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A new exclusive innovation model of obstetrical pessary by Doctor Schneiderman for prevention and treatment of cervical insufficiency and habitual abortion

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The study of a variety of pessaries is available in the market, but they reveal a number of faults in their construction and possible complications from their use. Cervical insufficiency is one of the most common causes of preterm labor. The new exclusive innovation model of obstetrical pessary designed by the authors is made of high quality silicone of determined flexibility and density, providing the optimal application of the pessary. The outstanding feature of the ring is, availability of four symmetrical semi-circular slots on the external surface of the ring, four bulges on the internal surface of the ring and exclusive four vertical silicon "lobes" at the lower surface of pessaries, not allowing shifting or turning to a wrong position. Absolutely new and significant advantage of the new model is its antimicrobial coating (miramistin, chlorhexidine, silver) preventing development of bacterial vaginosis which may impede the use of the pessary. Application of this pessary is simple and painless. Research of the new model of obstetrical pessary was conducted on a group of pregnant women (420 patients) with cervical insufficiency or history of habitual abortion and with pregnancy of 14 to 37 weeks of gestation. All pregnancies were saved. The advantages of the new model of the obstetrical pessary are as follows: 1. Adjunctive fixation of the pessary in the vagina due to the external slots (so the pessary would not move or drop out). 2. High comfort and ease of usage of the pessary during its insertion into the vagina. 3. Reduced risk of lacerations and ulcers of the vaginal mucosa due to minimal pessary contact with the

vaginal wall. 4. Increase in outflow of the vaginal discharge. 5. Prevention of infections like vaginitis due to antimicrobial coating of the pessary. 6. Allergy-free. 7. Easy and painless removal of the pessary. 8. Presence of four bulges on the internal surface of the ring preventing cervical dilatation in case of cervical insufficiency during pregnancy. 9. Elimination of symptoms of stress urinary incontinence. 10. Presence of four vertical silicon "lobes" at the lower surface of pessaries, which are not allowing it to shift or turn to a wrong position. Application of the new exclusive innovation model of obstetrical pessary by Doctor Schneiderman considerably increases the chances of successful development of pregnancy in women with cervical insufficiency and habitual abortion. The optimal timing for use of obstetrical pessary is from the 17th week of pregnancy to the 37th week of pregnancy with the subsequent removal of the pessary.

Speaker Biography

Schneiderman M is working as a Professor of Medicine. He received his Bachelor's degree from the Medical University of Orenburg in 1965. After obtaining PhD degree from the Medical University of Moscow in 1967, he worked as an Assistant Professor in Medical University of Moscow, and from 1972 he worked as Gynecological Surgeon at Moscow Gynecological Hospital No.5. In 1979 he became the Director of the Gynecological Clinic at Old Arbat Street in Moscow. Between 1997-1982, he also consulted as an Assistant Professor in the clinic of Dr. Rokhlin in San Francisco (USA). In 2013, he joined Academician V I Kulakov Research Center of Obstetrics, Gynecology and Perinatology Ministry of Healthcare of Russia (Moscow) as a Professor. He has received various awards in the field of infertility treatment, new methods of surgical treatment of gynecological diseases, in obstetrics.

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