Best Approach for Diagnosing Fetal Cardiac Anomalies in Pregnancies Complicated With Pre-Gestational Diabetes

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Pre-existing Diabetes Mellitus (DM) is a frequently encountered medical condition during pregnancy. While type-I DM is estimated to complicate up to 0.5% of all pregnancies, the current epidemic of obesity increases the incidence of type-II DM which complicates about 2% of all pregnancies or even higher in certain ethnic groups [1]. One of the major concerns in pre-gestational DM complicated pregnancies is the risk of congenital structural malformations particularly those involving the fetal cardiovascular system; the risk of fetal cardiac structural abnormalities is 10 times higher compared to the general population [2].

The value of accurate prenatal diagnosis of fetal congenital cardiac abnormalities is well documented as it allows for optimizing both preoperative [3,4] and postoperative circumstances [4-6] as well as having a favorable impact on neurological outcome [7] and consequently, prevention of avoidable postnatal morbidity and mortality. It also provides an excellent opportunity, either during intrauterine or neonatal period, for prenatal medical and surgical interventions that could be potentially lifesaving [3,8]. Although, the best strategy for prenatal diagnosis of those abnormalities is to screen all women with pre-gestational DM pregnancies with fetal echocardiography, it is not always a cost-effective strategy to adopt especially in the settings of low resource health institutions.

It is authors’ view is that this concept deserves testing by a large randomized trial since it is likely to standardize practice and offers cost benefit particularly in low resource settings.

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Bibliography

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