**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)