Clinical Results of Shirodka Cerclage for the Prevention of Preterm Birth – a Retrospective Analysis

Original title: Klinische Ergebnisse der Cerclage nach Shirodkar bezüglich der Prävention der Frühgeburttlichkeit – eine retrospektive Analyse

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Background: In spite of the continuous progress in prenatal care, 1 out of 10 babies is born too early – tendency rising worldwide. As a consequence of the heterogeneous aetiology of preterm birth, there is still no single and efficient interventional therapy. Cerclage is one option for pregnancies with cervical insufficiency, whereas the clinical benefit is discussed controversially.

Methods: We analyzed in a retrospective study with 120 patients the effect of a cerclage intervention regarding pregnancy prolongation. Patients with cervical incompetence and Shirodkar cerclage were compared to those undergoing conservative treatment.

Results: As expected, gestational age at delivery was significantly lower after emergency cerclage (31 weeks) compared to prophylactic (36 weeks) and therapeutic cerclage (35 weeks). Prolongation differs significantly between the prophylactic (18 weeks), therapeutic (14 weeks) and emergency cerclage (10 weeks) groups (Fig. 1). Conservative management achieved 8 weeks prolongation. Of note, particularly emergency cerclage in cases with advanced cervical incompetence resulted in a substantially higher pregnancy prolongation (10 weeks) compared to no intervention (1 week).

Conclusion: The efficiency of cerclage operations has to be assessed in a differentiated manner based on the clinical situation and indication. The clinical benefit depends strongly on proper patient selection.

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