



EP 10.28 A decade of experience with Vaso-occlusion techniques for selective fetal reduction in monochorionic twin pregnancies

Vatsla Dadhwal, K Aparna Sharma, Anubhuti Rana, Deepti Bhagat, Tanisha Gupta

Department of Obstetrics and Gynaecology, All India Institute of Medical Sciences, New Delhi, India



Introduction: his study evaluates the perinatal outcome with use of various vaso-occlusive techniques for selective fetal reduction (SFR) in monochorionic twin pregnancies (MC): radiofrequency ablation (RFA), bipolar cord coagulation (BCC), interstitial laser ablation (ILA) and microwave ablation (MWA).

Methodology This ambispective observational cohort study was conducted at a tertiary care centre in India from 2016 to 2025. All complicated monochorionic twins that underwent fetal reduction using either RFA, BCC, ILA, or MWA were included. The assessed outcomes were pregnancy loss, preterm prelabour rupture of membranes (PPROM), preterm labour, live births, and the overall take-home baby rate.

Results

Parameter	RFA (n=123)	ILA (n=12)	BPCC (n=5*)	MWA (n=3)	Total (n=143)
Procedures successful	123/123	12/12	4/5	3/3	142/143
Ongoing pregnancies	10	–	–	3	13
Patients analyzed	113	12	4	–	130
Take-home baby rate	78.76% (89/113)	50% (6/12)	75% (3/4)	–	75.38% (98/130)
Miscarriage	10.61% (12/113)	8.33% (1/12)	0	–	10% (13/130)
Stillbirth	2.65% (3/113)	41.66% (5/12)	25% (1/4)	–	6.92% (9/130)
Hypoxic brain injury	2	0	0	–	2
Preterm delivery <34 wks	25.66% (29/113)	41.66% (5/12)	25% (1/4)	–	26.92% (35/130)
Mean GA at delivery (weeks)	35	34	35	–	–

One BPCC case was unsuccessful and excluded from analyzed outcomes

Conclusion: SFR in MC pregnancies resulted in favourable outcomes. The availability and operator experience with RFA made it the most frequently used procedure in the present series