

First Results of the Provincial Consultation of Ciur Precoz in Havana

Georgina Alvarez Medina *, Tahimir Silva Kill

Assistant and Professor Consultant at the Ramon Gonzalez Coro Hospital.

*Corresponding Author: Georgina Alvarez Medina, Assistant and Professor Consultant at the Ramon Gonzalez Coro Hospital.

Received date: October 17, 2024; Accepted date: October 31, 2024; Published date: December 19, 2024.

Citation: Georgina A. Medina, Tahimir S. Kill, (2024), First Results of the Provincial Consultation of CIUR Precoz in Havana, *J. Obstetrics Gynecology and Reproductive Sciences*, 8(9) DOI:10.31579/2578-8965/247

Copyright: © 2024, Georgina Alvarez Medina. This is an open-access article distributed under the terms of The Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract:

The decrease in births and the high rate of low weight associated with Retarded Intrauterine Growth (CIUR) in the city of Havana, Cuba were the reason why the provincial Early CIUR consultation was created as a strategy, in order to diagnose it early and provide timely follow-up to each case. The objective of this consultation is not only to improve the numbers of births with an adequate weight, but to achieve a better quality of life in the live birth in the long term.

Keywords: idiopathic infantile arterial calcinosis; enpp1; calcifications

Introduction

Fetal growth restriction is an important cause of morbidity and mortality perinatal, with consequences that extend into adulthood. 1 Cuba is not exempt from these results and in the years 2022 and 2023 (according to statistics national of the MINSAP) decreases the number of birth and increases the number of the low weight to be born. This low weight in the vast majority are related to CIUR (Intrauterine Growth Retardation). A fetus's growth is considered restricted if the weight is two standard deviations lower than the average for its gestational age, is below the percentile 3 for his same age gestational either HE watertight, is say, No reaches the size that corresponds to its biological potential. 2 In general terms, the factors of a CIUR HE classify in three big groups that are: maternal, fetal and placental. In Havana, it was decided to hold a provincial consultation for early diagnosis and conduct to follow in these cases. The protocol of this consultation is supported by the Harlock charts and uterine artery Doppler marker at 22 weeks with assessment of municipal geneticists to the provincial consultation.

Aim General

Establish an early diagnosis of Intrauterine Growth Retardation in La Havana assessing its social impact.

Development

TO level world the CIUR Early represents the 33% of this diagnosis of shape general. In particular, 40% of these Early CIUR are related to factors maternal. Between the factors maternal HE find the hypertension chronicle, the preeclampsia, malnutrition, and a history of preeclampsia or recurrent CIUR. Another 60% of early CIUR are related to fetal and placental factors

such as abnormalities of the karyotype, trisomies, alterations autosomal, etc It fits stand out that chromosomal abnormalities usually cause CIUR.

The Provincial Early Intrauterine Growth Retarded Consultation of Havana is a consultation multidisciplinary integrated by obstetricians, perinatologists, geneticists, ultrasound specialists and psychologists, in order to cover the three major groups of factors risk. The obstetrician begins with the correction of the gestational age by the marker genetic test of the 12 weeks. Then it corroborates the questioning and clinical examination of the uterine height, abdominal circumference, prenatal check-up until arrival at the clinic to the 22 weeks. He perinatologist is a obstetrician specialized that analyzes the growth fetal not only by the tables of Harlock, but also by Fetal Z of Barcelona and flowmetry Doppler, completing the hemodynamic study of the fetus, in conjunction with the ultrasound specialist. Geneticist orders cordocentesis to study fetal chromosomes, Torch study to look for germs that can infect the placenta and produce a CIUR, providing advice genetic. He role of the psychologist is to orient to the pregnant and their relatives regarding the influence social in the diagnosis of these cases.

The patients They arrive to the consultation sent by the geneticist municipal when the marker genetic of the 22 weeks HE finds by below of the tenth percentile and the Uterine artery Doppler is pathological. Once in the consultation, they are re-evaluated ultrasonically, by the clinic obstetric and by genetics, giving it to him follow-up until the 24 weeks of gestation. A time confirmed the diagnosis of CIUR Early by below of the third percentile and pathological Doppler, informed consent is drawn up and the pregnancy is terminated. If the termination is not carried out, the following procedures are carried out: precise indications such as hospital admission or admission to the maternal home, tests fetal well-being, study of arterial hypertension

and definition of viable interruption of pregnancy, trying approach each time further to the 34 weeks and avoid the prematurity. After 24 weeks, if the pregnancy has not been interrupted, the follow-up of this is by the area of health in a consultation offered by a perinatologist.

The frequency of the provincial CIUR Precoz consultation is once a week, providing information to each part of the City of Havana for monitoring prompt of the guidelines given by This query at the local level.

Detect of shape early he CIUR Early has a great scope in he development of the society. Well to long term has a impact adverse in he development childish, introducing himself alterations in he tone muscular, coefficients intellectuals minors that those infants with weight appropriate, disorders of

the behavior and emotional and in the life adult HE relates with decrease of the productivity economic and low weight to the be born of the children, by it that is necessary carry out a classification, diagnosis, treatment and appropriate follow-up in order to assess the results adverse. [3]

Analyzing the data statisticians of the consultation of CIUR Early of the period of December 2023 to April 2024, we saw that of the total cases seen (343) They proposed 46 interruptions for 13% of the total, of which 33 were abortions and 13 continued with he pregnancy. Of are latest 2 fetal late, 5 neonatal early and he rest were preterm between 35 and 36 weeks with weights between 1480 and 1600 grams.

Cases Views	Cases New	Reconsultation	Proposal of interruption	
			INT 33	CONT 13
343	246	97	46	

Are statistics show the importance of the diagnosis of CIUR early and the strategy appropriate in each case.

Below are the total deaths and the low birth weight rate in La Paz. Havana between 2023 and April 2024, where a decrease in the deaths and a lower

rate of low birth weight. Although only one study was evaluated, 5-month period with the provincial consultation of CIUR Precoz we see its impact on the decrease of these values.

Year	Deaths	Rate of low weight to the be born
2023	105	8
2024	40	7.4

Conclusions

Early detection of CIUR and its personalized follow-up and treatmentthe pregnant women evaluated in consultation with either without criterion of interruption, intervenedirectly on perinatal morbidity and mortality and its consequences for life adult. Because the low birth weight rate is directly proportional to the infant mortality rate, achieving adequate management of the CIUR can influence shape positive in the city's infant mortality rate.

Recommendations

- Propose the stay of a doctor from each municipality in the consultation in a manner scheduled and planned, with he aim of have elderly clarity of the characteristics the environment and primary prenatal care.
- Take these results into account in the problem bank for possible thesis and lines research.

References

- Felix Dasio Ayala, Henry Guevara Rivers, Cease Carranza Asmat, Antonio Mambret Moon, Katherine F. (2021). Dark Kings. Prevalence and factors obstetrics partners to intrauterine fetal growth restriction . Peru Maternity Journal Perinatal 10(4):36-43.
- Ricardo Salaas Flores, Brian Gonzalez Perez, Veronica Olvera Mendoza. (2021). Factors of risk partners to delay of the growth intrauterine. South Florida Journal of Development, Miami ISSN 2675-5459.
- Debbie Esmeralda Garcia Molina,(2020). Maria de los Angeles Lemus Menjivar. Guide of attention clinic of restriction of the growth intrauterine. Thesis qualification for opt by Gynecology and Obstetrics. Saint Savior.



This work is licensed under Creative Commons Attribution 4.0 License

To Submit Your Article, Click Here:

Submit Manuscript

DOI:10.31579/2578-8965/247

Ready to submit your research? Choose Auctores and benefit from:

- fast, convenient online submission
- rigorous peer review by experienced research in your field
- rapid publication on acceptance
- authors retain copyrights
- unique DOI for all articles
- immediate, unrestricted online access

At Auctores, research is always in progress.

Learn more <https://www.auctoresonline.org/journals/obstetrics-gynecology-and-reproductive-sciences>