

JUNE 2019 ■ Volume 220, Number 6

SPECIAL REPORT

511 Evidence-based guidelines for the management of abnormally invasive placenta: recommendations from the International Society for Abnormally Invasive Placenta



Sally L. Collins; Bahrin Alemdar; Heleen J. van Beekhuizen; Charline Bertholdt; Thorsten Braun; Pavel Calda; Pierre Delorme; Johannes J. Duvkot; Lene Gronbeck; Gilles Kayem; Jens Langhoff-Roos; Louis Marcellin; Pasquale Martinelli; Olivier Morel; Mina Mhallem; Maddalena Morlando; Lone N. Noergaard; Andreas Nonnenmacher; Petra Pateisky; Philippe Petit; Marcus J. Rijken; Mariola Ropacka-Lesiak; Dietmar Schlembach; Loïc Sentilhes; Vedran Stefanovic; Gita Strindfors; Boris Tutschek; Siri Vangen; Alexander Weichert; Katharina Weizsäcker; Frederic Chantraine; on behalf of the International Society for Abnormally Invasive Placenta (IS-AIP)

An evidence-based guideline from the International Society for Abnormally Invasive Placenta (IS-AIP) for antenatal and intrapartum management of AIP.

GIANTS IN OBSTETRICS AND GYNECOLOGY

527 Giants in Obstetrics and Gynecology Series: A profile of James M. Roberts, MD

Roberto Romero

EXPERT REVIEWS

537 Expanding the indications for cell-free DNA in the maternal circulation: clinical considerations and implications

Gian Carlo Di Renzo; José Luis Bartha; Catia M. Bilardo

Expanding maternal cell-free DNA to other indications, such as microdeletions, duplications, and large chromosome imbalances, does not appear justified at this point.

(continued)

AJOG CITATION CLASSICS

Laparoscopy for PID: 1975

In "Effect of acute pelvic inflammatory disease on fertility" (March 1, 1975), Lars Weström, MD, Department of Obstetrics and Gynecology, University Hospital, Lund, Sweden, reviewed the status of 415 women treated 9.5 years earlier for laparoscopically verified PID. He found that 88 (21.2%) were involuntarily childless after having had one or more pelvic infections and 18.1% reported chronic abdominal pain. Among 100 healthy control subjects, only 3 were involuntarily childless and 5 had chronic abdominal pain.

"Laparoscopically," the author notes, "the worse the inflammatory changes, the greater the risk of infertility. . . . The very high pregnancy rate after infections with only mild inflammatory changes of the tubes (97.4 per cent) stresses the importance of early diagnosis and treatment. . . . It is remarkable how little is known about the etiology of tubal infections. Besides being an invaluable diagnostic aid, laparoscopy offers opportunity for research in this field."

The article can be accessed at ajog.org via the Collections tab, then AJOG Citation Classics.

REFERENCE

Weström L. Effect of acute pelvic inflammatory disease on fertility. *Am J Obstet Gynecol* 1975;121:707-13.

Official journal of:



Society for Maternal-Fetal Medicine



Infectious Diseases Society for Obstetrics and Gynecology

The *American Journal of Obstetrics & Gynecology* (ISSN 0002-9378) is published monthly by Elsevier Inc., 230 Park Avenue, Suite 800, New York, NY 10169. Periodicals postage paid at New York, NY, and additional mailing offices. POSTMASTER: Send address changes to Elsevier, Journal Returns, 1799 Highway 50 East, Linn, MO 65051.



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SYSTEMATIC REVIEWS

543 Cerclage for women with twin pregnancies: a systematic review and metaanalysis

Chunbo Li; Jie Shen; Keqin Hua

Cerclage is effective and safe for women with twin pregnancies.

CLINICAL OPINION

558 Academic physicians as factory workers: identifying and preventing alienation of labor

Frank A. Chervenak; Laurence B. McCullough

Leaders in academic obstetrics and gynecology should work with their colleagues to identify and prevent what Karl Marx called alienation of labor.

VIEWPOINT

562 The One Step approach for diagnosing gestational diabetes is associated with better perinatal outcomes than the Two Step approach: evidence of randomized clinical trials

Vincenzo Berghella; Claudia Caissutti; Gabriele Saccone; Adeeb Khalifeh

The One Step approach for diagnosing gestational diabetes is associated with better perinatal outcomes than the Two Step approach.

ORIGINAL RESEARCH

Articles abstracted in this issue appear in full at ajog.org

GYNECOLOGY

565 Cluster randomized trial of a patient-centered contraceptive decision support tool, *My Birth Control*

Christine Dehlendorf; Judith Fitzpatrick; Edith Fox; Kelsey Holt; Eric Vittinghoff; Reiley Reed; Maria Paula Campora; Abby Sokoloff; Miriam Kuppermann

My Birth Control, a decision support tool designed to enhance patient-centered counseling, had no effect on contraceptive continuation but improved patient knowledge and informed decision-making.

567 Dietary patterns and outcomes of assisted reproduction



Audrey J. Gaskins; Feiby L. Nassan; Yu-Han Chiu; Mariel Arvizu; Paige L. Williams; Myra G. Keller; Irene Souter; Russ Hauser; Jorge E. Chavarro; for the EARTH Study Team

Women prioritizing supplemental folic acid, vitamin B12, vitamin D, low pesticide fruits and vegetables, whole grains, seafood, dairy, and soy and limiting high pesticide fruits and vegetables have higher likelihood of assisted reproductive technologies success.

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ORIGINAL RESEARCH (continued from page 2A)**569** The impact of menstrual symptoms on everyday life: a survey among 42,879 women

Mark E. Schoep; Theodoor E. Nieboer; Moniek van der Zanden; Didi D. M. Braat; Annemiek W. Nap

Menstrual symptoms are widespread among the general population; 1 in 3 women quit daily activities because of menstrual complaints.

571 Development and validation of a risk-calculator for adverse perioperative outcomes for women with ovarian cancer

Stephanie Cham; Ling Chen; Caryn M. St. Clair; June Y. Hou; Ana I. Tergas; Alexander Melamed; Cande V. Ananth; Alfred I. Neugut; Dawn L. Hershman; Jason D. Wright

A nomogram developed and validated from a nationwide database may predict perioperative adverse outcomes in ovarian cancer debulking.

573 Increased risk of osteoporosis with hysterectomy: A longitudinal follow-up study using a national sample cohort

Hyo Geun Choi; Yoon Jung Jung; Suk Woo Lee

Hysterectomy is associated with an increased risk of osteoporosis regardless of bilateral oophorectomy status in middle-aged women.

575 Life-threatening complications among women with severe ovarian hyperstimulation syndrome

Jessica Selter; Timothy Wen; Katherine L. Palmerola; Alexander M. Friedman; Zev Williams; Eric. J. Forman

Life-threatening complications are rare among women with severe ovarian hyperstimulation syndrome; however, risk is highest among women with medical comorbidities.

578 Waist circumference in relation to outcomes of infertility treatment with assisted reproductive technologies

Ming-Chieh Li; Lidia Mínguez-Alarcón; Mariel Arvizu; Yu-Han Chiu; Jennifer B. Ford; Paige L. Williams; Jill Attaman; Russ Hauser; Jorge E. Chavarro; for the EARTH Study Team

Waist circumference is inversely related to live birth rates in infertility treatment with assisted reproductive technology independently of body mass index.

OBSTETRICS**580** Aspirin delays the development of preeclampsia

David Wright; Kypros H. Nicolaides

Prophylactic use of aspirin may reduce the risk of both preterm and term preeclampsia by delaying the gestational age at delivery with the disease.

ORIGINAL RESEARCH (continued)

582 Severe cardiovascular morbidity in women with hypertensive diseases during delivery hospitalization

Christina M. Ackerman; Marissa H. Platner; Erica S. Spatz; Jessica L. Illuzzi; Xiao Xu; Katherine H. Campbell; Graeme N. Smith; Michael J. Paidas; Heather S. Lipkind

Women with hypertensive disorders of pregnancy have significantly increased odds for cardiovascular morbidity during delivery hospitalization; therefore, detection of cardiovascular symptoms to reduce morbidity is critical.

584 Prediction of imminent preeclampsia at 35–37 weeks gestation

Anca Ciobanu; Alan Wright; Anca Panaitescu; Argyro Syngelaki; David Wright; Kypros H. Nicolaides

Combination of maternal factors, placental growth factor, soluble fms-like tyrosine kinase-1, and mean arterial pressure is superior to placental growth factor alone or soluble fms-like tyrosine kinase-1/placental growth factor ratio in the prediction of imminent delivery with preeclampsia.

588 Influence of periconception smoking behavior on birth defect risk

Madeline F. Perry; Helen Mulcahy; Emily A. DeFranco

Smoking during the few months before conception, even with cessation in the first trimester, is associated with a risk of fetal malformation.

590 Induction of labor at 39 weeks of gestation versus expectant management for low-risk nulliparous women: a cost-effectiveness analysis

Alyssa R. Hersh; Ashley E. Skeith; James A. Sargent; Aaron B. Caughey

Induction of labor at 39 weeks of gestation is marginally cost-effective for low-risk nulliparous women compared with expectant management.

592 Factors that affect ultrasound-determined labor progress in women undergoing induction of labor

Piya Chaemsaitong; Angel H. W. Kwan; Wing Ting Tse; Wen Teng Lim; Winnie W. Y. Chan; Ka Chun Chong; Tak Yeung Leung; Liona C. Poon

Parity, methods of labor induction, epidural anesthesia, and obesity affect labor progress, as determined objectively by serial transperineal ultrasonographic assessment of fetal head descent.

594 Vaginal *Ureaplasma parvum* serovars and spontaneous preterm birth

Judith Rittenschöber-Böhm; Thomas Waldhoer; Stefan M. Schulz; Birgit Pimpel; Katharina Goeral; David C. Kasper; Armin Witt; Angelika Berger

Vaginal *Ureaplasma parvum* serovar 3 colonization is associated with an increased risk of spontaneous preterm birth at early gestation, particularly when combined with bacterial vaginosis.

596 Immune tolerance attenuates gut dysbiosis, dysregulated uterine gene expression and high-fat diet potentiated preterm birth in mice

Clarence R. Manuel; Mariam S. Latuga; Charles R. Ashby Jr; Sandra E. Reznik
Endotoxin priming partially reverses gut dysbiosis, up-regulation of prooxidant and proinflammatory uterine genes, and increased risk of preterm birth in high-fat diet mice.

(continued)

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*(continued)**(continued)***IMAGES IN OBSTETRICS AND GYNECOLOGY****598 Rare lesion in the uterine cervix with irregular vaginal bleeding**

Qian-Nan Jia; Kai Fang; Yue-Hua Liu

A 27-year-old woman presented with a cystic and solid occupying lesion on the posterior lip of the uterine cervix.

600 Complete molar pregnancy coexisting with a normal fetus in the third trimester

Alexandra Jade Loza; Yu Ming Victor Fang

Ultrasound and gross images of a normal pregnancy coexisting with a complete molar pregnancy in the third trimester are presented.

RESEARCH LETTER**602 Improving medication error identification with an inpatient maternal-fetal medicine pharmacist**

Joshua I. Rosenbloom; Bethany A. Sabol; Carla Chung; George A. Macones; Roxane M. Rampersad; Alison G. Cahill; Emily Cooke

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610 Letter to the editor in response to: Evidence in support of the international association of diabetes in pregnancy study groups' criteria for diagnosing gestational diabetes worldwide in 2019

Eimer G. O'Malley; Ciara M. E. Reynolds; Michael J. Turner

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Moshe Hod; Anil Kapur; H. David McIntyre; For the FIGO Working Group on Hyperglycemia in Pregnancy and the FIGO Pregnancy and Prevention of early NCD Committee

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- 612** Can in utero fetal pacing cause cardiac complications?
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CORRECTIONS

- 597** September 2018 (vol. 219, no. 3, page 301.e10)
Acknowledgments are reworded in an Original Research article published in September 2018.
- 597** Supplement to January 2019 (vol. 220, no. 1, page S549)
A misspelled coauthor's name is corrected in an abstract for the program of the annual meeting of the Society for Maternal–Fetal Medicine as published in the supplement to the January 2019 issue of the Journal.

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- 15A** Classified advertising