

Prenatal Diagnosis ameliorate prognosis of  
congenital diaphragmatic hernia.

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Prenatal diagnosis of congenital diaphragmatic hernia can obtained reliably by maternal ultrasonography. During the last six years (1988-1993) we observed 49 cases (22 female and 25 male) of congenital diaphragmatic hernia (CDH) - 39 (79%) were left sided CDH while 10 (21%) right sided. In 22 cases (45%) the diagnosis was made during fetal life between the 23th and the 37th weeks of gestation. Polyhydramnios occurred in 9 (41%) of these fetuses. All the prenatal diagnosis underwent to a planned delivery at 38th weeks of gestation, immediate resuscitation and intensive care. Risk's parameters were evaluated in all cases with prenatal ultrasonography, neonatal x Ray and blood gas analysis. Overall mortality rate was 55% (27 cases), 59% (13cases) in prenatal group (group I) and 51% (14 cases) in the group without prenatal diagnosis (group II). Risk's factors in group I are higer if compared with group II and we conclude that: 1) group I is a highly selected and severely affected group, 2) prenatal diagnosis and immediate resuscitation may ameliorate prognosis of CDH despite the apparently similar mortality rate.