Cardiac complications were observed among both patients who have already been diagnosed with cardiovascular disease, and persons without a burdensome medical history, previously healthy people. There are reports of myocardial damage, even a few weeks after infection, of considerable concern: for example, magnetic resonance imaging performed 2-3 months after the disease revealed myocardial inflammation in 60% of patients and 76% of patients with elevated levels. troponins as a result of myocardial damage.

Severe complications after COVID-19 include de novo thromboembolic events, pulmonary fibrosis, heart failure, chronic kidney disease, and stroke, as well as worsening of the aforementioned diseases. SARS-CoV-2 infection significantly increases the risk of thromboembolic complications, development of chronic inflammatory processes, etc.

Thus, the treatment of patients infected with SARS-CoV-2 is a significant challenge for health systems around the world. Patients with circulatory diseases have a more severe course of COVID-19 and higher mortality, and data on the frequency and types of long-term cardiovascular complications after COVID-19, clinical consequences and long-term risks, clear algorithms for the treatment of postpartum lesions, unfortunately, is still missing.

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RISK FACTORS AND MEASURES FOR THE PREVENTION OF GESTATIONAL DIABETES

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Gestational diabetes is one of the most common complications of pregnancy, the frequency of which is 6–25% of cases among pregnant women (depending on diagnostic criteria) and is associated with an increased risk of stillbirth and neonatal death, as well as many other complications from the mother and fetus. In most cases, the disease is latent and is detected only by blood sugar testing. Women diagnosed with gestational diabetes mellitus (GDM) during pregnancy and childbirth are in danger of developing high blood pressure. They have an increased risk of developing type 2 diabetes later in life.

Risk factors for gestational diabetes include overweight and obesity, overweight in the third trimester of pregnancy, hypodynamics, burdened heredity for type 2 diabetes, stress, smoking. Important factors in increasing the risk of GD are polycystic ovaries, hypertension, glucocorticosteroids.

The aim of our study was to develop measures aimed at preventing the development of gestational diabetes by studying the risk factors for gestational diabetes and identifying women who are at risk at different stages of pregnancy. The study solved the following tasks: analyzed the risk factors for GDM as well as the dynamics of blood sugar in different trimesters of pregnancy and developed recommendations for the prevention of gestational diabetes. The following materials and methods were used in the study: research materials were 100 individual cards of pregnant women (f.111 / o) aged from 19 to 45 years who were registered in the women's clinic in different trimesters of pregnancy. The following methods were used: epidemiological - to study the sources of statistical information; sociological - to determine the most common risk factors for gestational diabetes; medical and statistical - for the collection, processing and analysis of information obtained during the study.

According to the results of this study, the following was obtained: it was found that out of 100 risk factors for the development of gestational diabetes mellitus were observed in 20% of the subjects - overweight or obesity, a woman's age over 40 years, diabetes mellitus in close relatives, a large fetus in a previous pregnancy. All women who were at risk, overweight or obese were more likely to develop gestational diabetes mellitus during their pregnancy. Out of the 20 women at risk, 34% of women developed gestational diabetes mellitus, and 66% of them were diagnosed with the disease in the second trimester of pregnancy.

In the late stages of pregnancy there was an increased amount of women with hyperglycemia, which required preventive measures in all trimesters of pregnancy. In most cases,

dietary therapy and dispensary observation were recommended as preventive measures, and very little attention was paid to physical activity. Despite the preventive measures taken by pregnant women, who were classified as at risk, the development of gestational diabetes mellitus was observed, which may be explained by non-compliance with the recommendations or lack of prescribed preventive measures.

Thus, our observations have shown that the presence of any one, two or all the risk factors for GD is found in the vast majority of pregnant women with GD. The combination of two or all of these factors significantly increases the risk of developing the disease. The risk of developing gestational diabetes can be reduced through diet, exercise and lifestyle modifications.

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HISTORY OF DISCOVERING OF «MEDICAL» PAPYRUSES

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The most reliable sources from the history of medicine of Ancient Egypt were papyrus scrolls. Papyruses were written in Armenian, Syrian, Coptic and Arabic languages. Sometimes a late hieratic script (system of writing by black inks with red marks) was used. First texts on papyrus scrolls began to be studied in 1822 by French scientist G.F. Champollion. The most interesting among them is The Ebbers Papyrus composed between 3730 and 3710 BC, «surgical» «The Smith Papyrus» dated back to the beginning of 3000 DC, medical texts educed during excavations of city Al-Kahun, which had got the title «The Kahun Medical Papyrus or Gynaecological Papyrus», conditionally divided into medical and veterinary papyruses. Fragments of «Hearst Papyrus» and «The Beatty Medical Papyrus» were devoted to the separate diseases and the methodology of their treatment.

The majority of the information about internal illnesses and methods of treatment is contained in «The Ebbers Papyrus», found out in 1874 in Luxor and named after the German scientist-egyptologist Georg Ebbers. «Book of preparation of medications for all parts of body» was published for the first time and got the full title in 1875. This historical source contains the information about 900 scrolls related to the treatment of organs of digestive system, ear, throat and nose, burns and bleeding, eye illnesses, skin, parasitic diseases.

«The Smith Papyrus» is the oldest Egyptian text about structure of human body and surgery, which was composed approximatively in XVI century BC. Edwin Smith was an American merchant and collector of the Egyptian artefacts, manuscripts, he bought this papyrus in 1862 in Luxor. However, he was not able to carry out complete translation of papyrus and Smith did not succeed due to the shortage of knowledge of late hieratic script. After Edwin Smith's death his daughter passed a papyrus to New York historical society in 1906.

The American Egyptologist, head of the first in the USA department of Egyptology and Eastern History, James Henry Breasted translated the contents of papyrus, published this text, its transliteration and translation in English. More than 48 cases of traumatic damages of bones, brain, backbone, collar bones, forearm, thorax and rachis, methods of examination of patient, diagnoses and self-treatment are described in this papyrus.

Not less important are «gynaecological» and «veterinary» papyruses that comprise the only source «The Kahun Medical Papyrus» that was discovered by William Mathew Petrie during excavations of settlement of Medinet-Kahun. Thus, this papyrus is considered to be the oldest medical papyrus of Egyptian civilization. In 1898 The Kahun Papyrus was translated by F.L. Griffit and published for the first time. The source is dated 2000 BC. In this text we can find the description of 17 diseases, methods of their diagnosting, symptomatology of pregnancy, methods of determination of sex of baby. Part of papyrus contains texts from veterinary science. Beatty Medical Papyrus dated 1200 BC was named after the famous American collector and papyrolog Alfred Chester Beatty and sanctified to use of invocations against a headache and anorectal illnesses. Hearst Papyrus is dated back to the period of rule of pharaoh Thutmose III (XV century BC) and named after Randolph Hearst – American publisher and newspaper publisher who provided funds