д. Д. Камалова. "Эффективная контрацепция после кесарева сечения." *Неделя науки* 2015. 2015.
5. Закирова, Н., et al. "Акушерские и перинатальные исходы беременности при артериальной гипотензии." *Журнал проблемы биологии и медицины* 1 (93) (2017): 195-197.

6. Kurbaniyazova, V. E., and K. D. Rakhimovna. "Prospects for the rehabilitation of women under cesarian section." *European Journal of Molecular and Clinical Medicine* 7.3 (2020): 4385-4398.
7. Курбаниязова Венера Энверовна, Худоярова Дилдора Рахимовна РЕАЛИИ ВРЕМЕНИ. РЕАБИЛИТАЦИЯ ЖЕНЩИН С РУБЦОМ НА МАТКЕ // Вестник науки и образования. 2020. №23-1 (101). URL: <https://cyberleninka.ru/article/n/realii-vremeni-reabilitatsiya-zhenschin-s-rubtsom-na-matke> (дата обращения: 24.04.2023).
8. Курбаниязова, В. Э., Н. А. Ахтамова, and Ш. М. Хамидова. "Интенсивное восстановление женщин репродуктивного возраста перенесших операцию Кесарево сечение." *Проблемы биологии и медицины* 4 (2019): 53-55.
9. Курбаниязова Венера Энверовна Ранняя реабилитация женщин, перенесших кесарево сечение, и оптимизация ведения последующих родов // Достижения науки и образования. 2020. №2 (56). URL: <https://cyberleninka.ru/article/n/rannaya-reabilitatsiya-zhenschin-perenessih-kesarevo-sechenie-i-optimizatsiya-vedeniya-posleduyuschih-rodov> (дата обращения: 24.04.2023).
10. Тилявова, С., et al. "Акушерские аспекты нарушений мочеиспускания у женщин." *Журнал проблемы биологии и медицины* 4, 1 (85) (2015): 173-175.
11. Курбаниязова, В. Э., and Д. Д. Камалова. "Эффективная контрацепция после кесарева сечения." *Неделя науки* 2015. 2015.
12. Kurbaniyazova, V. E., and K. D. Rakhimovna. "Prospects for the rehabilitation of women under cesarian section." *European Journal of Molecular and Clinical Medicine* 7.3 (2020): 4385-4398.
13. Курбаниязова Венера Энверовна, Худоярова Дилдора Рахимовна РЕАЛИИ ВРЕМЕНИ. РЕАБИЛИТАЦИЯ ЖЕНЩИН С РУБЦОМ НА МАТКЕ // Вестник науки и образования. 2020. №23-1 (101). URL: <https://cyberleninka.ru/article/n/realii-vremeni-reabilitatsiya-zhenschin-s-rubtsom-na-matke> (дата обращения: 24.04.2023).
14. V. Kurbaniyazova CESAREAN SECTION: INSTRUCTIONS, DISADVANTAGES AND ADVANTAGES, COMPLICATIONS, RECOMMENDATIONS // SAI. 2023. №D2. URL: <https://cyberleninka.ru/article/n/cesarean-section-instructions-disadvantages-and-advantages-complications-recommendations> (дата обращения: 24.04.2023).
15. Enverovna, Kurbaniyazova Venera. "Histological analysis of the state of the scar after operational delivery." *Asian Journal of Multidimensional Research* 11.10 (2022): 149-155.
16. Курбаниязова, Венера Энверовна. "CLINICAL, ECHOGRAPHIC, MORPHOLOGICAL AND IMMUNOLOGICAL CRITERIA FOR EVALUATING A WELL-FOUNDED SCAR ON THE UTERUS AFTER CESAREAN SECTION." *УЗБЕКСКИЙ МЕДИЦИНСКИЙ ЖУРНАЛ SPECIAL* 1 (2021).
17. Курбаниязова, Венера Энверовна. "CLINICAL, ECHOGRAPHIC, MORPHOLOGICAL AND IMMUNOLOGICAL CRITERIA FOR EVALUATING A WELL-FOUNDED SCAR ON THE UTERUS AFTER CESAREAN SECTION." *УЗБЕКСКИЙ МЕДИЦИНСКИЙ ЖУРНАЛ SPECIAL* 1 (2021).
18. Матлубов, М., et al. "Интегральная система многофакторного прогнозирования риска осложнений во время родоразрешения и анестезии у пациенток с ожирением." *Журнал проблемы биологии и медицины* 3 (89) (2016): 49-53.