**Tablo 7**. **Tarama stratejilerinin, hiç tarama yapılmama ile karşılaştırıldığında, LGA, preeklampsi ve sezaryen oranları üzerine etkileri (Absolute Risk Reduction ve Number Needed to Screen).**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Hiç Tarama Yapmama | 1999 WHO Kriterlerine Göre Tarama | IADPSG Kriterlerine Göre Tarama |
|  | İnsidans (%)(%95 CI) | İnsidans (%) (%95 CI) | ARR (%) (%95 CI) | NNS(%95 CI) | İnsidans (%) (%95 CI) | ARR (%) (%95 CI) | NNS(%95 CI) |
| **Ana Model** |  |  |  |  |  |  |  |
| LGA Yenidoğan | %9.48 (%8.98-9.98) | 8.95% (8.43–9.41%) | 0.53% (0.37–0.74%) | 189 (134–268) | 8.63% (7.99–9.16%)  | 0.85% (0.54–1.29%)  | 117 (77–185) |
| Preeklampsi | %4.81 (%2.96-6.81) | 4.54% (2.79–6.44%) | 0.27%(0.10–0.45%) | 376(223–1010) | 4.42%(2.70–6.27%) | 0.39%(0.15–0.65%) | 257(154–679) |
| Sezaryen iel Doğum | %19.18 (%9.83-29.15) | 18.93% (9.74–28.85%) | 0.25%(\_0.12 - 0.60%) | 399(165 to \_848) | 18.84%(9.68–28.71%) | 0.34%(\_0.16 - 0.83%) | 296(120 to \_622 |
| **HAPO kriterleri eklenmiş model** |  |  |  |  |  |  |  |
| LGA Yenidoğan | %9.57 | 8.97% (8.74–9.14%) | 0.60%(0.43–0.83%) | 167(120–231) | 8.57%(8.19–8.85%) | 1.00%(0.72–1.38%) | 100(77–185) |
| Preeklampsi | %5.22 | 4.92% (4.79–5.06%) | 0.30%(0.16–0.43%) | 331(232–633) | 4.71%(4.49–4.95%) | 0.51%(0.27–0.73%) | 196(137–374) |
| Sezaryen ile Doğum | %18 | 17.74% (17.4–18.11%) | 0.26%(\_0.11 - 0.60%) | 383(167 to \_944) | 17.63%(17.15– 8.15%) | 0.37%(\_0.15 - 0.85%) | 272(118 to \_669) |

CI: credible interval; ARR: absolute risk reduction (Mutlak risk azalması); NNS: number needed to screen (Taranması gereken olgu sayısı); HAPO: Hyperglycemia and Adverse Pregnancy Outcomes Study; WHO: World Health Organization; IADPSG: International Association of Diabetes in Pregnancy Study Groups; LGA: large for gestational age. (Kaynak 13’ten adapte edilmiştir. Kaynak 13’ten adapte edilmiştir)