

THE PHILOSOPHY OF THE ORGANISATION GESTOSIS - OG SOCIETY FOR THE STUDY OF PATHOPHYSIOLOGY OF PREGNANCY

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The Organisation Gestosis was founded in 1969. Prior to this event many years of studies revealed the problems of the pregnancy complication we are discussing now.

There was a maiming variety of names, more than 100 in the Anglo-American literature alone and each name had its own reason. Definitions varied from one obstetrical center to the next, no uniformity, no general agreement. The classifications similarly seemed to be a playground for every director of his own maternity center.

Thus the interest had dwindled down to very few papers in the obstetrical literature. No comparison between epidemiological facts, statistics and results were possible. And therapeutic suggestions often were based on three cases or on a comparison between the treatment of two versus three patients with two different drugs. It was a desolate State of Art for the most frequent complication of pregnancy, killer no. one for mothers and 100 times more so for their babies,

To instill some kind of order in this chaos was the idea of the founding of the Organisation Gestosis

In 1969, during the Congress on “Spätgestosis” as this syndrome then was called in Central Europe the founding took place. The ideas formulated then still hold true,

A loose association of persons interested in pregnancy and its complications should work on the following subjects:

- 1 Internationalize nomenclature, classification and definitions.
 - a) as basis for diagnosis and therapy
 - b) to be able to compare results of investigations
2. Standardizing methods of investigation so that only the TYPE of EPH-Gestosis varies
3. Center of Documentation providing
 - a) literature on EPH – Gestosis and related special fields
 - b) pertinent subjects to be worked on and coordination of research programs
4. Concentrating special methods of research on different centers, according to interest, research teams, possibilities and material.
5. Exchange of scientists between centers, obstetrical services, laboratories as well as special clinics.

6. Organising regular meetings and congresses dedicated to EPH – Gestosis to present results of clinical and experimental research, of therapy and of long term follow up.
7. Recommendations, for the newest and most successful measures for Prophylaxis and treatment,
8. Recommendations, publications. Orientation and information, post graduate training and contact to the lay press, and mass media.
9. To publish congress proceedings, monographs and major papers on EPH – Gestosis and related topics as realized through the Organisation Gestosis Press, OGP

We have planned to spread the knowledge about EPH – Gestosis as wide and far as possible. So we are accepting anybody as of the OG We do not require him/her to use our parameters as presented in numerous international and national congresses, as published in our bulletins, instruction booklets and books. Though we would support it.. We are hoping that the logic of it would convince everybody. And so we are counting now close to 4500 members.

It was always important to us to define our parameters so. that they could be applied easily by anybody caring for pregnant women. We found out that pathological Edema had to be considered as the most important symptom.

1. it is the first manifestation of a gestosis, i.e. a deviation from a normal pregnancy course.
2. it is the only symptom recognized by the patient herself. Later symptoms concern the clinical condition of imminent Eclampsia.
3. it can be proven with very simple means, also by the patient herself (one spot, one finger, one minute).
4. since EPH – Gestosis is a condition of the neglected woman the health of her and her baby depends on this symptom.
5. We have proven that a monosymptomatic E – Gestosis leads to a small-for-date baby, an indication for the damaging effect of pathological water retention.

The Signs of Proteinuria and Hypertension are not being felt by the sick patient. A rise also of systolic blood pressure is always a spectacular event when discovered and indicates an unstable cardiovascular system. If only for this effect it is important to keep this sign in mind.

In 1976 an unfriendly take-over was attempted with the plan to cancel the nomenclature, classifications and definitions in EPH – Gestosis, accepting therewith a relaps into the previous chaotic condition as before 1969.. This action resulted in the Society for the Study of Hypertension in Pregnancy, dropping edema and systolic hypertension. It is still existing

today. The OG is cooperating with that split off Hypertension Society, which is always welcome to return to us again.

A membership fee was discussed and rejected. We decided that in EPH – Gestosis, being a pregnancy complication of the neglected woman, the doctors working with them need their money for their efforts and not for membership contributions. But that lack of funds made the engagement for the OG difficult

To cut the expenses for publications we founded the Organisation Gestosis Press, OGP. Close to 35 congress volumes, monographs, instruction booklets and a regularly published bulletin appeared. This periodical we sent out to all our members.

The main effort was always aimed at spreading the knowledge about EPH – Gestosis, investigations, technics, therapeutic approaches to as many persons as possible. We included not only obstetricians but also practitioners, family doctors, in addition midwives, nurses, traditional birth attendants, social workers and government officials on our list. We did not want to be an elitary association with highly specialized scientists limiting their work to a few delicate and complicated problems. We wanted to inform everybody.

We are still emphasizing the importance of post partum investigations. It is the only tool to detect the cause/ causes of EPH – Gestosis. In this way we will be able to treat specifically and actually prevent this syndrome altogether. We do realize though that in areas where our work is most needed such tests are extremely difficult to carry out.

Our congresses varied in size from (willingly) 50 participants to 1000 congressists. In these 36 years we have reached directly ten thousands of attendants, more so through mass media and through the bulletins and the publications of the OGP.

The OG never was and never will be a factor of power within the medical world. None of us working as a members charged with special responsibilities has more importance than his colleague. It may help him in his personal stride to climb the ladder of professional success. It never gives him though special prerogatives or advantages, not even to the secretary general who does that job since 1969.

Our work did not remain without recognition. It was integrated in textbooks world wide, induced the creating of national and international societies of EPH – Gestosis, led to establishing outpatient departments especially for EPH – Gestosis patients and to conducting congresses and expert meetings.

It is the merit of the inherent logic that the parameters of the OG got accepted worldwide. It is also due to the charisma of its dedicated members, joining us for this important fight.

We also combated the danger of becoming a club of ancient, stiff and conservative scientists. Young members have picked up the thread and give us the assurance that our work will continue.

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