Introduction
Selective intrauterine growth restriction (sIUGR) occurs in approximately 15% of all monochorionic twins. The optimal management is still debated.

Objective
The present study evaluated the liveborn and neonatal death rates of monochorionic diamniotic twins with sIUGR under conservative management.

Methods
We performed a retrospective search for isolated sIUGR cases in our database of monochorionic diamniotic twin gestations from 2004 until 2017. sIUGR was defined as estimated fetal weight below the 10th centile in one twin and weight discordance of at least 25%. According to the Doppler diastolic flow pattern of the umbilical artery in the smaller twin at presentation we classified the pregnancies in sIUGR type 1: present, type 2: constantly absent/reverse, type 3: intermittently absent/reverse. All pregnancies who delivered in our center were included for the analysis of the gestational age and the rate of liveborns and neonatal deaths.

Results
Liveborn rates in type 1 was 97% for the larger twin and 95% for the smaller twin. In 9 out of 11 (82%) larger twins and 8 out of 11 (73%) sIUGR twins in type 2 cases were liveborns. In cases with an intermittently absent reversed diastolic flow in the umbilical artery (type 3) 92% of the larger twins and 83% of the smaller twins were born alive. Neonatal deaths was shown in 2%, 5% and 4%, respectively.

Conclusion
Monochorionic diamniotic twins complicated with sIUGR type 2 showed the highest risk of intrauterine demise and the lowest gestational age at delivery with conservative management.