

عنوان مقاله:

Optimal Timing of Multifetal Pregnancy Reduction: The Earlier the Better or Later

محل انتشار:

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خلاصه مقاله:

Background & Objective: A number of procedures have been developed for multifetal pregnancy reduction (MPR) to reduce the overall number of fetuses in the gestation and improve the maternal outcomes as well as the outcomes of the surviving fetus. **Materials & Methods:** An observational historical cohort study was conducted on multiple pregnancies that underwent fetal reduction in Shariati Hospital and Omid Clinic between January ۲۰۱۸ and September ۲۰۲۱. The study population was divided into two groups according to gestational age at fetal reduction: ۱۱–۱۴ weeks' gestation (early reduction group) and ۱۵–۱۹ weeks' gestation (late reduction group). The main outcome measures were the rates of pregnancy complications, pregnancy loss, preterm delivery, and adverse neonatal outcomes. **Results:** The study group included ۱۰۷ patients with twin and multiple pregnancies that underwent abdominal MPR at ۱۱–۱۹ weeks'

gestation (۷۹ in the early reduction group and ۲۸ in the late group). The incidence of pregnancy complications (hypertension, diabetes, intrauterine growth disorder, preterm delivery, and pregnancy loss) was not significantly different between the two groups ($P > 0.05$). The percentage of NICU admission was higher in the early reduction group compared to the late group (۴۹% vs ۱۸.۵%, $P=0.004$). The weight of the first newborn was significantly heavier in the late versus early reduction group (2680.55 ± 777.52 vs 2264.4 ± 796.82 , $P=0.005$). Conclusion: According to the present study, fetal reduction in twin or multiple pregnancies is a safe procedure with good obstetric outcomes if done by an expert specialist, especially when it is performed in the second trimester.

کلمات کلیدی:

fetal abnormalities, Multifetal pregnancy reduction, Multiple Pregnancy, Perinatal outcome, Selective termination, Twin pregnancy

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