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CONGRESS

EUROPEAN SOCIETY

Gynecology

BARCELONA 18/21 OCTOBER 2017



P159. THE ROLE OF TRANSVAGINAL ASSESSMENT OF CERVICAL LENGTH IN THREATENED PRETERM LABOR

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OBJECTIVE: To study the hypothesis that in women with threatened preterm labor, transvaginal measurement of cervical length helps distinguish between true and false labor.

METHODS: We included in the study 112 women with singleton pregnancies presenting with regular and painful uterine contractions at 24-36 (mean, 32) weeks of gestation. Women in active labor, defined by the presence of cervical dilatation > or = 3 cm, and those with ruptured membranes were excluded. On admission to the hospital a transvaginal scan was performed to measure the cervical length. The primary outcome was delivery within 7 days of presentation.

RESULTS: In 89 cases the cervical length was > or = 15 mm and only one of these women delivered within 7 days. In the 23 cases with cervical length < 15 mm delivery within 7 days of presentation occurred in 9 (39%) cases. Statistical analysis demonstrated that the only significant contributor in the prediction of delivery within 7 days was cervical length < 15 mm (PPV 95%,P < 0.0001). The variables like maternal age, gestational age, parity, previous history of preterm delivery, cigarette smoking, contraction frequency or use of tocolytics had poor significance.

CONCLUSIONS:

In women with threatened preterm labor, sonographic measurement of cervical length helps distinguish between true and false labor.

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