

Ultrasound in ppregnancy • 6 – 7 weeks • 11 - 14 weeks • 16 – 18(21) weeks • 28 weeks • 32 (33) weeks • 38 weeks

What can we expact?

- pregnancy yes/no?
- to determine the expected birth date
- to recognize ectopic pregnancy before clinical signs
- to monitor fetal growth
- to identify fetal anomalies
- to identify disorders of fetal growth

What more can we expact?

- to recognize twins, triplets, ...
- to identify position of placenta
- to identify disorders of amniotic fluid volume
- to monitor the movements of the fetus
- invasive methods of antenatal care
- psychological factor of the pregnant woman
- sex determination

What we can not ecpect?

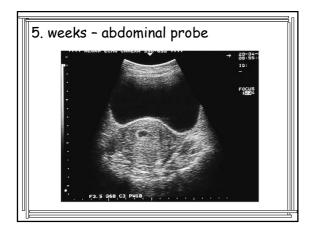
- perfection in everything
- definitive answer to the question:"Is everything all right?"

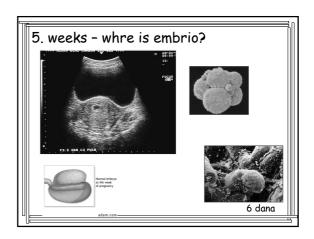
Whan we can see?

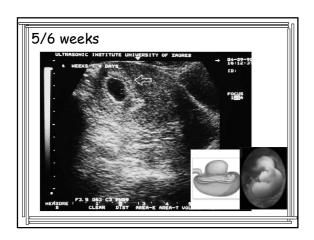
- 5 weeks- gestational sac (GS)
- 5/6 weeks yolk sac (JS)
- 6 weeks embrio (crown- rump lenght CRL)
- 7 weeks heart beats
-

Gestational age • CRL 5mm = 6+2/7 tj. (~ 6tj.) CRL=2x! in one week • CRL 10mm = 7+2/7 tj. (~7 tj.) • CRL 20mm = 8+6/7 tj. (~9 tj.) • CRL 30mm = 10 tj (~10 tj.) • CRL 54 mm = 12 tj. (~12 tj.)

First trimester (to 13 weeks)

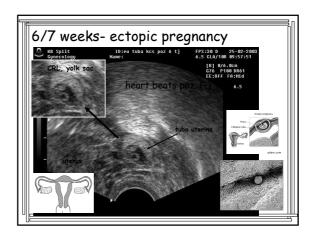




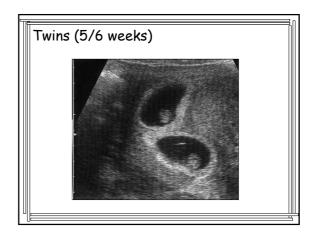


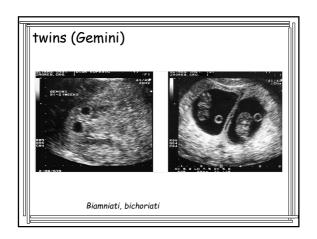


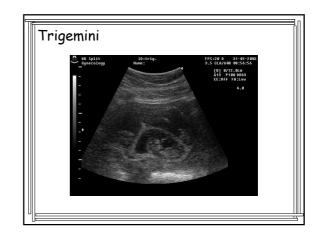


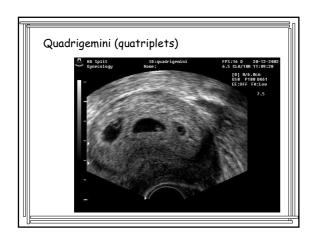


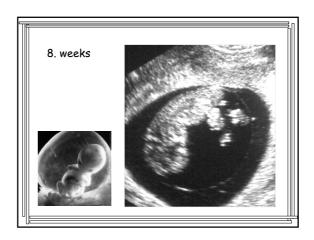


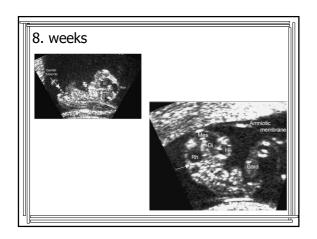




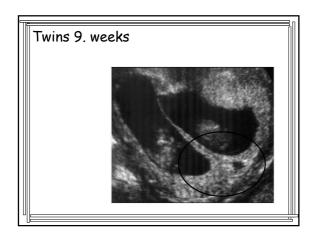


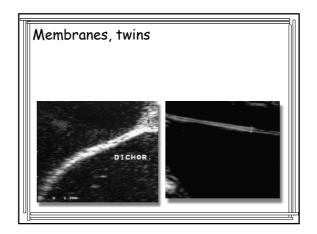




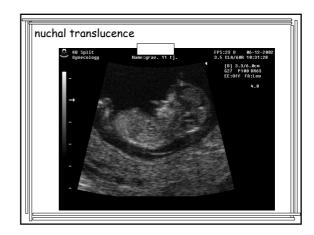


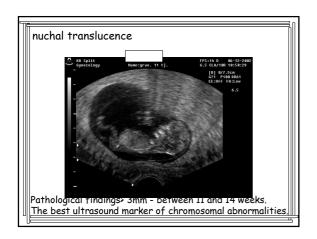


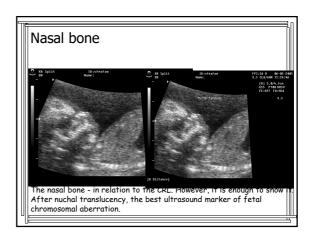


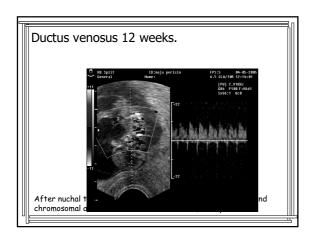












First trimester - biometry

- CRL (crown rump lenght)- to 12. weeks
- BPD (biparijetalni dijametar) –12. weeks onward
- FL (femur lenght)– 12. weeks onward

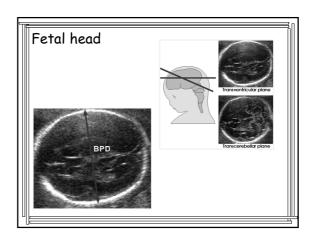
II. TIRMESTER (14.-26. weeks)

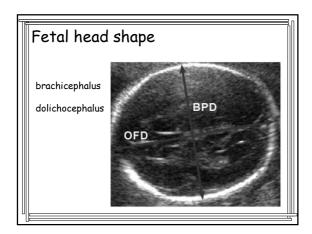
Second and third trimester – biometry:

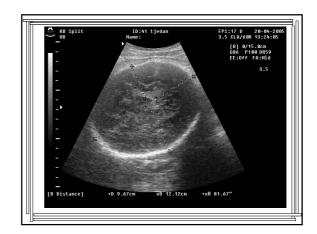
- BPD
- FL
- Cerebellum

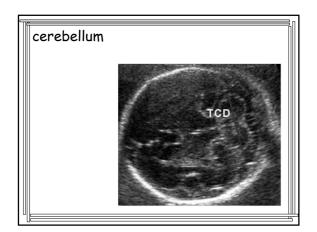
 mm = weeks (16 to 24 weeks)
- AC (abdominal circumference)
- OCD- okcipito frontal diameter
- Humerus, tibia, radius, ...
- ...

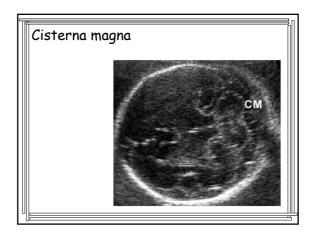


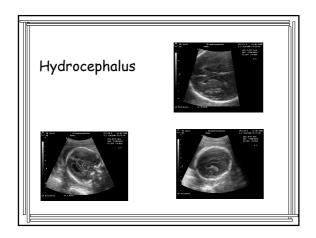


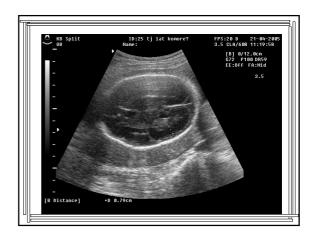


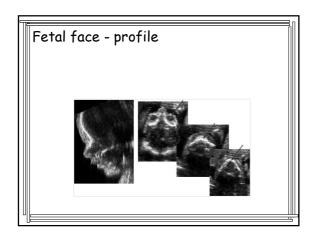


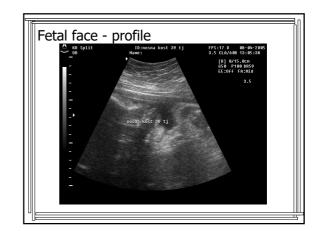


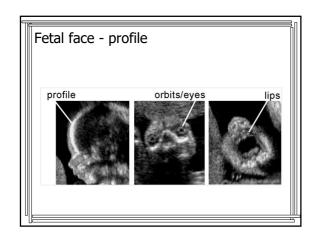


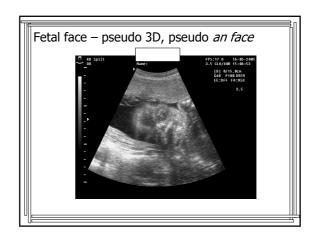


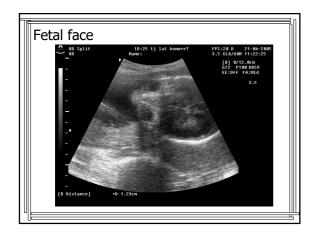


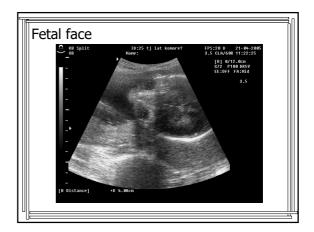


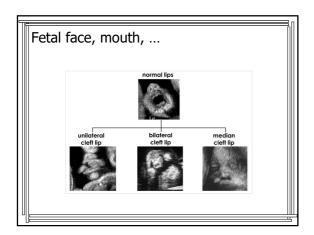




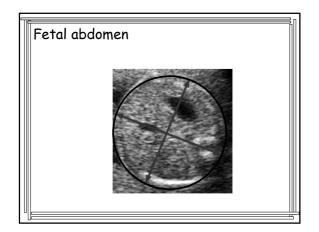


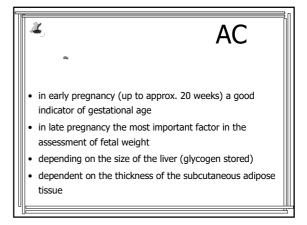


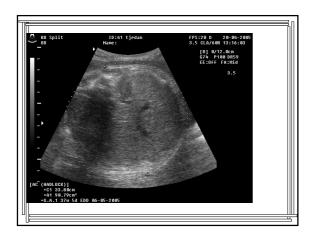


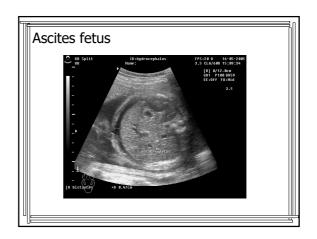


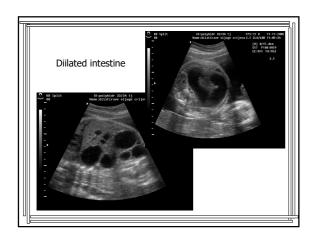


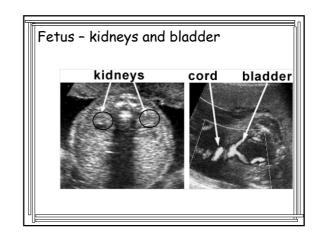


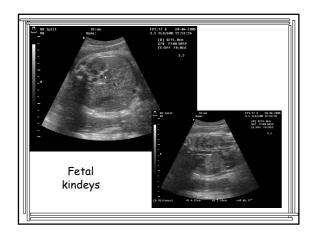


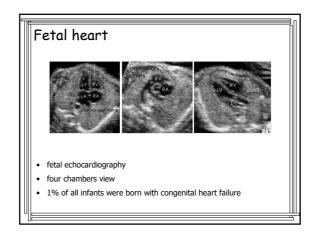


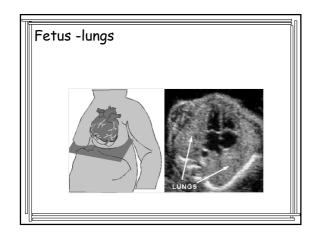


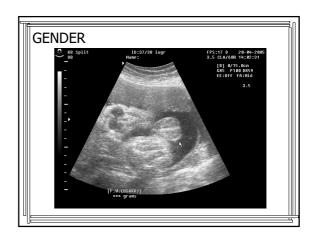


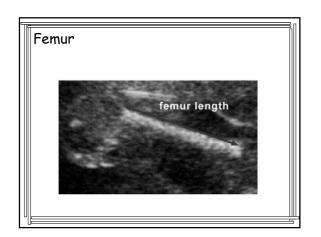




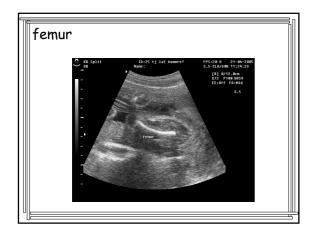






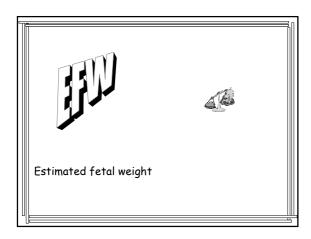




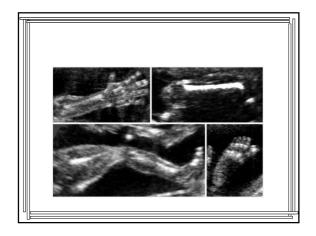


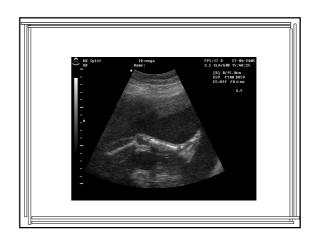
"Anomaly scan"

- CAREFUL: the difference between fetal anomalies and chromosomopathies
- "Anomaly scan" 18-23 (22) weeks
- demanding ultrasound examination in obstetrics
- conceived as a screening (~ all pregnant !!!)
- PROBLEM: unrealistic expectations and realitiy
- PROBLEM: training, time, ultrasound devices
- PROBLEM: Usual question: "It's 100% OK"

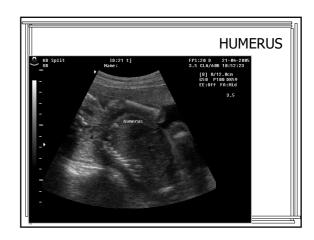


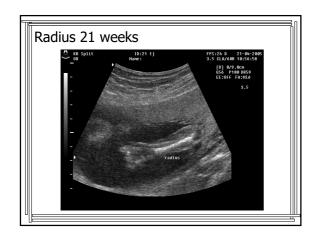
EFW – estimated fetal weight
 BPD
 AC
 FL
 good estimation: +/- 10%
 1000g +/- 100g ⇒Σ=200g
 4000g +/- 400g ⇒ Σ=800g

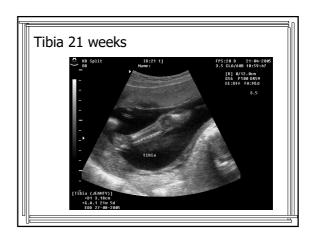


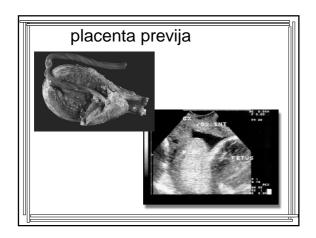


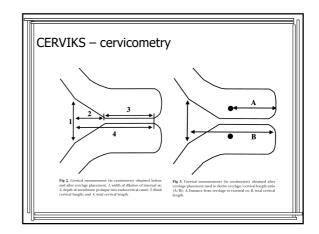






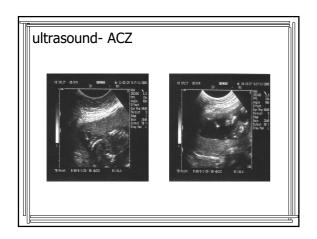


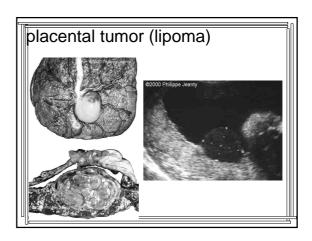


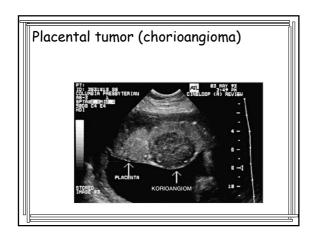


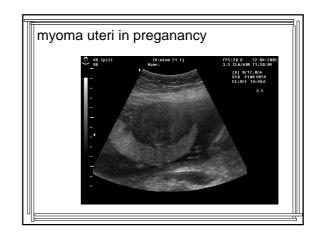


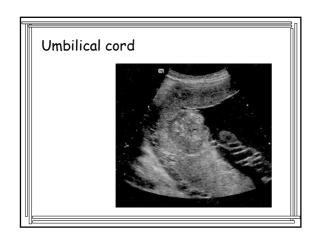








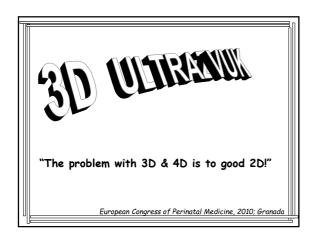




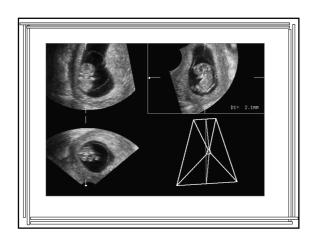


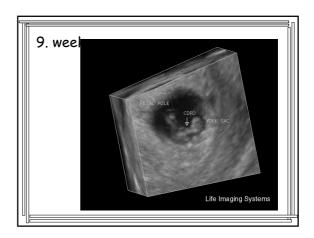


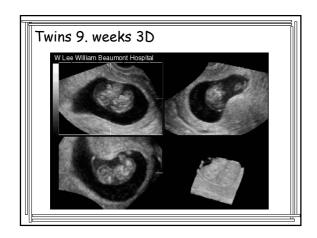


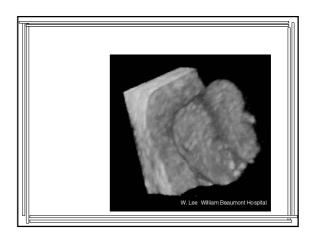




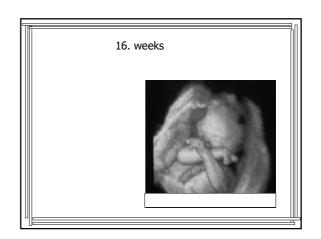


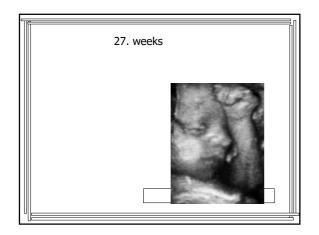


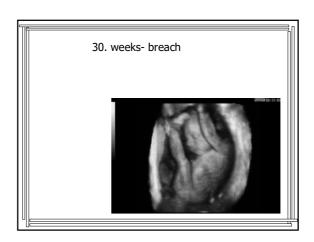


















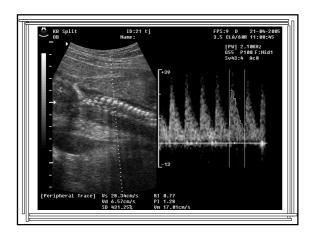


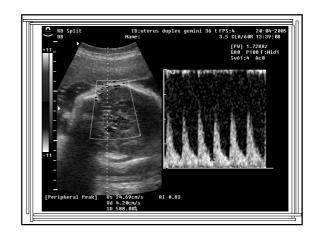












Σ

- COCHRANE 2000: umbilical artery doppler (resistance) measurement in pregnancies with IUGR and/or preeclampsia can reduce perinatal mortality
- other measurements are not confirmed as useful by Cochrane meta-analysis

