

Texas Children's Pavilion for Women Fetal Center®

Volumes and Outcomes

Annual Fetal Center Volumes

1,000+

Evaluations

3,000+

Fetal Echocardiograms

175+

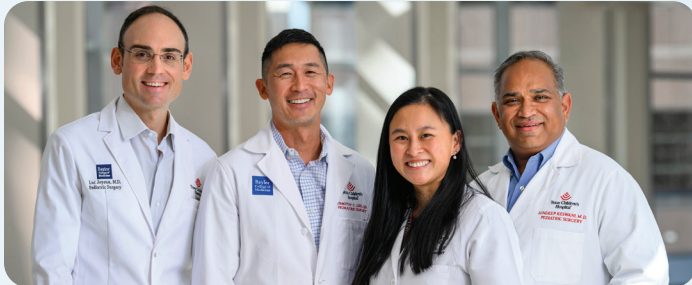
Fetal Intervention Cases

Maternal Fetal Medicine Fetal Intervention



Left to right: Ahmed A. Nassr, MD, PhD; Michael A. Belfort, MD, PhD; Magda Sanz-Cortes, MD, PhD; Roopali Donepudi, MD

Pediatric Fetal Surgery



Left to right: Luc Joyeux, MD, PhD; Timothy Lee, MD; Alice King, MD; Sundeeep G. Keswani, MD



The Texas Children's Difference

We are committed to excellence in all aspects of care and treatment, with teams dedicated to fetal research, outcomes and care coordination. Every patient who is referred to the Fetal Center can count on a personal nurse navigator to follow them throughout their journey.



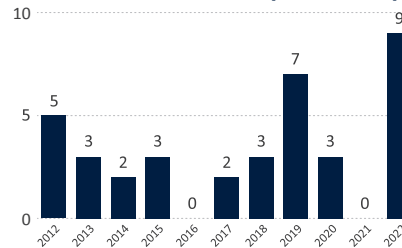
To gain our input on a case or refer a patient, please visit: texaschildrens.org/fetalcenter

We are here and ready whenever you need us!
Our team is available 24/7, 365 days a year at **832-822-2229**

As one of the nation's leaders in the diagnosis and treatment of abnormalities in the fetus and newborn, Texas Children's Fetal Center offers the full spectrum of fetal therapies and care for patients with the most complex conditions who are referred from around the world.

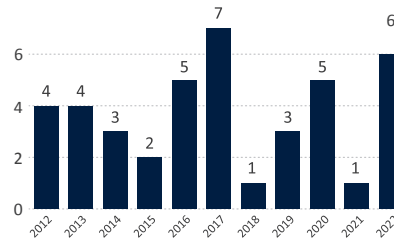
Below are cumulative volumes for some of our most innovative treatments.

Cardiac interventions by calendar year



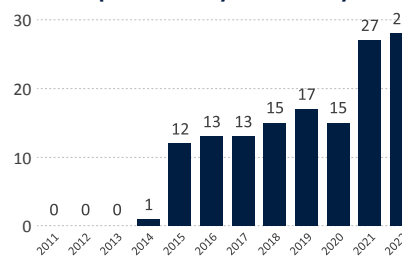
37
Cardiac interventions

FETO by calendar year



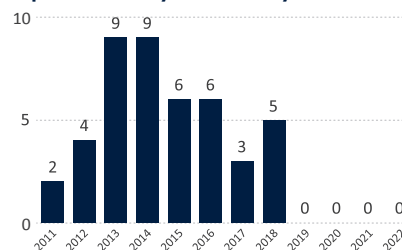
41
FETO

Fetoscopic fMMC by calendar year



141
Fetoscopic fMMC

Open fMMC by calendar year



44
Open fMMC

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Outcomes

Through our strengths in research and our commitment to collaboration, Texas Children's Fetal Center and Baylor College of Medicine continue to gain new insight into the rare and complex pregnancies involving fetal abnormalities. This has led to improved diagnoses and treatments that are changing lives of families around the world. The data below represents our outcomes through December 2022.

Fetoscopic Neural Tube Defect (NTD) Repair

In 2014, our team performed the first experimental 2 port fetoscopic closure of an NTD in the nation. We were the first to use heated, humidified CO2 for fetoscopic surgery and this has transformed the field. We have performed more cases than any other center in the US with some of the best outcomes in the world.

Fetal myelomeningocele (fMMC) repair cases	Fetoscopic cases (n=137)	MOMs trial (n=78)
Gestation age at delivery Median [range] Mean	37.4 [25.1 - 40.9] 36.4 ± 3.4	- 34.1 ± 3.1
Preterm premature rupture of membranes <37 weeks gestation	46/137 (34%)	36/78 (46%)
Preterm Delivery <37 weeks gestation <30 weeks gestation	59/137 (43%) 8/137 (6%)	62/78 (79%) 10/78 (13%)
Vaginal delivery	71/137 (52%)	0/78 (0%)
Treatment for hydrocephalus at 12 months or less	37/96 (40%)	31/78 (40%)

Fetal Endotracheal Occlusion (FETO)

Our center has one of the largest number of patients enrolled in a clinical trial for FETO balloon placement in left, right and bilateral CDH with some of the best outcomes in the US.

Fetal endotracheal occlusion cases	Isolated (n=30)*	Non-Isolated (n=11)
Gestational age at delivery Median [range] Mean	35.6 [30.7 - 40.1] 35.0 ± 2.3	36.1 [32.9 - 38.7] 35.9 ± 1.6
ECMO	9/29 (31%)	5/8 (63%)**
Survival to discharge***	22/28 (79%)	4/10 (40%)
Length of stay in NICU (days) Median [range] Mean	75 [30 - 294] 102 ± 70	140 [56 - 158] 123 ± 40
Discharged home on oxygen	10/22 (45%)	4/4 (100%)

* 1 IUFD at 33.7 weeks gestation

** 3 neonatal deaths <24 hours of life

*** 1 patient in each group remains in NICU pending discharge

New Clinical Trial

We are actively recruiting participants for a new clinical trial evaluating the safety and feasibility of fetal repair in complex gastroschisis. Visit booth 401 or [clinicaltrials.gov \(NCT05704257\)](https://clinicaltrials.gov/NCT05704257) for more detailed information.



Twin-to-Twin Transfusion Syndrome (TTTS)

We are one of the largest centers in the US that offers selective fetoscopic laser photocoagulation (SFLP) for the treatment of twin-to-twin transfusion syndrome including those with selective fetal growth restriction, TAPS and triplets.

Overall TTTS Survival

- 90% survival of at least one twin
- 67% survival of both twins

Survival by Quintero stage			
Stage	Two survivors	One survivor	No survivors
I	39 (75%)	10 (19%)	3 (6%)
II	91 (73%)	18 (15%)	15 (12%)
III	126 (60%)	55 (26%)	29 (14%)
IV	13 (48%)	8 (30%)	6 (22%)

Survival by gestational age at procedure			
Gestational age	Two survivors	One survivor	No survivors
16 - 18 weeks	80 (60%)	32 (24%)	22 (16%)
19 - 21 weeks	111 (67%)	31 (19%)	23 (14%)
22 - 24 weeks	57 (67%)	21 (25%)	7 (8%)
25 - 27 weeks	15 (68%)	7 (32%)	0 (0%)

It is a privilege to care for these patients and their families, and we are proud to deliver the highest quality care to address the full spectrum of their needs and ensure the best possible outcomes.

