Third Trimester Ultrasound Screening in AMA ≥ 40

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BACKGROUND

- In the United States, 2.6% of women who give birth are above the age of 40. Advanced maternal age (AMA) is associated with increased rates of adverse perinatal outcomes including stillbirth.

OBJECTIVE

To determine the incidence of abnormal ultrasound (US) findings in a cohort of women with AMA ≥ 40.

STUDY DESIGN

- Prospective observational study evaluating our US protocol for AMA ≥ 40 which includes weekly biophysical profiles (BPPs) starting at 36 weeks and growing US at 32 and 36 weeks

- Records were reviewed from April 2017 – March 2019

- Singleton gestations with AMA ≥ 40 were included.

- Exclusions: known fetal anomalies and preexisting medical conditions or pregnancy complications other than diabetes or hypertension.

- The primary outcome was abnormal ultrasound findings including fetal growth restriction (FGR), large for gestational age (LGA), oligohydramnios, polyhydramnios, or abnormal BPP (< 8/8).

- The secondary outcome was perinatal morbidity among women with abnormal ultrasound findings.

- The primary and secondary outcomes were compared between women with isolated AMA ≥ 40 and those with AMA ≥ 40 and concomitant diabetes or hypertensive disease.

RESULTS

Table 1: Baseline Characteristics and US Findings

Table 2: Perinatal Outcomes Among Women with Abnormal US Findings

CONCLUSIONS

- Among AMA ≥ 40 years, the detection rates of abnormal ultrasound findings were similar between those with and without additional comorbidities.

- The rate of TTN was increased among AMA women with additional comorbidities. There was no significant difference in other neonatal outcomes.

- Future work will include analysis of biophysical profiles in fetuses with appropriate growth.