**Fetalna ehokardiografija u Sveučilišnoj kliničkoj bolnici Mostar**

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**Uvod**: Fetalna ehokardiografija je ultrazvučni pregled koji ima za cilj rano otkrivanje urođenih **srčanih bolesti ploda.** Važnost ovog pregleda dokazuje činjenica da se u najčešće prirođene anomalije ploda ubrajaju anomalije srca i velikih krvnih žila.

Fetalna ehokardiografija se radi između 18-24. tjedna trudnoće te pruža vrlo detaljnu procjenu svih srčanih struktura

Incidencija prirođenih srčanih grešaka u populaciji je 8 do 9 na 1000 živorođene djece. Gotovo 50% zahvaćenih fetusa ima pridružene ekstrakardijalne ili kromosomske anomalije.

Indikacije za fetalnu ehokardiografiju dijelimo na majčine (pozitivna obiteljska anamneza, dijabetes majke, lijekovi u ranoj trudnoći, infekcije u ranoj trudnoći, alkoholizam majke, lupus eritematodes), te stanja od strane fetusa (odstupanja u količini plodove vode, hidrops, aritmije, ekstrakardijalne anomalije, kromosomske aberacije).

**Rezultati:** U Sveučilišnoj kliničkoj bolnici Mostar prva fetalna ehokardiografija je učinjena u siječnju 2021 godine i od tada je pregledano 145 trudnica.

Otkriveno je 9 patoloških nalaza. Dvoje djece je umrlo „in utero“. Tri trudnice su upućene na porod u kardiokirurškom centru.

Kod četvero djece prirođena srčana greška je otkrivena u sklopu sindroma (Down sy, Edwards sy, Potter sy, di George sy).

Velika većina trudnica je došla na pregled zbog sumnje na srčanu grešku od strane ginekologa.

Prema protokolu potrebno je učiniti i UZV pregled djeteta nakon rođena te u SKB Mostar imamo dvoje djece koja po porodu imaju otvoren duktus arteriosus koji će zahtijevati perkutano zatvaranje.

**Zaključak:** Fetalna ehokardiografija je relativno nova metoda koja uz brz, jednostavan, bezbolan i jeftin način može otkriti postojanje srčane greške ploda. Spoznaja da dijete ima srčanu anomaliju dragocjena je za ginekologa, neonatologa, kardiologa, kardiokirurga kao i za same roditelje. Omogućava pažljivo praćenje trudnoće, planiranje samog poroda, kao i liječenje djeteta. Osim toga mogu se intrauterino liječiti aritmije fetusa a u rijetkim svjetskim centrima i intrauterini interventni kardiološki zahvati.

**Klučne riječi:** fetalna, ehokardiografija

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**Introduction:** Fetal echocardiography is an ultrasound examination aimed at early detection of congenital heart diseases of the fetus. The importance of this examination is proven by the fact that anomalies of the heart and large blood vessels are among the most common congenital anomalies.

Fetal echocardiography is performed between 18-24. weeks of pregnancy and provides a very detailed assessment of all cardiac structures

The incidence of congenital heart defects in the population is 8 to 9 per 1000 live births. Almost 50% of affected fetuses have associated extracardiac or chromosomal anomalies.  
Indications for fetal echocardiography are divided into maternal (positive family history, maternal diabetes, medications in early pregnancy, infections in early pregnancy, maternal alcoholism, lupus erythematosus), and conditions of the fetus (deviations in the amount of amniotic fluid, hydrops, arrhythmias, extracardiac anomalies, chromosomal aberrations).

**Results:** In the University Clinical Hospital Mostar, the first fetal echocardiography was performed in January 2021, and since then 145 pregnant women have been examined.  
9 pathological findings were discovered. Two children died "in utero". Three pregnant women were referred for delivery in the cardiac surgery center.  
In four children, a congenital heart defect was detected as part of the syndrome (Down sy, Edwards sy, Potter sy, di George sy).

The vast majority of pregnant women came for an examination due to suspicion of a heart defect by a gynecologist.

According to the protocol, it is necessary to perform an ultrasound examination of the child after birth, and in UCH Mostar we have two children who, after birth, have an open ductus arteriosus that will require percutaneous closure.

**Conclusion:**Fetal echocardiography is a relatively new method that can reveal the existence of fetal heart defects in a fast, simple, painless and inexpensive way. Knowing that a child has a heart anomaly is valuable for gynecologists, neonatologists, cardiologists, cardiac surgeons, as well as for the parents themselves. It enables careful monitoring of pregnancy, planning of the birth itself, as well as treatment of the child. In addition, fetal arrhythmias can be treated intrauterinely, and in rare centers around the world, intrauterine interventional cardiac procedures can also be performed.

**Key words:** fetal echocardiography