Intrauterine Growth References for Turkish Infants

Mahmood Dhahir Al-Mendalawi

anmood Dhanir Al-Mendalawi

Department of Paediatrics, University of Baghdad Al-Kindy College of Medicine, Baghdad, Iraq

In the May 2024 issue of your prestigious journal, Atıcı et al¹ formulated intrauterine growth charts (IGC) based on various anthropometric measurements for Turkish infants. The following limitation guards the clinical applicability of the formulated IGC. The evaluation of twin pregnancy utilizing singleton growth charts (SGC) is a matter of concern. Indeed, SGC could categorize approximately one-third of twins, both postnatally and prenatally, as small-for-gestational age (SGA). Importantly, infants categorized as SGA based on the twin-specific growth chart (TSGC), but not those categorized as SGA based on the SGC, have a substantially accelerated likelihood of poor neonatal outcomes in comparison with infants categorized as appropriate-for-gestational age.² The utilization of TSGC could decrease the rate of twin fetuses with suspicious intrauterine growth restriction (IGR) by approximately 8-fold and could result in IGR diagnosis which is correlated more faithfully with poor perinatal consequences than IGR diagnosis relied upon SGC, without insulting the finding out of twin fetuses at susceptibility for poor outcomes induced by utero-placental inadequacy. Moreover, SGA twins have less susceptibility to exhibit worse perinatal outcomes or to have utero-placental insufficiency evidence than SGA singletons.³ As a result, using TSGC is considered reasonable and preferred over SGC to gauge the growth of twin fetuses and predict neonatal morbidity and mortality.3 In Türkiye, the accessible data showed that the reported mean multiple pregnancies and mean twin birth rates were 1.9% and 1.7%, respectively. Most multiple pregnancies (80%-97.3%) were found to be twin pregnancies. There were high neonatal and perinatal mortality rates (40-98/1000 and 58-156/1000, respectively).4 Therefore, the use of IGC constructed by Atıcı et al¹ in clinical settings and research to assess twin pregnancies would be misleading. The formulation of twin-specific IGC for Turkish infants, similar to those designed for certain populations⁵⁻⁶ is solicited as it is considered a guide for neonatologists to identify high-risk fetuses and neonates who might demand specialized health care.

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Corresponding author:
Mahmood Dhahir Al-Mendalawi
Madlmendalawi@yahoo.com
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