

ARCHITECTURAL AND PLANNING FEATURES OF FORMATION OF MODERN MULTI-FUNCTIONAL COMPLEXES OF REPRODUCTIVE AND PERINATAL MEDICINE

Relevance: At present, mother and child health care is one of the most important issues that require careful consideration and quality resolution by state health services. Maternity home as the main institution providing medical and social support to women during pregnancy and childbirth, as well as first aid to the newborn, does not adequately meet modern requirements. In particular, new conceptual approaches for the organization of spatial provision of relevant processes at the world level are needed.

The purpose of the paper: coverage of architectural and planning features of the formation of multifunctional complexes of reproductive and perinatal medicine as a new medical and social object.

Main part: The rapid development of society leads to a huge number of man-caused and social problems. In view of the reproductive process, this leads in particular to infertility or the birth of children with mental and physical disabilities. There is a need to create a new type of integrated treatment and prophylactic institution. Right now, on the basis of regional, district or city maternity homes, there are perinatal centers, in which the struggle for the life and health of parents and children is carried out at all stages: from the problems of preservation and restoration of the reproductive function of women and men to the emergence and treatment of newborns. That is why a new, rather difficult task for architects has appeared.

According to the new concept of formation and development of reproductive and perinatal medicine complexes, the following functional units should be included: entrance group (lobby), obstetric unit, postpartum department, resuscitation and intensive care unit, neonatal unit, gynecological department, reproductive department, ambulatory-polyclinic unit, a unit of auxiliary units and business services. At the same time, the analysis of existing projects of such objects indicates certain medical and social and functional-planning disadvantages. For example, it is a traditional separation of newborns that are regularly transferred to the chamber with feeding mothers and in the opposite direction, that is, in the children's wards.

One can distinguish the following important statements that determine the rational organization of obstetric care institutions:

- Childbirth is a natural process, so sharing a room for mothers and children is more effective than separate;
- Women's counseling has the most favorable results of work on preventive care for pregnant women when placed on the basis of perinatal centers and maternity hospitals;
- specialized obstetrical care is being developed, especially in large cities, which provides for the involvement of doctors from different medical professions in the organization of in-patient obstetric care, and, consequently, the development of multi-functional perinatal centers;
- Since the spread of viral-bacterial infections occurs by air droplets, and the source of infections is a person, the urgent task is the spatial separation of the department of medical institutions, where the births and preparation for them occur.

The buildings of perinatal centers are an integral part of the urban environment and should become a vivid element of the composition of residential areas or medical centers through original architectural and planning decisions.

Conclusions: Complexes of reproductive and perinatal medicine should become the new object of architectural typology, which requires appropriate scientific research and project proposals.

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