IS-103  Awareness of Clients with a Prior Prenatal Genetic Diagnosis of Duchenne Muscular Dystrophy (DMD) about Pre-implantation Genetic Diagnosis (PGD)

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[Objective] We surveyed clients with a prior genetic diagnoses of DMD regarding the conventional fetal diagnosis and PGD in terms of their bioethical implications. [Methods] A questionnaire was sent to 134 of 142 clients who had been given a genetic diagnosis of DMD between 1987 and 1999 at our institution. We analyzed the responses of 73 responders. [Results] Of the responders, 40% wanted to have another diagnosis for their next pregnancies, 8% agreed that a fetal diagnosis violates the dignity of the fetus, while 50% disagreed with this and 42% were undecided. Sixty percent disagreed with the idea that a fetal diagnosis eliminates the disabled people from society, while 11% agreed and 34% were undecided. If PGD becomes available in Japan, 18% said want to use it, 23% did not and 42% did not want another pregnancy. Regarding their preference between conventional chorionic villus sampling or amniocentesis and PGD, 27% preferred conventional, 24% preferred PGD and 48% were undecided. A total of 54% of the responders wanted to decide themselves whether to accept PGD while only 10% wanted the decision to be made by either the hospital IRB, an academic society or governmental board. [Conclusion] The responders largely accepted a conventional fetal diagnosis, and were very careful about whether to have PGD testing performed for their next pregnancy.

IS-104  Study on the Energy Metabolism for Pregnant Women in Shanghai

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Objectives: To learn the energy metabolism of pregnant women so as to provide the scientific basis for nutrition instruction for women during pregnancy and to decrease the incidence of gestational diabetes and over-weight babies. Methods: Indirect measurement of energy expenditure was used for 14 items of daily activities by the instrument of sensor medics 2900 and quinont 65. 33 pregnant women were interviewed for 24-hour nutritional intake and activity schedule. Results: (1) The energy expenditure of 14 items was similar to the reference value. (2) The average daily energy expenditure was 2054.6 Kcal which lower than RDA of non-pregnant women. (3) The average energy intake was 2719.3 Kcal with the averages for women in second and third trimester were 3227.5 Kcal and 3062.5 Kcal, respectively, which were higher than that of RDA standards. (4) The nutrient intake was imbalanced with the protein intake higher than RDA and iron, zinc, vitamin A and B1 lower than RDA. Conclusions: Over-supplement of energy was the common problem facing the pregnant women in big cities. Therefore, it is important to modify (decrease) RDA standards and to pay attention to the health education on nutrition during pregnancy.

IS-105  Study on the Factors Influencing Macrosomia

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Objectives: The incidence of macrosomia in Shanghai was increased 50% in recent years. The purpose of the study was to learn the related factors of macrosomia and provide scientific basis for the control of the incidence of macrosomia. Methods: A retrospective method was used to investigate 137 macrosomia babies and 135 controls. Results: Family history of macrosomia, maternal and paternal high BMIs, over-intake of food during pregnancy and abnormal maternal-child chart were the risk factors of macrosomia. Conclusions: It will be helpful to control the incidence of macrosomia if we take the measures such as screening for the risk population, controlling the maternal weight before pregnant, scientific nutrition intake and exercise during pregnancy, paying attention to surveillance as well as emphasizing the changes of maternal-child chart.