

Study finds in utero surgery preferable to surgery

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In a study to be presented today at the Society for Maternal-Fetal Medicine's annual meeting, The Pregnancy Meeting, in Dallas, Texas, researchers will report findings that show that, for children with spina bifida, surgery conducted while the fetus is still in utero as opposed to surgery on a newborn is more cost effective due to the costs associated with caring for a child with significant deficits.

This study, A Cost Effective Analysis of Prenatal Surgery for Myelomeningocele, sought to evaluate the costs and effects to the [health care system](#) of in utero surgery compared to surgery shortly after birth for children found to have spina bifida. Studies have already shown that in utero surgery results in a significantly higher quality of life for the child with spina bifida and places the mother at some health risks.

"Given the large costs associated with caring for a child with significant deficits, the improved outcomes with in utero surgery make it less costly over a lifetime than surgery after delivery," said Erika F. Werner, MD, with Johns Hopkins University, [Gynecology](#) and [Obstetrics](#), Baltimore, Md., and one of the study's authors.

Werner and her colleagues built a decision model to evaluate the costs and effects to the health care system of the two surgery options. They found that in utero surgery is most often more cost effective compared to surgery after birth.

In addition to Werner, the study was conducted by Heather Lipkind,

Joshua A. Copel, Mert O. Bahtiyar and Christina Han, Yale University, Ob/Gyn & Reproductive Science, New Haven, Conn.; and Stephen F. Thung, Ohio State University College of Medicine, Columbus, Ohio.

More information: A copy of the abstract is available at www.smfmnewsroom.org/annual-meeting-abstracts/

Provided by Society for Maternal-Fetal Medicine

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