

yacakları süreç konusunda bilgilendirirken zor anlar yaşamaktadır. Obstetrisyenler, fetal anomali ve intrauterin ölü fetüs tanısı alan hastalara ve ailelerine bu süreçte yardımcı olmalı ve gereken desteği sağlamalıdır. Hastalardaki gebelik sonlandırılmasının uzun dönem psikolojik etkilerini araştıran ayrıntılı çalışmalara ihtiyaç vardır.

Anahtar kelimeler: Posttravmatik stres bulguları, gebelik sonlandırılması, fetal anomali, intrauterin ölü fetüs

Ref. No: 97 e-Adres: <http://www.perinataldergi.com/20110191193>

The women's expectation and perception of ultrasound examination during pregnancy: a prospective observational study

Kahraman Ülker, Şenay Sarı

Kafkas University School of Medicine, Department of Obstetrics and Gynecology, Kars

Aim: The aim of the study was to explore the women's expectation and perception of the ultrasound (US) examination in pregnancy.

Methods: A questionnaire containing defined or open-ended questions was distributed to women, who were pregnant or had ever delivered a baby (n=54). The questionnaire contained demographics and 25 questions related to the US examinations during pregnancy. Some questions looked for continuous and others for categorical variables. The data were analyzed by using descriptive and chi-square tests. A p value <0.05 was considered significant.

Results: The demographic data, living standards and the family planning characteristics of the participating women are summarized in Table 1. Most of the women (88%) considered the US examination as mandatory during pregnancy, and proposed that an obstetrician (89%) should perform the US. Most of the women (80%) suggested their partner's attendance in the examination room. US examinations performed at tertiary level were mainly more trusted (50%). Operators that shared and demonstrated the findings were generally preferred (58%). The mean number of required US examinations and the mean examination duration were stated as 7.5 ± 3.2 per pregnancy and 15.7 ± 11.5 minutes, respectively. Majority of the women believed that US was risk-free (43%), however might be detrimental in certain conditions. Only 23% of the women considered that vaginal US was safe during pregnancy. The US was stated to be the paramount scanning method by 41%, the most risk-free scanning method by 25%, and the most practical

and simple method by 21% of the women. Some women (38%) stated that Doppler US examination should be performed in every pregnancy or in case of a physician's order (40%). Seventy-seven percent described the main purpose of the US examination as the reflection of the baby's healthy and 80% defined US as "a method of better assessment of the health of the baby". An examination with a duration longer than expected was perceived as a problem in the baby (36%) or as the examiner's caring attitude (43%). In referrals to another center, most of the women (59%) were anxious about the possibility of a problem in the baby. During their last pregnancy, the participating women had 5.3 ± 3.4 standard US examinations and 1.6 ± 1.2 3D-US examinations. Moreover, 52% believed that 3D-US had better diagnostic accuracy. The majority (69%) think that particularly a good examiner using a good machine could identify all abnormalities of the baby.

Conclusion: The perception and the expectation of the women have differences from the current scientific data and applications. Most women require further detailed information on US examinations.

Key Words: Ultrasound, antenatal diagnosis, perception, attitude, diagnostic services

Ref. No: 98 e-Adres: <http://www.perinataldergi.com/20110191194>

Pregnancy and attention deficit hyperactivity disorder

¹Serdar Ural, ¹Derek Jurus, ²Özgür Deren

¹Department of Obstetrics and Gynecology, Penn State Milton S. Hershey Medical Center, PA, USA, ²Hacettepe University Faculty of Medicine Department of Obstetrics and Gynecology, Ankara

Introduction: Pregnancy outcomes of patients with a previous diagnosis and treatment of attention-deficit hyperactivity disorder (ADHD) to date have not been evaluated as a separate group. In general, the long-term effects of the diagnosis of ADHD or its treatment are unknown. In pregnancy, neither the impact of maternal ADHD diagnosis nor treatment has been evaluated. Recent studies have suggested increased rates of ADHD-like symptoms among offspring of gestations treated with antenatal glucocorticoids (aGC) and those complicated by gestational diabetes (GDM) compounded by low socioeconomic status.

Aim: To determine the occurrence of adverse pregnancy outcomes such as prematurity, low birth weight, neonatal intensive care unit (NICU) admis-