

né komplikace v graviditě nutno řešit ihned. Jde zejména o preeklampsii, vyšší sklon k IMC dolního ale i horního segmentu, a obstrukci horních cest ve skupině jako celku, ke konci těhotenství pak hlavně ve skupině nemocných po rekonstrukč-

ních operacích pro exstrofii, kde je větší počet porodnických, ale i urologických indikací k císařským řezům. Pro úspěšný výsledek je žádoucí interdisciplinární spolupráce (porodník, urolog, nefrolog, neonatolog).

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