

**A RANDOMIZED CONTROLLED TRIAL  
COMPARING SURGICAL EVACUATION OF  
PREGNANCY WITH OR WITHOUT  
ULTRASOUND GUIDANCY**

*Thesis*

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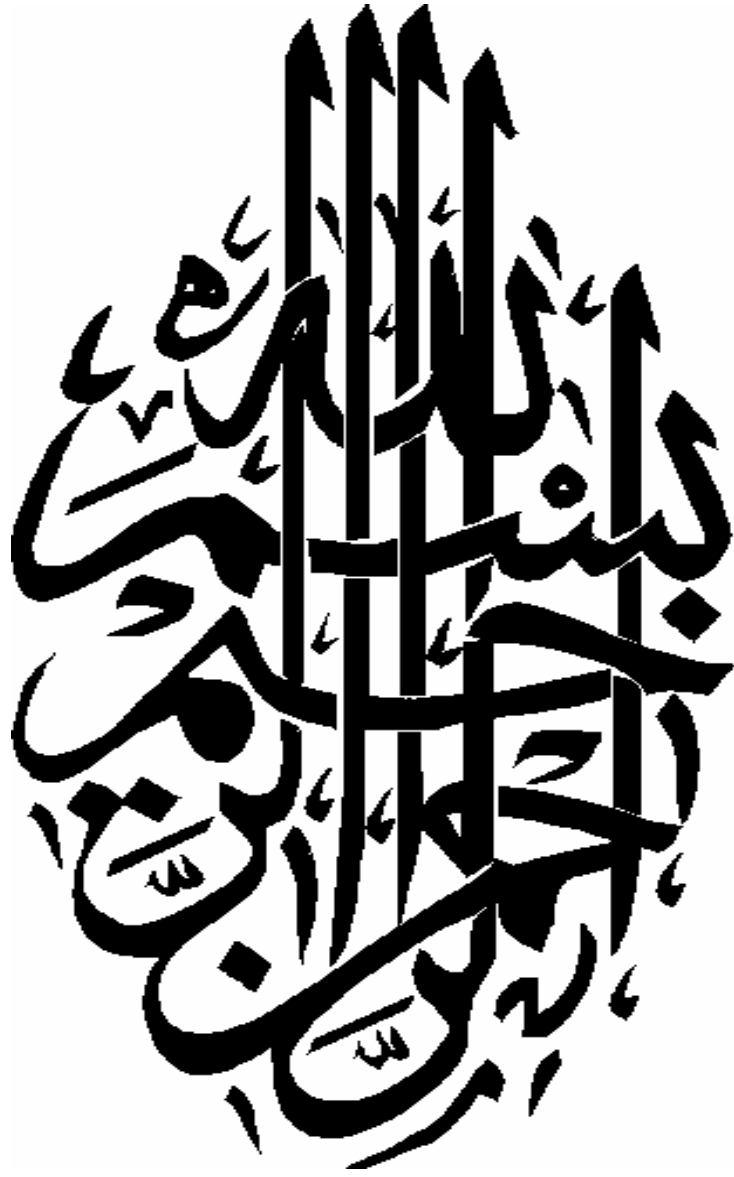
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سُبْحَانَكَ لَا عِلْمَ لَنَا إِلَّا مَا عَلَّمْتَنَا إِنَّكَ أَنْتَ الْعَلِيمُ  
الْحَكِيمُ

صدق الله العظيم (سورة البقرة آية 32)

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## **Abstract**

Approximately one in four women will experience a miscarriage during her lifetime. For more than 50 years, the standard management of early pregnancy failure has been a dilatation and curettage (D&C).

Typically, the procedure is performed in an operating room, which significantly increases cost. There is little objective information in this literature to prove that a D&C for all patients will lower morbidity or improve emotional well being. Treatment options include expectant management D&C, and medical management with misoprostol.

This study supports that with use of ultrasound in surgical evacuation in first trimester abortion showed significance in less bleeding intraoperative & less perforation rate, less procedure time & less post operative bleeding and that the use of ultrasound is the real important step in performing surgical evacuation, but the study didn't imply to the importance or difference in using ultrasound through the whole procedure or only at the beginning and end of procedure to confirm empty uterus.

Key Word: Miscarriage- Ultrasound- Obstetrics -Gynecology

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# *Introduction*

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## **INTRODUCTION**

Ultrasound is a commonly performed investigation in the first trimester of pregnancy to confirm the pregnancy location, viability, gestational age.

And also to diagnose all types of miscarriage to manage. Assessing the presence of the fetal heart to diagnose a missed abortion or incomplete miscarriage is an important benefit of ultrasound to manage early pregnancy loss.

Other ultrasound findings that could be associated with subsequent findings could be associated with subsequent miscarriage include slower embryonic heart rate and abnormal uterine artery doppler.

The presence of a poor obstetric history is reflected in the doppler velocimetry markers as increased uterine artery resistance during the first trimester of pregnancy.

The diagnosis of miscarriage is made in at least 10-20% of cases in the first trimester; with the help of ultrasound also managing miscarriage is more safe & less complications.



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# *Aim of the Work*

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