

## Eastern Virginia Medical School Department of Obstetrics and Gynecology

Division of Maternal Fetal Medicine  
Hofheimer Hall, 825 Fairfax Ave. Suite 310 Norfolk, VA 23507  
Phone (757) 446-7900 Fax (757) 625-5309



### Multifetal Pregnancy Reduction

The overwhelming success achieved by infertility experts over the past 15 years, has been accompanied by an increase in the number of multiple gestation pregnancies. The human uterus is suited to carry one fetus at a time; the risk of pregnancy complication is directly proportional to the number of fetuses in each pregnancy. Pregnancy outcome is quite dependent on the gestational age at the time of birth. When fetuses are born several weeks before term, the chance of neonatal death and irreversible damage is increased. **Multifetal pregnancy reduction** is a procedure that reduces the pregnancy to a smaller number of fetuses, thereby increasing the chance of delivering healthy babies.

#### Terminology

Fetal reduction is a procedure offered at the Division of Maternal-Fetal Medicine at Eastern Virginia Medical School to families carrying multiple pregnancies. When the procedure is performed to reduce or eliminate a fetus already identified with a birth defect or chromosomal abnormality, the term **selective reduction** is used. The term **multifetal pregnancy reduction** is used when families decide to reduce an apparently normal fetus(es) in order to increase the chance of survival of other fetuses of the same pregnancy.

#### Pregnancy Counseling

The initial step for these procedures is a comprehensive counseling session scheduled before the procedure. In this session, the physician discusses the specific risks associated with your pregnancy, based on many factors including the number of fetuses that you are carrying, your age, any medical condition that you may have and your prior obstetrical history. The specific risks of the procedure, based on the information available in the literature, will be reviewed. You are encouraged to express your feelings and concerns during this session and to report your full understanding of all the implications involved in your decision. Based on all the information presented to you, you will then decide whether or not to undergo the procedure. Making this decision is often difficult and painstaking. Take your time and request more information if you feel that this will help you decide.

## Procedure

Multifetal pregnancy reduction is an outpatient procedure. It is commonly performed between 10 and 12 weeks. Waiting until 10 weeks allows for natural reduction to occur and provides a chance to identify subtle signs of fetal abnormalities.

An ultrasound is performed to evaluate the uterus, placentas and fetuses. If all the fetuses appear normal, the most technically accessible fetus(es) is/are targeted for reduction. At EVMS, all fetal reductions are performed by the transabdominal approach (not through the vagina).

The procedure is similar to an amniocentesis: a needle is introduced through your abdomen (after injecting a local anesthetic) and then into the targeted pregnancy. Potassium Chloride is then injected to stop fetal heart motion. This procedure is repeated for each fetus to be reduced and is usually performed through a separate needle insertion.

Most women report minimal discomfort and cramping during and immediately following the procedure. The procedure takes about 15 minutes to set-up and on average less than 3-5 minutes to complete. In general you should have minimal or no symptoms after the procedure. An ultrasound is repeated one hour after the procedure for confirmation of viability in the remaining fetuses.

You are then encouraged to refrain from any exercise or strenuous activity for 24 hours following the procedure. If you experience any bleeding, leakage of fluid or passage of tissue from your vagina, you should report this to your obstetrician immediately. In the majority of cases, reduced fetuses are retained within the uterus.

Selective Reduction is performed in a similar fashion to multifetal pregnancy reduction. The procedure should be scheduled after appropriate counseling and as soon as a diagnosis of a major fetal abnormality is performed. The risk of this procedure is greater than multifetal pregnancy reduction due to the more advanced gestational age than is used for multifetal pregnancy reduction.

## Check List

The following check list will ensure that all appropriate steps are performed:

1. Have an ultrasound performed at your obstetrician's office about 48-72 hours before the scheduled procedure.
2. Obtain a copy of your prenatal record including your blood type from your obstetrician's office before travel. Bring this copy with you.
3. Call our business office at (757) 446-7920 to provide insurance information. Our business office will obtain pre-authorization for the scheduled procedure from your insurance company. This procedure is covered by most insurance companies.
4. Start antibiotic prophylaxis as prescribed the night prior to the scheduled procedure.
5. Make arrangements to rest after the procedure for 24 hours.
6. Schedule a follow-up ultrasound with your obstetrician about a week after the procedure is completed.

## Directions to E.V.M.S. in Norfolk

### FROM NORTH/WEST:

From I-64 EAST go to I-264 WEST to Norfolk.

Exit on **Waterside Dr.**, which becomes **Boush St.** Turn left on **Brambleton Ave.** Then turn right on **Colley Ave.** At the 2<sup>nd</sup> traffic light, make a left turn at **Olney Rd.** and follow this road into the medical complex (It curves to the left). We are located in the Hofheimer Hall building (red brick) with the sign "E.V.M.S." on the top. Parking is available adjacent to the building (on the left)

From **I-44 WEST** follow directions to **I-264 WEST** towards Norfolk and then follow the same directions as above.

### FROM SOUTH/EAST:

From **I-64 WEST** go to **I-464 NORTH** to Norfolk and the Berkeley Bridge. Exit on **Waterside Dr.** and follow the directions as above.