FIRST TRIMESTER SCREENING IN TWIN PREGNANCIES: Recognising Diversity for Comprehensive Prenatal Care

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BACKGROUND

- **Twin pregnancies** comprise 2%¹ of all pregnancies typically first recognised through ultrasound.
- Importance: Twin pregnancies are biologically



RESULTS

Total of 111 twins

were screened including 42 (38%) monochorionic and 69 (62%) dichorionic cases.

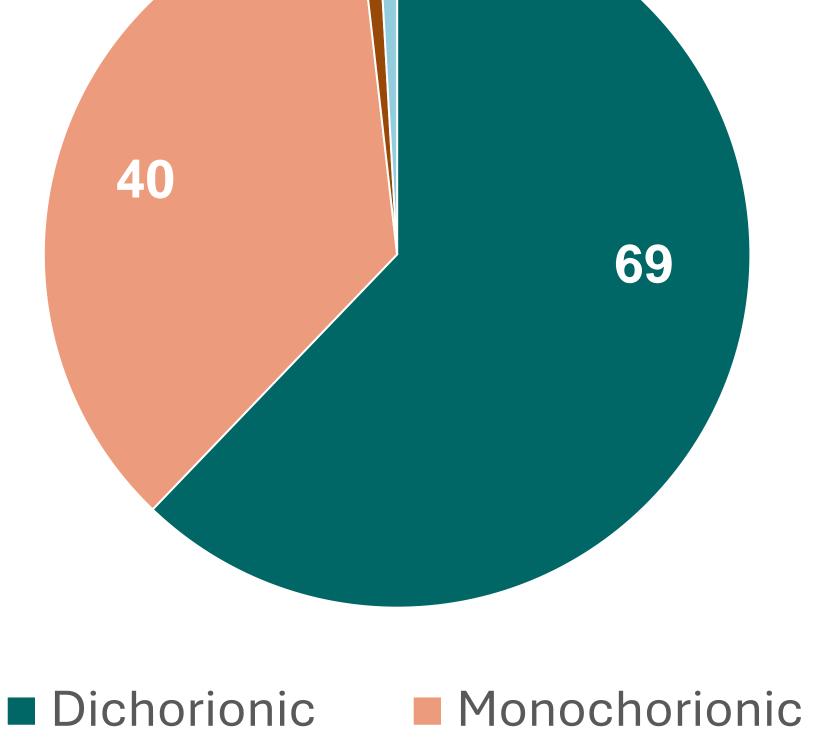
and genetically **diverse** and present **unique** health challenges.

 Innovation: We are currently developing a comprehensive first trimester screening (FTS) program for women booking for maternity care within SWSLHD. This initiative is designed to engage our diverse community, ensuring
 equitable and early access to essential prenatal care.

AIMS

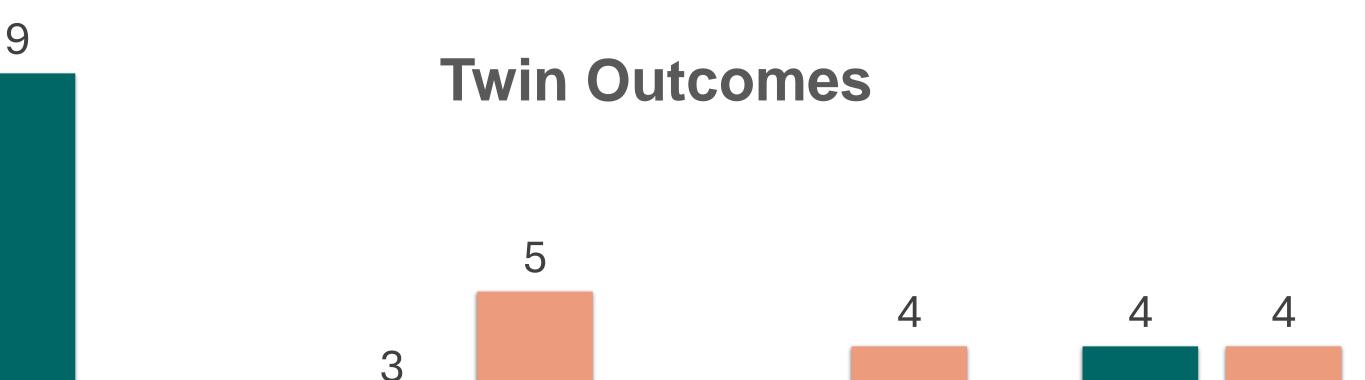
- 1. Screening Efficacy: Evaluating first trimester screening in twin pregnancies to determine chorionicity, complications due to placental sharing, identify complications² such as structural and chromosomal abnormalities and risk of preterm preeclampsia (<37 weeks).
- 2. Identify Gaps: Assess current screening methods to inform and develop innovative research tools aimed at reducing poor

- Chorionicity was defined and clearly reported in all cases.
- Preeclampsia (PE)
 developed in 8
 pregnancies. 5 women
 were on Aspirin. The
 currently available
 prediction model, by The
 Fetal Medicine Foundation,
 only predicted 1 case³.



Chorionicity

Conjoined
 Monoamniotic



outcomes in twin pregnancies.

METHODS

- Twin pregnancies were identified through an audit of all first trimester (11-13⁺⁶ week) screens performed by the obstetric research group in a two-year period from July 2022-July 2024.
- Pregnancies were grouped by **Chorionicity**. The prevalence of adverse outcomes (TTTS, structural,chromosomal abnormalities and preeclampsia) was reported in each group.



Twin to TwinAbnormalitiesHigh riskPreeclampsiaTransfusion

Monochorionic
Dichorionic

 51/111 (46%) of twin pregnancies were identified as likely to be complicated. This includes all (42)monochorionic pregnancies due to shared placental circulation and all (9) high risk dichorionic pregnancies.

CONCLUSION

- **PE mechanism:** in twins is unclear and needs more research.
- Risk Stratification: first trimester
 screening is used for an uploidy risk



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and could be used for early risk stratification for PE with more research.

 Chorionicity identification: is essential for implementing adequate monitoring strategies and interventions to prevent poor outcomes. likely to be complicated at the 11-13⁺⁶ week scan.



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