

Dear patient

Pregnancy, Obstetric management, assuring a healthy pregnancy, delivery and new born baby has gone a long way in the last half century. From home, dula to midwife, doctor, specialist and supraspecialist. This evolution was a natural result of the quest for perfection. Although we leapt into the next level and we are pretty good, we are far from perfection. The new innovations in antenatal screening are better, faster and less aggressive. Not so long ago, we learnt to wash our hands before delivering a baby, while antibiotics, vaccines and sterility reduced maternal and infant deaths. This was followed by antenatal care which allowed advice and early detection of the common complications of pregnancy. Obstetric science has improved the management of complicated pregnancies and made deliveries safer. Feto maternal medicine has driven obstetrics to a new level.

Advances in diagnostics, Ultrasound and Genetics allow us to diagnose and manage fetal problems earlier, safer and less invasively. Your Obstetrician will give you advice, support and the best care.

Obstetric Ultrasound is a highly specialised field. It is part of the modern feto maternal management. Feto maternal specialists are involved with high risk pregnancies. Unfortunately, just like obstetricians, and even moreso, they are few and cannot see all pregnant women. Some obstetricians have trained and perform the two major anomaly Ultrasound examinations, advise and manage genetic investigations and refer to feto maternal specialist cases where further investigation and management might be necessary.

While feto maternal specialist deal with problem pregnancies, fetal Ultrasonographers screen large numbers of pregnancies and refer possibly high risk patients to the supraspecialists. The two major anomaly screening Ultrasound examinations are the 11 to 14 weeks and 18 to 22 weeks scans.

Your options are not to screen at all and go natural, healthy and accept fatality, since the great majority of all pregnancies will end well in any case. The internet and Google can offer substantial support to your management. You can attend antenatal classes and have midwife or GP management, with or without antenatal screening, partial or full. You can have Obstetric management, with or without partial or full screening. The choice is yours and it is influenced by where you live, local availability of care providers, medical insurance and your financial situation. The more complete and comprehensive is your screening process the more accurate is the prediction of good outcome. Even with full and best screening, not all the conditions, even of the more severe or common type can be missed or undiagnosed. There are many factors involved in diagnosing or missing certain anomalies. Patient anatomy, placental, uterine and fetal position and the severity or place of the anomaly, at the time of the screening, the quality of the equipment and the experience of the Ultrasonographer play major role in this process.

I have been trained by the best specialists in the Ultrasonographic field, prof Van Dongen, my MMed thesis is on an ultrasound subject, under prof Sonnendecker's supervision, I did for years perform fetal ultrasonography in the Johannesburg Hospital under prof Guidozi's leadership before performing fetal Ultrasound in private practice. Then, there were no feto maternal specialists. At the Park Lane Clinic and lately the Sunninghill Hospital I have performed thousands of fetal Ultrasonographic examinations on my own and a few other gynecologists in private practice. I have a new, top of the range, 4D, Samsung ultrasound machine and 30 years experience.

Should you, your obstetrician or your case manager decide to screen at 11 to 14 weeks and 18 to 22 weeks, I would be honoured if you would contact my rooms and speak to Sam to book an appointment at 0112343280. My rooms are situated at Sunninghill Hospital, crn Witkoppen and Naniyuki rds, Ground floor, West wing, room 22.