OP09.01 - The cervical strain elastography in predicting the risk of spontaneous preterm birth
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Objectives
Preterm birth is still the leading cause of neonatal mortality. How to identify women who are at a higher risk of spontaneous preterm birth? The aim is to estimate the potential value of cervical strain in predicting the risk of preterm birth.

Methods
There are 50 patients with the diagnosis of preterm labor in the study group and 102 patients in the control group. Measure cervical length (CL) by transvaginal ultrasound and obtain three cervical elasticity indexes by strain elastography: Closed internal cervical os strain rate (CIS), external cervical os strain rate (ES) and midpoint of the cervical canal strain rate (CCS). Statistical significance was defined as a p value < 0.05.

Results
CL was lower and CIS was higher in the study group. The length of cervix was shorten by about 1 cm, and CIS would have significant change accordingly.

Conclusion
The shortening of CL and the increasing CIS are closely related to the occurrence of premature birth. The combination of CL and CIS may have a role in assessing the risk of spontaneous preterm birth.