

Study questions utility of universal cervical length screens

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(HealthDay)—Patients with a short cervix who deliver prematurely have

a significantly longer interval from antenatal corticosteroid administration, and fewer receive antenatal corticosteroids within seven days of birth, according to a study published in the June issue of *Obstetrics & Gynecology*.

Nicole Sahasrabudhe, M.D., from the Albert Einstein College of Medicine/Montefiore Medical Center in Bronx, N.Y., and colleagues performed a [retrospective cohort study](#) involving 266 patients with nonanomalous singleton gestation and spontaneous preterm birth between 24 and 34 weeks of gestation. Of the participants, 69 had a short cervical length and 197 were without short cervical length.

During the study period, 92.8 and 89.3 percent of those with and without a short cervix, respectively, received at least one [steroid injection](#) before delivery ($P = 0.411$). The researchers found that steroids were given within seven days of delivery in 47.8 and 64.0 percent of patients with and without a short cervix, respectively (adjusted odds ratio, 0.51; 95 percent confidence interval, 0.29 to 0.9; $P = 0.015$). The median interval between steroid administration and delivery was eight and three days, respectively, for those diagnosed with and without a short cervix (P

"This study highlights the clinical dilemma for physicians caring for patients with an incidentally identified short [cervix](#) trying to balance the risk of administering corticosteroids too early with the risk of administering them too late," the authors write. "A policy of universal transvaginal [cervical length](#) screening may increase the likelihood that corticosteroids for fetal maturation are administered less than optimally."

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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