Objective
Determine the accuracy of detection and diagnosis in the first trimester of congenital heart defect (CHD) at our center.

Methods
• Retrospective descriptive study.
• Fetuses with CRL 45-84 mm diagnosed of CHD between January 2014 and March 2019.
• Diagnostic accuracy of CHD detection was analysed by comparing it with postnatal diagnosis or necropsy in those with legal interruption.

Results
71 fetuses with CHD were detected in the 1st trimester

Detection rate: 100%

• Accurate Dx 81,6%
• Imprecise Dx 18,3%

➢ 7 cases: conotruncal anomaly suspected (confirmed in 2nd trimester)
➢ 6 cases: complex CHD suspected (confirmed in 2nd trimester)

In all cases the diagnosis was confirmed postnatally or by necropsy

Conclusion
Accurate diagnosis of CHD in the first trimester, combining transabdominal and transvaginal routes, is possible in the majority of cases. At this gestational age, conotruncal anomalies present the highest diagnostic difficulty. Although the defect can be suspected, it may be difficult to differentiate between the different types of these anomalies.