THE ULTRASOUND APPEARANCE OF DECIDUA BASALIS IN EARLY PREGNANCY LOSS VERSUS VIABLE NORMAL PREGNANCY

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Objective: To compare the ultrasound appearance of the decidua basalis in normal pregnancy and early pregnancy loss

Method and material: From a perinatal database, 110 patients who miscarried clinically at less than 13 weeks gestation and 105 who had uncomplicated term pregnancies were identified. The thickness and the echogenicity of the decidua basalis layer were compared between the 119 scans from the former group and 157 scans from the latter.

Results: In patients with normal pregnancy outcome, the decidua basalis layer reached a maximum thickness at around 6 weeks gestation. It gradually decreased in thickness to unidentifiable at 10 weeks’ gestation. In patients with early pregnancy loss, the decidua basalis layer was relatively thinner from 6 weeks onwards. Embryonic demise was associated with a change of echogenicity of the decidua basalis layer, which soon became disorganised and difficult to be recognized. In pregnancy with an empty sac, the thickness and echogenicity of the decidua basalis layer was better preserved with time.

Conclusion: In early pregnancy loss, the development of the decidua basalis layer appears to be defective compared with normal pregnancy.