
MOTHER AND CHILD MEDICINE SECTION

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY**188. CERVICAL INCOMPETENCE: THE GAP BETWEEN GUIDELINES AND REALITY**

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Introduction. Cervical incompetence (CI), also referred to as cervical insufficiency, occurs with an incidence of 1.5-2% in pregnancy. This is a major risk factor, being one of the main causes of miscarriages and premature births. International guidelines include recommendations for the diagnosis and management of CI. Sometimes, however, real-life situations prove to us that certain rules are disobeyed in order to give a chance to life.

Aim of the study. The assessment of the gestational age, diagnostic methods and the outcome of the pregnancy in patients with and without cervical cerclage.

Materials and methods. We conducted a retrospective study of 113 patients diagnosed with IIC during 2018-2019 in the Clinical Municipal Hospital Nr.1, Department of Pregnancy Pathology, Chisinau, Republic of Moldova. We performed the assessment of the gestational age, diagnostic methods and the outcome of the pregnancy in patients with and without cervical cerclage. The patients were divided into 2 groups: cases that received a cervical cerclage and those where the cerclage application was not possible, due to contraindications: hemorrhage, vulvovaginitis, big gestational age etc. The obtained results were introduced and systematized through the Microsoft Excel program.

Results. Out of 63 patients, 39 patients (61.9%) were older than 30 years, 19 (30.16%) were 25-30 years old and 5 (7.94%) – <25 years old. 30 patients (47.62%) were multigestant, 19 (30.16%) – secundigestant and 14 (22.22%) – primigestant. Cervical cerclage was applied in 48 cases out of 63 – 76.19%. The elective cerclage was applied in 35 cases out of 48 (72.92%) and the emergency cerclage – in 13 cases (27.08%) out of 48. In 14 cases (29.17%), the cerclage procedure had no complications. From the total of 63 patients, 37 patients (58.73%) delivered at full-term: 28 by vaginal birth and 9 by caesarean section.

Conclusions. (1) The study highlights the incidence of CI in the Republic of Moldova in the period 2016-2018. (2) There is no golden standard for the diagnosis of CI. (3) The appropriate period for the cerclage application is 12-24 weeks of gestation. (4) Although there is no guarantee that the cerclage will prevent the interruption of pregnancy, its application contributes, in most cases, to the extension of the duration of the pregnancy.

Key words: cervical incompetence, cerclage, miscarriage, premature birth.