ULTROSONİK OLARAK SAPTANAN FETAL HAREKETLERİN DÜŞÜK TEHDİDİ ALTINDAKİ OLGULARIN İZLEMİNDEKİ YERİ

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ÖZET


Anahtar Kelimeler: Düşük tehdidi, ultrasonik inceleme, fetal hareket, gebelik kay- bi.

SUMMARY

ULTRASONICALLY DETERMINED FETAL MOVEMENTS IN THE FOLLOW-UP OF CASES WITH THREATENED ABORTION

Twentyfive pregnant women with threatened abortion whose gestational ages varied between 9 and 13 weeks were followed with ultrasonic examination. Fetal cardiac ac-

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tivity were present in all cases, but active fetal movements were detected only in 14 of
them (56.0%). Total pregnancy loss was significantly higher in the group with no deman-
strable fetal movements (p<0.01). It was concluded that ultrasonic detection of the active
fetal movements in the cases with threatened abortion showed a favorable prognosis.

Key Words: Threatened abortion, ultrasonic examination, fetal movements, preg-
nancy loss.

INTRODUCTION

Widespread use of ultrasonic examination has offered an extremely
valueable diagnostic tool for understanding many aspects of fetal life
and also enabled us to evaluate most pathologic conditions more accura-
tely. One of the important applications of ultrasound in obstetric practi-
ce is to evaluate the condition and prognosis of pregnancies complicated
with threatened abortion. Detection of fetal cardiac activity and fetal mo-
vements has been used as a diagnostic tool for this purpose (1, 2, 3). In
this study we tried to assess the reliability of these parameters.

MATERIAL AND METHODS

This study was performed on patients who applied to Obstetric and
Gynecology Department of the Trakya University Research Hospital and
Kirklareli State Hospital with the complaint of vaginal bleeding during
the first trimester of pregnancy between November 1989 and November
1990. All patients were evaluated by pelvic and ultrasonic examination
at the first visit. Presence of fetal cardiac activity and fetal movements
were especially explored. Minimum 20 minutes of scanning was perfo-
red to detect fetal movements. Only the patients showing fetal cardiac
activity were included in the study. Patients were divided into two gro-
ups according to whether they showed active fetal movements or not.
After initial examination all patients were hospitalzed and kept under
close observation until bleeding period ceased. The patients who recov-
ered from threatened abortion were discharged and followed up closely
until the end of their pregnancies. Patients who aborted eventually un-
derwent uterine cavity control by curretage in order to make sure that no
retention products left inside. The complications encountered during the
course of pregnancies that continued and their outcomes were determi-
ned and the results between the two groups were analysed by Mann-
Whitney test and p values below 0.05 was accepted as statistically signi-
ificant.
RESULTS

The mean age of the patients in the first group (without demonstrable fetal movements) was 26.6±5.3, and in the second group was 27.2±4.1. The mean gestational age was 11.5±1.4 weeks in the first group, and 11.6±1.2 weeks in the second group. The distribution of the gestational ages of the patients is shown in Table I.

<table>
<thead>
<tr>
<th>Gestational Age</th>
<th>Group 1</th>
<th>Group 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>9-10 weeks</td>
<td>1 (9.1%)</td>
<td>0</td>
</tr>
<tr>
<td>11-12 weeks</td>
<td>8 (72.7%)</td>
<td>11 (78.6%)</td>
</tr>
<tr>
<td>≥13 weeks</td>
<td>2 (18.2%)</td>
<td>3 (21.4%)</td>
</tr>
</tbody>
</table>

Group 1. The cases without fetal movements
Group 2. The cases with fetal movements

Four of the patients in Group 1 aborted later. The mean period until abortion was 7.2±4.1 days. Two of the remaining patients in this group delivered preterm at 28 and 34 weeks (28.6%). The infant born at 28 weeks of gestation was lost one day later because of respiratory distress syndrome. Total pregnancy loss in this group was 45.5%. There was no abortion in the second group. Two patients delivered preterm at 34 and 36 weeks of gestation (14.3%). But all patients in this group survived. These results are presented in Table II.

<table>
<thead>
<tr>
<th>Abortion rate</th>
<th>Group 1</th>
<th>Group 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preterm delivery</td>
<td>28.6% †</td>
<td>14.3%</td>
</tr>
<tr>
<td>Perinatal mortality</td>
<td>14.3% †</td>
<td>0</td>
</tr>
<tr>
<td>Total pregnancy loss</td>
<td>45.5% †</td>
<td>0</td>
</tr>
</tbody>
</table>

† p < 0.05, ‡ p < 0.001

Abortion rate and total pregnancy loss were significantly greater in the first group (p<0.001). Preterm delivery rate and total perinatal mortality rate were also greater in the first group (p<0.05).
COMMENT

Ultrasonographic examination of fetuses has given us valuable information about fetal life. One of the great contributions of ultrasonographic examination is about the events occurring during embryonic period which were inaccessible before ultrasound era. It has been stated that determination of fetal movements in the cases with threatened abortion shows a favorable prognosis for these cases (1, 2, 3, 4). Anderson reported a successful pregnancy outcome in 72 of 74 cases (97.3%) with threatened abortion who showed active fetal movements (2, 3). This figure is close to ours. For the same clinical indications Reinhold stated a 25% pregnancy failure rate in patients who showed no fetal movements (5). In our series this figure was found as (45.5%) and is greater than. Reinhold series. It is difficult to explain this difference, but the smallness of our series may be a reason. In addition to these data Henner et al. (6) noted a general decrease both in amplitude and velocity of fetal movements in pathologic pregnancies. The presence of fetal cardiac activity in the absence of active fetal movements is not enough for a successful pregnancy outcome. As a result our findings correlate well with other studies in literature and show the importance of fetal movements in evaluating prognosis of the cases with threatened abortion.

LITERATURE


