Objective
Soluble fms-like tyrosine kinase-1 to placental growth factor (sFlt-1/PlGF) ratio thresholds for preeclampsia (PE) have been proposed to be implemented in clinical practice for ruling in and ruling out the disease. However, no specific thresholds have been described in early-onset fetal growth restriction (FGR) and small for gestational age (SGA) fetuses. The purpose of this study was to describe specific cutoffs of sFlt-1/PlGF ratio to identify early-onset FGR/SGA fetuses at higher risk of adverse outcomes and compare their predictive capacity to those described for PE.

Methods
This is a prospective, observational study, conducted in a tertiary referral hospital. Singleton pregnancies with estimated fetal weight below the 10th centile between 20^th^ and 31^w^ weeks were enrolled. Receiver operating characteristic curves were used to assess the performance of the sFlt-1/PlGF ratio for predicting adverse pregnancy outcomes. The optimal cutoff points of the sFlt-1/PlGF were calculated and the resulting areas under the curve (AUC) were compared to the AUCs calculated from the cutoff points of 38, 85 and 110. The need for delivery at <30 and <34 WG and adverse perinatal outcomes (APO) were the main outcome measures.

Results
175 women agreed to participate. The optimal cutoff points to predict APO, delivery at<30 weeks and at <34 weeks were 24.9, 116.7 and 97.5, respectively. None of them proved to be superior to 38, 85 or 110 for predicting any adverse pregnancy outcome.

Conclusion
The cutoff points commonly used in PE have excellent performance for predicting and excluding adverse outcomes in pregnancies with early-onset FGR/SGA.