

# P47.04 Diagnosis of fetal congenital malformations in women with type 1 and type 2 diabetes in pregnancy in a large multi-ethnic UK region.

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## Background : West Midlands Cohort Analysis

Out of the National UK CEMACH diabetes in Pregnancy Programme the West Midlands commissioned its own regional analysis of the outcomes & care provided in pregnancies complicated by maternal type 1 & 2 diabetes in 2002-03.

The West Midlands (WM) is a large central region of the UK with a diverse ethnic population mix including 17.5% Asian ethnicity. Major congenital malformations were coded according to ICD10 and using EUROCAT classification. Minor anomalies were excluded.

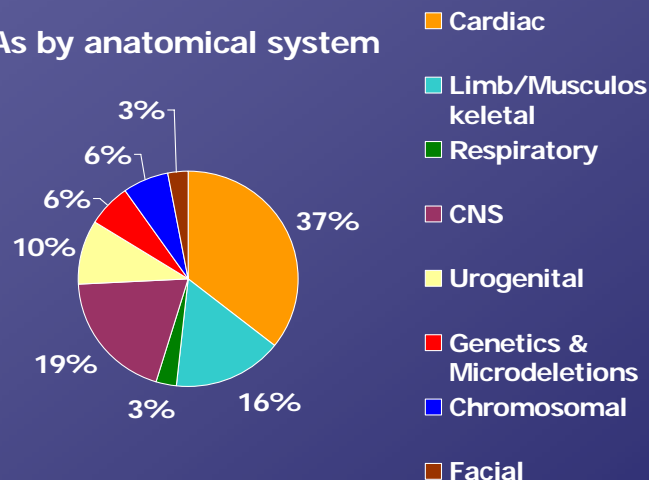
### Key Population Results

405 women with type 1 or 2 diabetes registered between 01/03/02 and 28/02/03.

426 babies of which 370 were alive at 28 days.

32 pregnancies with a major congenital abnormality (CA).

### CAs by anatomical system



## Congenital Malformations

Major Congenital Malformation rate = 82.1/1000 livebirths.

Outcomes : 7 early fetal losses

5 perinatal losses

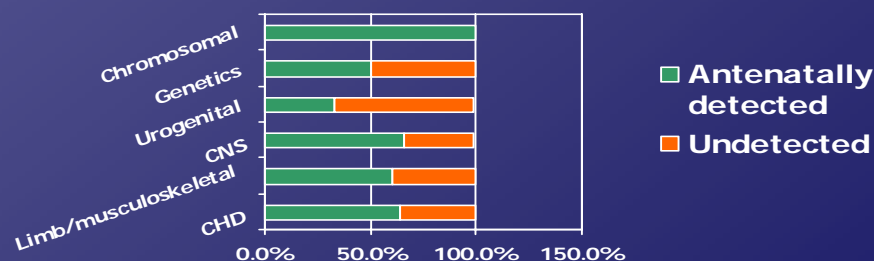
20 babies alive at 28 days.

17/29 CA's diagnosed by USS >16 weeks gestation.

12/29 CA's were undetected.

Antenatal Diagnostic rate = 59%

### Ultrasound antenatal detection rates for CAs by fetal system



## Conclusions and Recommendations

1. The major CMR in the West Midlands is twice that of the national UK figures in pre-gestational diabetic women and four times that of the general population in UK
2. The majority of malformations (56%) were cardiac or CNS abnormalities.
3. 40% of major CA's went undiagnosed in pregnancy despite second trimester fetal scanning.
4. All pre-gestational women should have a detailed fetal anomaly scan by a sonographer with RCR/RCOG higher level Obstetric ultrasound accreditation.