

Antenatal

Prenatal is a synonym of antenatal. Antenatal is a synonym of prenatal. As adjectives the difference between antenatal and prenatal is that antenatal is occurring or existing before birth while prenatal is being or happening before birth.

Antenatally diagnosed **ventriculomegaly** (VM) requires the balance of risks of neurological injury with premature delivery.

The purpose of a study of Morgan et al. was to evaluate outcomes related to early elective delivery due to fetal VM at our institution.

They retrospectively assessed 120 babies (2008-2012) with antenatally diagnosed fetal VM. Inclusion criteria for ("early") cohort were (1) elective delivery occurred for expedited neurosurgical intervention between 32 and 36 weeks EGA and (2) fetal VM noted on official antenatal ultrasound. The comparative "near term" cohort differed only in that delivery occurred at 37+ weeks EGA. Statistical significance for comparative analyses set a priori at $p < 0.05$.

Babies electively delivered early had a lower birthweight ($p < 0.0001$), greater ventricle width ($p < 0.0001$), and underwent initial CSF diversion sooner ($p = 0.014$). The early cohort ($n = 22$), compared to near term ($n = 50$), had a lower birthweight ($p < 0.0001$), greater ventricle width ($p < 0.0001$), and underwent initial CSF diversion sooner ($p = 0.014$). The early cohort required more repeat procedures: (45 vs. 22% $p = 0.021$), and VPS removals after VPS infections (41 vs. 12%, $p = 0.010$). Additionally, newborn respiratory failure (32 vs. 6%, $p = 0.037$) was more common. Finally, of four babies who died in the early cohort, 2/4 died for prematurity-associated pulmonary hypoplasia.

While early elective delivery for fetal VM expedites intervention for rapidly expanding ventricles, few benefits were identified. Our study concluded those infants that were delivered earlier had increased VPS infections, repeat neurosurgical procedures, and medical co-morbidities. A multi-institutional prospective observational study would be needed in order to confirm the clinical implications of such practice ¹⁾.

¹⁾

Morgan CD, Ladner TR, Yang GL, Moore MN, Parks RD, Walsh WF, Wellons JC, Shannon CN. Early elective delivery for fetal ventriculomegaly: are neurosurgical and medical complications mitigated by this practice? Childs Nerv Syst. 2017 Dec 1. doi: 10.1007/s00381-017-3662-0. [Epub ahead of print] PubMed PMID: 29196812.

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Last update: **2024/06/07 02:55**

