

Screening for short cervix could improve pregnancy outcomes and reduce preterm birth

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Using ultrasound to screen all pregnant women for signs of a shortening cervix improves pregnancy outcomes and is a cost-effective way to reduce preterm birth, Yale School of Medicine researchers report in a new study.

The results of the study will be presented February 5 at the Annual Scientific Meeting of the Society for Maternal Fetal Medicine (SMFM) in Chicago.

Shortened cervical length increases the likelihood of a <u>preterm birth</u>. All high-risk patients—those who have had a prior preterm birth—are routinely screened at 20 to 24 weeks gestation to test for cervical length. However, screening is not often given to low-risk <u>pregnant women</u>, and researchers did not know whether it was cost-effective to screen women at low risk.

Erika Werner, M.D., clinical instructor in the Department of Obstetrics, Gynecology & Reproductive Sciences at Yale, found that screening low-risk women is not only cost effective, it is cost-saving.

Werner and her team developed a computer model to mimic the outcomes and costs that occur when women are screened routinely, compared to when no screening occurs. They found that universal screening was cost-effective when compared to routine care. In fact, for



every 100,000 women, routine care costs \$6,523,365 more than the screening strategy. It also improved quality of life and resulted in fewer neonatal deaths and infants with long-term neurologic disorders.

"Since only 10 percent of preterm birth occurs in women with a history of preterm birth, cervical length screening may be the best way to decrease the number of babies born prematurely," said Werner.

Provided by Yale University

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