



Pre-eclampsia

is the cause of

15%
of premature births ¹

42%
of maternal decease
during childbirth ²

Multiple guidelines recommend the use of PIGF and sFLT-1 for the screening and aid in diagnosis of pre-eclampsia (ISUOG, FIGO, ISSHP, NICE,...).
View these guidelines:



1. Tency I. et al. Perinatal referral in Belgium. FOD, 2007
2. Verlohren S. et al. (2010). Am J. Obstet Gynecol, 202 (161): e1-11
3. Milne et al. (2009) BMJ, 339:b3129
4. Health Belgium, 2019
5. O’Gorman et al. (2016). Am J. Obstet Gynecol, 214: 103.e1-12
6. O’Gorman N et al. (2017). Ultrasound Obstet Gynecol, 49: 756-760
7. Rolnik et al. (2017). N Engl J Med, 377(7):613-622
8. Poon L.C. et al. Int J Gynecol Obstet 2019;145(Suppl.1): 1-33
9. Zeisler H. et al. (2016). N Engl J Med, 374: 13-22
10. Verlohren et al. (2014). Hypertension, 63: 346-352

11. Lanssens, D. et al. (2017). JMIR mHealth and uHealth, 5(3), e25
12. KCE Report 232Cs. Caring for mothers and newborns after uncomplicated delivery: towards integrated postnatal care
13. Statbel (2019, February 26). Feto-infant mortality Retrieved March 12, 2019, from: <https://statbel.fgov.be/en/themes/population/feto-infant-mortality>
14. Information received by request to FPS Health
15. Wright, D. et al. (2018). Am J Obstet Gynecol, 218(6), 612-e1
16. Terugbetalingsdossier Elecsys® sFLT-1-PIGF immunoassay ratio. Submitted to RIZIV/INAMI November 2019



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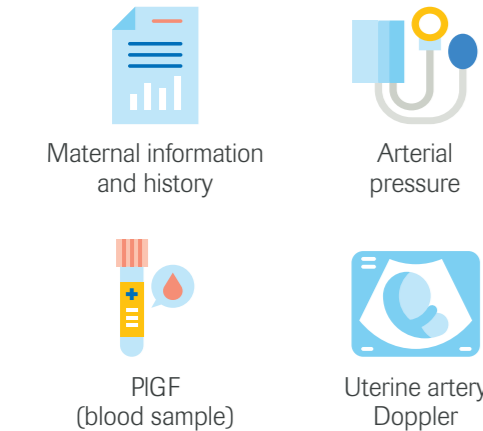


Pre-eclampsia

Clinical and economic value of testing

MC-BE-00726

1st trimester screening



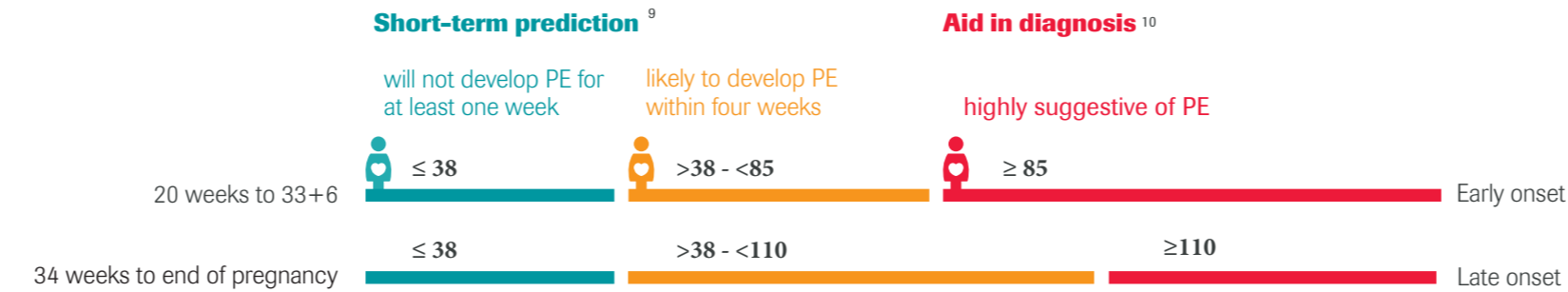
100%⁶
sensitivity for detection of early pre-eclampsia

75%⁷
sensitivity for detection of preterm pre-eclampsia (<37w)

Treatment with low dose aspirin can decrease the incidence of preterm pre-eclampsia by **62%**^{7,8}
150 mg aspirin from week 11-14 until week 36

In practice: blood sample on serum, between week 10-14, algorithm for risk calculation.

2nd and 3rd trimester the Elecsys[®] immunoassay sFLT-1/PlGF ratio



In practice: blood sample on serum, in women with signs and symptoms of pre-eclampsia, between week 20-37, ratio sFLT/PlGF will define the risk.

Clinical and economic benefits of testing

