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# Triplet pregnancies reduced to twins and singletons: Comparison of outcomes and role of cervical length assessment

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- The incidence of higher order multifetal pregnancies (triplets and above) has been on the exponential rise with increasing use of assisted reproductive techniques
- Fetal reduction procedure may be associated with procedure related miscarriage within 1-2 weeks of procedure. Resorption of dead fetoplacental tissue may take several weeks or months after procedure

**Aim :** To compare the outcomes of triplet pregnancies reduced to twins and singletons and to evaluate the role of cervical length check at 16 and 20 weeks in predicting delivery before 28 weeks

## Materials and Methods

- Study period :** June 2006 to June 2016
- No of triplet pregnancies analyzed post reduction :** 177
- Reduced to Twins :** 149; **Reduced to singletons :** 28
- Cervical length was assessed at 16 and 20 weeks in all pregnancies

## Outcomes analyzed

- Procedure related risk of miscarriage (< 16 weeks)
- Mid trimester pregnancy loss (17 to 28 weeks)
- Preterm delivery (29 to 33 weeks)
- Delivery beyond 34 weeks

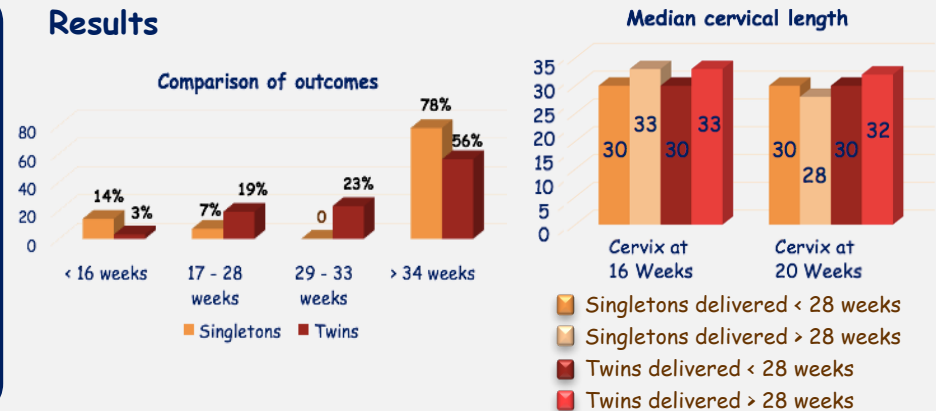
## Conclusions

- Most couples favor reduction from triplets to twins
- Reduction of triplets to singletons as compared to twins is associated with
  - Significantly higher procedure related loss
  - Reduced mid trimester loss rate
  - Significantly higher rate of delivery after 34 weeks
- Decreased over all mortality and most importantly morbidity when reduced to singletons
- Cervical length measurement at 16 and 20 weeks does not predict mid trimester loss as well as preterm deliveries

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## Results



Outcomes	Triplet to singleton	Triplet to twins
Procedure related miscarriage (<16 weeks)	14%	3%
Mid trimester pregnancy loss (17 to 28 weeks)	7%	19%
Early preterm delivery (29 to 33 weeks)	0	23%
Deliveries >34 weeks	78%	56%

## References

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