

## CURRENT RISK ASSESSMENT FOR FETAL ANOMALIES IN FIRST AND SECOND TRIMESTER OF PREGNANCY

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### Abstract

Nowadays, in western world, by influence of many factors, such as information, technology, progress in health care standards and social economic ones, according to statistics of last five years, live childbirths in United States of America (USA) exceeded 4.5 million. During the evaluation of these data, were noticed a steady increase of average of mothers at their first childbirth in the past 4 decades. In 2008, 15% of all neonates were born by women 35 years old or older. These tendencies have been and also are noted in European countries, including the eastern European countries like Albania.

There is enough evidenced based medicine information of the risk of fetal anomalies of the pregnant women in older age. Fetal anomalies can affect different part of human system. Down syndrome (DS) is the most common chromosomal abnormality, affecting 1:700 live births. Its frequency is at least a third greater if stillbirths and spontaneous losses, which inherently have a greater burden of aneuploidies, are included.

With the trend aging of the obstetrical population the incidence has grown as high as 1:500 live births. Identifying pregnancies at risk for DS has been a major goal of prenatal care since safe prenatal diagnostic testing became available in the early 1970s. Sonographic equipments and medical staff training started in late 1970s, and in mid 1980s and early 1990s obstetrical sonography was part of clinical practice in Albania, specifically in Tirana.

Having noticed this tendency of old age of Albanian obstetrical population influenced by same factors as in western countries, this article brings most current strategies diagnostic testing and management of fetal anomalies. Also, Albania

prenatal care in last 2 decades has gone through a real revolution with a tremendous positive changes and impact in prenatal care, such as preconception consults and screening, early diagnosing of major fetal anomalies, and overall reduction of neonatal and maternal death bringing the statistics very close to the ones of developed countries. These data bring our health care system, especially obstetrical and neonatal care, and diagnostic skills and means of early diagnosis of fetal anomalies to the same level of standard care of western counterparts by using contemporary strategies in diagnosing and management.

**Key words:** Fetal anomalies, Down syndrome, prenatal care, diagnosis.

### Introduction

Nowadays, in western world, by influence of many factors, such as information, technology, progress in health care standards, and social economic ones, according to statistics of last five years, live childbirths in United States of America (USA) exceeded 4.5 million. During the evaluation of these data, were noticed a steady increase of average of mothers at birth in the past 4 decades. In 2008, 15% of all neonates were born by women 35 years old or older [1]. These tendencies have been and also are noted in European countries, including the eastern European countries [2]. There is enough evidenced based medicine information of the risk of fetal anomalies of the pregnant women in older age. Fetal anomalies can affect different part of human system. Down syndrome (DS) is the most common chromosomal abnormality, affecting 1:700 live births. Its frequency is at least a third greater if stillbirths and spontaneous losses, which inherently