

论著

二维超声及彩色多普勒对瘢痕子宫合并前置胎盘植入的诊断及临床分析

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摘要: 目的: 探讨二维超声及彩色多普勒诊断瘢痕子宫患者合并前置胎盘植入的准确性。方法: 41 例曾接受剖宫产的患者本次妊娠28 周后行二维超声及彩色多普勒检查, 探查胎盘与子宫及膀胱之间的特征性声像图表现, 确认有部分型或完全性前置胎盘, 并进一步判断是否有胎盘植入, 对所有病例进行追踪, 以手术所见及病检结果为诊断金标准。结果: 在所有41 例瘢痕子宫合并前置胎盘的患者中, 二维超声及彩色多普勒提示22 例合并前置胎盘植入, 产后经手术和病检确诊20 例, 19 例产前二维超声及彩色多普勒未提示胎盘植入者中, 产后证实有胎盘植入1 例, 敏感性为95.24%, 特异性为94.74%。在所有确诊胎盘植入的病例中, 最常见的二维超声图像为在胎盘实质和基底部分可见无回声腔隙, 以及彩色多普勒在子宫胎盘膀胱之间探及丰富血彩, 均为95.24%。结论: 应用二维超声及彩色多普勒对瘢痕子宫合并前置胎盘植入有较高的敏感性和特异性, 二者联合基本可以明确诊断。

关键词: 前置胎盘植入 二维超声 彩色多普勒 瘢痕子宫

Diagnosis of placenta previa accreta by two dimensional ultrasonography and color doppler in patients with cesarean section

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Abstract: Objective: To determine the accuracy of two dimensional sonography and color doppler in diagnosing placenta previa accreta in patients with previous cesarean section.

Methods: Forty-one patients with previous cesarean sections were confirmed to have partial or total placenta previa in the current pregnancy and were given ultrasound examinations after the 28th week of gestation. Specific ultrasound features of the placenta and its interphase with the uterus and the bladder for placenta accreta were checked by two-dimensional ultrasonography and color Doppler. All the patients were traced until delivery. The golden standard in diagnosis was the intraoperative finding and the pathologic exam.

Results: Twenty-two patients had ultrasonographic evidence of placenta previa, 20 of which were later confirmed placenta previa accreta intraoperatively. Nineteen patients had no ultrasound evidence of placenta previa, and 1 of which was later confirmed placenta previa accreta. The sensitivity and specificity of antenatal ultrasound diagnosis of placenta previa accreta were 95.24% and 94.74% respectively. The most prominent feature to suggest placenta accreta in twodimensional sonography was the presence of multiple lakes that represented dilated vessels extending from the placenta through the myometrium. The most prominent color Doppler feature was the presence of interphase hypervascularity with abnormal vessels linking the placenta to the bladder, and the rate was 95.24%. **Conclusion:** Placenta previa accreta can be diagnosed made with a thorough two dimensional ultrasonographic and color Doppler examination in patients with previous cesarean scar and placenta previa.

Keywords: placenta previa accreta two dimensional ultrasonography color doppler scarring uterus

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