

Rise in ultrasounds for low-risk pregnancy needs review

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(PhysOrg.com) -- In a decade the use of prenatal ultrasounds in pregnant women increased by 55 per cent, suggesting a need to review current practices, says a McMaster University researcher.

In a study published in the [Canadian Medical Association Journal \(CMAJ\)](#), John You, an assistant professor of medicine and [clinical epidemiology](#) and biostatistics, along with researchers from McMaster and the Institute for Clinical Evaluative Sciences, found that more than one-third (37 per cent) of pregnant women now receive three or more [ultrasound](#) tests in the second and third trimesters.

The increase in the use of multiple ultrasound scans per pregnancy has been more pronounced in low-risk than high-risk pregnancies.

"Our findings are consistent with a growing body of evidence suggesting that some health interventions most beneficial to high-risk individuals are frequently directed at apparently low-risk populations," You and his co-authors wrote.

Current guidelines recommend two ultrasounds in an uncomplicated pregnancy - one in the first trimester and one in the second to screen for fetal and genetic anomalies.

The study examined almost 1.4 million single-baby pregnancies between 1996 and 2006 in Ontario. It included both low-risk and high-risk pregnancies, the latter defined by the presence of a maternal co-

morbidity, need for genetics counselling or a prior complicated [pregnancy](#). The study accounted for the recent introduction of first trimester nuchal translucency scanning.

The authors found that almost one in five pregnant women - including those at low-risk of complications - now receive four or more ultrasounds in the second and third trimesters.

"While the benefits of prenatal ultrasound in high-risk pregnancies may be more clear, the value of repeat ultrasounds in low-risk patients is not," the authors wrote.

The researchers concluded that more judicious use of prenatal ultrasounds in low-risk women is required, but there should be careful discussion over the best approach to balance frequency and medical need.

Provided by McMaster University

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