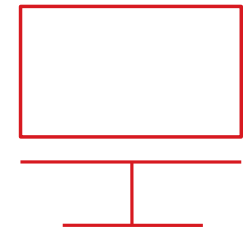


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ISUOG 2026
ePoster

1 OBJECTIVES

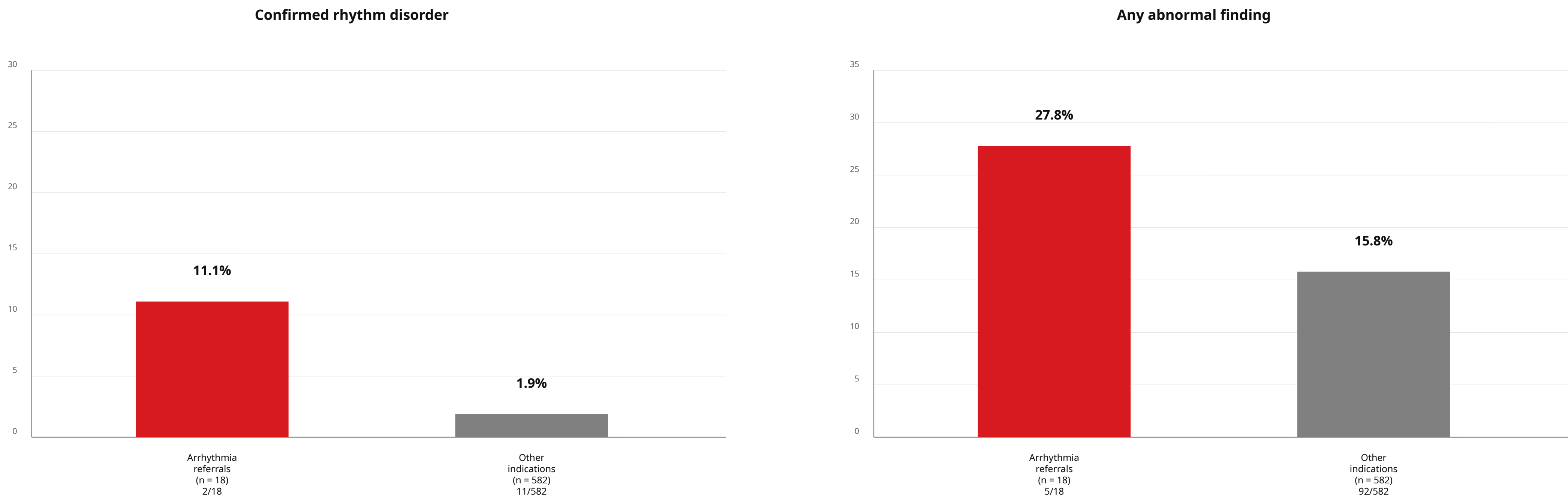
To characterise the diagnostic yield of consultative fetal echocardiography in pregnancies referred for suspected fetal arrhythmia and to compare the prevalence of confirmed rhythm abnormalities with referrals for other indications.

2 METHODS

- **Retrospective cohort:** 600 consecutive consultative fetal echocardiograms from a tertiary fetal cardiology clinic.
- **Referral indication:** suspected fetal arrhythmia (n = 18); all other indications used as comparator (n = 582).
- **Confirmed arrhythmia:** final diagnosis including rhythm disorder and/or arrhythmia-related keywords: tachycardia, bradycardia, block, SVT, etc.
- **Primary outcome:** confirmed arrhythmia on echocardiography.
- **Secondary outcome:** any abnormal finding in the final report: structural/functional cardiac or major extracardiac anomaly.
- **Analysis:** proportions with 95% CIs and odds ratio for arrhythmia diagnosis, using other indications as reference.
- **Gestational age:** median 31.5 weeks in arrhythmia referrals vs 27 weeks in other indications.

3 RESULTS

Diagnostic yield in arrhythmia referrals vs other indications



Overall cohort

97/600 abnormal findings (16.2%).

Rhythm disorder

13/600 specific rhythm diagnoses (2.2%).

Effect estimate

OR 6.5 (95% CI 1.3-31.7) for confirmed arrhythmia.

Key results

Outcome	Arrhythmia referrals	Other indications	Effect / context
Confirmed arrhythmia	2/18 (11.1%)	11/582 (1.9%)	OR 6.5 (95% CI 1.3-31.7)
Any abnormal finding	5/18 (27.8%)	92/582 (15.8%)	Structural/functional cardiac or major extracardiac
Median gestational age	31.5 weeks	27 weeks	Later referral among suspected arrhythmia cases

4 CONCLUSIONS

- Suspected fetal arrhythmia was uncommon **as a referral indication (18/600; 3.0%)**.
- Confirmed arrhythmia occurred in **11.1% of arrhythmia referrals** versus 1.9% among other indications.
- The odds of a specific rhythm diagnosis were **substantially higher** for arrhythmia referrals (OR 6.5, 95% CI 1.3-31.7).
- Only about **one in nine** arrhythmia referrals resulted in a specific arrhythmia diagnosis.
- **Over one quarter** had any abnormal echocardiographic finding, supporting targeted referral to specialised fetal cardiology centres.

TAKE-HOME MESSAGE

Suspected fetal arrhythmia has a relatively high targeted yield for rhythm diagnosis, but most referrals do not confirm a specific arrhythmia; comprehensive echocardiographic assessment remains clinically useful.