

Factors Affecting the Accuracy of Ultrasound Fetal Weight Assessment among Diabetic Patients

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Background: Antenatal ultrasound (US) Estimated Fetal Weight (EFW) is an important component of antenatal care.

Objective: To evaluate the accuracy and consequences of US EFW within one-week interval prior to delivery in diabetic Bahraini population.

Design: A Retrospective Cohort Study.

Setting: Bahrain Defence Force Hospital, Bahrain.

Method: Two hundred eighty-four diabetic women deliveries were reviewed. EFW, actual birth weight, gestational diabetes and mode of delivery were documented and analyzed via stats Direct. P-value of less than 0.05 was considered significant.

Result: The study population was divided into two groups. Twenty-eight (10%) yield an accurate EFW. Accurate fetal weight estimation was affected by GA, EFW and actual birthweight. Fetal gender, parity, diabetic status, maternal BMI, maternal age, mode of delivery and induction of labor was not altered by the inaccurate estimation.

Conclusion: Ultrasound EFW in diabetic patient is more accurate at early gestation and for smaller fetuses.