EXPERT REVIEWS

1 Examination of a death due to cardiomyopathy by a maternal mortality review committee
Cynthia S. Shellhaas; Julie Zaharatos; Linda Clayton; Afshan B. Hameed
This article highlights the components of a maternal mortality review and provides information for clinicians who care for women with cardiomyopathy in pregnancy.

SYSTEMATIC REVIEWS

9 Vaginal dysbiosis and the risk of human papillomavirus and cervical cancer: systematic review and meta-analysis
Nele Brusselaers; Sadeep Shrestha; Janneke van de Wijgert; Hans Verstraelen
This study supports a causal link between vaginal dysbiosis and cervical cancer along the oncogenic HPV acquisition, persistence, and cervicovaginal dysplasia development pathway.

19 Oral vs intravenous iron therapy for postpartum anemia: a systematic review and meta-analysis
Pervez Sultan; Sohail Bampoe; Raj Shah; Nan Guo; Jaclyn Estes; Christopher Stave; Lawrence Tim Goodnough; Stephen Halpern; Alex James Butwick
Women with postpartum anemia treated with intravenous iron have postpartum week 6 hemoglobin concentrations nearly 1 g/dL higher than those treated with oral iron.

CLINICAL OPINION

30 Critical appraisal of the proposed defenses for planned home birth
Amos Grunebaum; Laurence B. McCullough; Birgit Arabin; Frank A. Chervenak
A critical appraisal of proposed defenses for planned home birth shows that they are inconsistent with patient safety and violate the rules of analogic reasoning.

(continued)

AJOG CITATION CLASSICS

Radioimmunoassay for hCG with hLH: 1972
Swifter diagnosis of pregnancy became possible thanks in part to the development of a highly sensitive 36-hour radioimmunoassay using antiserum to the β-subunit of human chorionic gonadotropin (hCG).

“A radioimmunoassay which specifically measures human chorionic gonadotropin in the presence of human lutetizing hormone” was received by the Journal in late 1971 and appeared the following July, a fairly standard submission-to-publication interval before the electronic era. Judith Vaitukaitis, MD, Glenn D. Braunstein, MD, and Griff T. Ross, MD, had conducted the research at the Reproduction Research Branch, National Institute of Child Health and Human Development, National Institutes of Health, Bethesda, MD.

The authors concluded that the assay could distinguish hCG from follicular or luteal phase human lutetizing hormone levels, adding that its notable specificity and sensitivity were “ideal both for diagnosis and for following the course of the disease among patients undergoing chemotherapy for hCG-secreting tumors and for following serum hCG levels in patients after termination of molar pregnancies.”

REFERENCE
VIEWPOINT

35 Behind the times: revisiting endometriosis and race
Olga Bougie; Jenna Healey; Sukhbir S. Singh

Early research into the role of race in endometriosis was rife with bias. The focus of endometriosis care should prioritize a patient-centered approach.

ORIGINAL RESEARCH

Articles abstracted in this issue appear in full at ajog.org

GYNECOLOGY

39 Prevalence, characteristics, and risk factors of occult uterine cancer in presumed benign hysterectomy
Vrunda B. Desai; Jason D. Wright; Cary P. Gross; Haiqun Lin; Francis P. Boscoe; Lindsey M. Hutchison; Peter E. Schwartz; Xiao Xu

The overall risk of occult uterine cancer in presumed benign hysterectomy was 0.96% and it varied substantially by patient age and surgical indication.

41 Pelvic organ prolapse as a function of levator ani avulsion, hiatus size, and strength
Victoria L. Handa; Jennifer Roem; Joan L. Blomquist; Hans Peter Dietz; Alvaro Muñoz

The association between levator ani avulsion and pelvic organ prolapse may be fully mediated by increased levator hiatus area and reduced muscle strength.

43 Factors associated with postpartum use of long-acting reversible contraception
Titilope Oduyebo; Lauren B. Zapata; Maegan E. Boutot; Naomi K. Tepper; Kathryn M. Curtis; Denise V. D’Angelo; Polly A. Marchbanks; Maura K. Whiteman

Prevalence of postpartum long-acting reversible contraception use was 15.3%; use varied by several factors, including age, race/ethnicity, education, insurance, parity, intendedness of recent pregnancy, and postpartum visit attendance.

46 MicroRNA-30d deficiency during preconception affects endometrial receptivity by decreasing implantation rates and impairing fetal growth
Nuria Balaguer; Inmaculada Moreno; María Herrero; Marta González-Monfort; Felipe Vilella; Carlos Simón

A maternal and/or embryonic miR-30d deficiency impairs embryonic implantation and fetal growth.

48 Subfertility among HIV-affected couples in a safer conception cohort in South Africa
Jessica R. Iyer; Annelies Van Rie; Sabina A. Haberlen; Mutsa Mudavanhu; Lillian Mutunga; Jean Bassett; Sheree R. Schwartz

HIV infection in women, including those on antiretroviral therapy, but also in men, is associated with a high burden of subfertility among HIV-affected couples trying to conceive.

(continued on page 8A)
Preconception folate status and reproductive outcomes among a prospective cohort of folate-replete women
Elizabeth A. DeVilbiss; Sunni L. Mumford; Lindsey A. Sjaarda; Matthew T. Connell; Keevan Kim; James L. Mills; Robert M. Silver; Enrique F. Schisterman
Preconception homocysteine was linked to pregnancy loss among folate-replete women with 2 previous losses, justifying further study of folate metabolism in normal and abnormal pregnancy.

Clinicopathologic features, incidence, and survival trends of gynecologic neuroendocrine tumors: a SEER database analysis
Jennifer Gibbs; Shirley Mei; Katherine Economos; Yi-Chun Lee; Margaux J. Kanis
This is a 25-year retrospective analysis of trends in gynecologic neuroendocrine tumors.

Cervical pessary for preventing preterm birth in twin pregnancies with maternal short cervix after an episode of threatened preterm labor: randomised controlled trial
Carme Merced; Maria Goya; Laia Pratcorona; Carlota Rodó; Elisa Llurba; Teresa Higueras; Luis Cabero; Elena Carreras; on behalf of the PECEP-RETARD Trial Group
Pessary reduces the risk of preterm birth <34 weeks of gestation in twin gestations after an episode of threatened preterm labor and short cervix remaining.

Effect of using silver nylon dressings to prevent superficial surgical site infection after cesarean delivery: a randomized clinical trial
Sheila A. Connery; Jerome Yankowitz; Linda Odibo; Olivia Raitano; Dusan Nikolic-Dorschel; Judette Marie Louis
The use of a silver nylon dressing is not associated with a reduction in superficial surgical site infection after cesarean delivery.

Outcomes of operative vaginal delivery managed by residents under supervision and attending obstetricians: a prospective cross-sectional study
Loïc Sentilhes; Hugo Madar; Guillaume Ducarme; Jean-François Hamel; Aurélien Mattuizzi; Matthieu Hanf
Management of attempted operative vaginal delivery by residents under supervision is not associated with more maternal or neonatal morbidity than management by attending obstetricians.

Term cesarean delivery in the first pregnancy is not associated with an increased risk for preterm delivery in the subsequent pregnancy
Sevan A. Vahanian; Matthew K. Hoffman; Cande V. Ananth; Damien J. Croft; Christina Duzyj; Karin M. Fuchs; Cynthia Gyamfi-Bannerman; Wendy L. Kinzler; Lauren A. Plante; Angela C. Ranzi; Todd J. Rosen; Daniel W. Skupski; John C. Smulian; Anthony M. Vintzileos; for the Perinatal Research Consortium
A term cesarean delivery is not associated with an increase in the risk of subsequent preterm delivery.
Significant reduction in umbilical artery metabolic acidosis after implementation of intrapartum ST waveform analysis of the fetal electrocardiogram

Anadeijda J. E. M. C. Landman; Saskia T. Immink-Duijker; Eduard J. H. Mulder; Maria P. H. Koster; Serena Xodo; Gerard H. A. Visser; Floris Groenendaal; Anneke Kwee

Training in intrapartum ST waveform analysis resulted in a reduction in umbilical artery metabolic acidosis.

Routine assessment of cerebroplacental ratio at 35–37 weeks’ gestation in the prediction of adverse perinatal outcome

Ranjit Akolekar; Anca Ciobanu; Emilie Zingler; Argyro Syngelaki; Kypros H. Nicolaides

Routine assessment of cerebroplacental ratio at 35–37 weeks’ gestation provides poor prediction of adverse perinatal outcome.

A contemporary amniotic fluid volume chart for the United States: The NICHD Fetal Growth Studies—Singletons

John Owen; Paul S. Albert; Germaine M. Buck Louis; Karin M. Fuchs; William A. Grobman; Sungduk Kim; Mary E. D’Alton; Ronald Wapner; Deborah A. Wing; Katherine L. Grantz

Sonographic amniotic fluid volume estimates vary by gestational age and racial/ethnic group; selected maternal characteristics and estimated fetal weight did not affect the racial/ethnic differences.

Use of an artificial placenta to maintain extremely preterm ovine fetuses (delivery weight w600–700 g) is broadly equivalent to a human fetus at 24 weeks of gestation.

Pseudo—Meigs syndrome caused by cancer of the uterine corpus

Akihito Okazaki; Koichi Nishi; Kazuo Kasahara

Benign cytologic evidence of both ascites and pleural effusions can be associated with a malignant uterine neoplasm in addition to ovarian fibroma and leiomyoma.

Alobar holoprosencephaly detected in a 9-week embryo

Simon Meagher; Lisa Hui

Advances in fetal imaging now enable early detection of brain malformations, even prior to 10 weeks’ gestation. 3-D volume rendered images of the cerebral ventricles in first trimester can provide useful images to aid patient counseling.

Prevalence of abnormal cervical cancer screening outcomes among screening-compliant women in the United States

Onyema Greg Chido-Amajuoyi; Sanjay Shete
LETTERS TO THE EDITORS

78 Risk of pressure ulcers in maternity units
Paul Guerby; Beatrice Guyard-Boileau; Olivier Parant
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Claire Thuillier; Patrick Rozenberg

79 Induction of labor at term
Anthony R. Scialli
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Vivienne Louise Souter; Ian Painter; Kristin Sitcov; Aaron B. Caughey

80 Fresh in vitro fertilization cycles increase risk of small-for-gestational age; frozen cycles increase risk of large-for-gestational age: Which is worse?
Bruce D. Pier; Sarah E. Ligon; Gary Levy
Reply, page 81
Barbara Luke; Valerie L. Baker; Kevin J. Doody

SOCIETY FOR MATERNAL-FETAL MEDICINE

B2 SMFM Statement on Elective Induction of Labor in Low-Risk Nulliparous Women at Term: the ARRIVE Trial
Society of Maternal-Fetal (SMFM) Publications Committee

B5 Substance use disorders in pregnancy: clinical, ethical, and research imperatives of the opioid epidemic: a report of a joint workshop of the Society for Maternal-Fetal Medicine, American College of Obstetricians and Gynecologists, and American Society of Addiction Medicine
Jeffrey Ecker; Alfred Abuhamad; Washington Hill; Jennifer Bailit; Brian T. Bateman; Vincenzo Berghella; Tiffany Blake-Lamb; Constance Guille; Ruth Landau; Howard Minkoff; Malavika Prabhu; Emily Rosenthal; Mishka Terplan; Tricia E. Wright; Kimberly A. Yonkers
This workshop report discusses critical issues that pertain to perinatal substance use disorders, with a focus on opioid use disorder in particular; drafts preliminary recommendations regarding screening, pain management, and medication-assisted therapy for opioid use disorder during pregnancy; and outlines topics for future research to fill current gaps in evidence-based approaches to diagnosis and treatment.

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