EDWARDS SYNDROME: ECHOGRAPHIC PICTURE; PRENATAL SCREENING IN DECREASE OF POPULATION FREQUENCY

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Introduction: *Edwards Syndrome (ES) is the second most frequent one among all chromosomal aneuploidyes (ChA) after Dawn Syndrome. The population frequency of ES averages 1/7000 newborns.*
Objective: To study US-screening efficiency in diagnosis of trisomy +18 in fetuses.
Methods: *Accordings to the program of mass US-screening for the period of 12 years (1987-1998) 109453 US examinations in the II trimester, 3329 amniocenteses were carried out, 180 due to ultrasound markers (UM) of ChA.*
Results: *In total 11 ES fetuses with UM were diagnosed. After prenatal karyotyping of fetuses selected accordings to UM of chromosomal pathology only (mothers age less then 35), ChA were identified in 22 fetuses, 9 of them were confirmed to have trisomy +18. Among all UM identified with ES fetuses the following were the most frequent: omphalocele - 4, VSD - 3, flexor deformation of fingers - 3 and toes - 3; less frequent: chorioid plexus cysts - 2, ventriculomegaly - 2; other abnormalities - solitary detections; IUFR occurred in 6 cases, polyhydramnion-9. Diagnostic value of UM is proposed to be estimated in scores.*
Discussion: *All identified ES cases in newborns and stillbirthes and prenatally diagnosticated and eliminated abnormal fetuses having been analyzed during 1987-1998. ES prevalence in Krivoy Rog was studied on this base. 109027 pregnancies outcomes were analyzed: 7 of them found to have ES (3-refused US-screening) and 7 prenatally revealed ES fetuses were eliminated and identified.*
Finally registered population frequency (FRPF) of ES in newborns accounted 1/15575 (0,64:10000). Real prevalence (RP) of ES was 1/5990 (1,67:10000) A comparative analysis of ES frequency in born and eliminated fetuses in Krivoy Rog region and in 9 countries of the world which had been using cytogenetic monitoring for more then 10 years (selections from 9,5 mln pregnancies) showed that FRPF of ES newborns in Krivoy Rog region was less then in South America (1/12178), Spain (1/11040), Netherlands (1/8649), France (1/6317), the USA (1/6198) and greater then in Mexico (1/19660), Israel (1/22128), Hungary (1/11423). The average FRTF came to 1/11423. At the same time the average total RP of ES in countries using cytigenetic prenatal diagnosis accounted 1/5720.
Conclusions: *Thus, ES fetuses are characterized by manifestative echographic phenotype, the prenatal screening of which allows 5,5 times ES FRPF decreasing on an average.*

RETROSPECTIVE ANALYZE TO STATE THE RESULTS OF TREATMENT AND LABOR OUTCOME WITH INTRAUTERINE INFECTIONS

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Methods: *Retrospective research*
Results: *201 pregnant women were delivered by cesarean section with intrauterine infections: 86 of them (42,7%) were early diagnosed and took 2 courses of medical treatment, 115 (57,3%) of late infection diagnostic and they took only one treatment course. 75 pregnant women with infections joined the first group and delivered at once; 28,6% of women had prior treatment and were operated by ceserean section. To discuss the outcome of labor one took into consideration the rate of disorder of functional fetus position (ultrasound scanning, CTG, doppler, hormone tests). Fetus retardation was registered more often among pregnant with intrauterine infections – (22,4%); chronicle fetus hypoxsia (44,2%), placental blood flow disorder (52,6%) and hormone alteration (61,3%). A percentage of healthy delivered children in the principle group was 49,5%; in a test group it was 21,6%, ($p<0,05$). The rate of perinatal brain, destruction of infants were correlatively 74,2% and 56,9%, ($p<0,05$).*
Conclusions: *A brief revision of infant·s development informs that up-to-date treatment and careful labor management will serve a good deal to perspective child·s development complicated with infection.*