Establishment of mass screening for aneuploidies by serum markers in the governorate of Bizerte, northern Tunisia

Bouzid A, Ayachi A, Menjli S, Karmous N, Mkaouar L, Mourali N
Gynecology and obstetric, bizerte teaching hospital, Bizerte, Tunisia, BIZERTE, Tunisia

Objective
Establish an inventory of the practices of aneuploidies screening at the regional level and evaluate preliminary results after a widespread mass screening policy.

Methods
We conducted a prospective descriptive study for a period of two years at the regional level in the governorate of Bizerte in northern Tunisia in collaboration between the private and public sectors. We included all patients who underwent measurement of nucal translucency and serum markers in the first or second trimester with a known pregnancy outcome.

Results
During the study period, 1285 patients answered our inclusion criteria, including 15 with twin pregnancy. 872 have had markers in the first trimester, while 412 have had markers of the second trimester. 93 patients had positive markers for trisomy 21 and / or trisomy 18 and 13. We observed a trend of public sector Gynecologists asking markers of the first trimester (483/501), while the private sector had prescriptions shared (386/381). We found a trend of underestimation in the measurements provided by 54.3% of clinicians attested by a measure less than 0.6 MOM.

Conclusion
The aim of this work was first of all evaluative, to identify the limitations and imperfections of a regional policy of mass screening widespread in the region of Bizerte, private and public combined and this makes the particularity of our study. A second feature is the number of patients included; we believe it is the most important Tunisian series. We were alarmed by the lack of codification of practices and by the large number of amniocentesis. While waiting for the legislation to standardize practices, we continue to establish the necessary logistics for mass screening by serum markers for all pregnant women and to estimate integrated risk in the first trimester or combined risk in the second one and to improve the quality of our ultrasounds.