

Geburtsh. und Frauenheilkunde 52 (1992) 586

H. G. Dörr, W. G. Sippell, R. P. Willig: Pränatale Diagnostik und Therapie des Adrenogenitalen Syndroms (AGS) mit 21-Hydroxylase-Defekt.

Das Summary lautet wie folgt richtig:

Summary

Genetic counselling of the parents is prerequisite before prenatal diagnosis and prenatal therapy of CAH. Today, chorionic villous biopsy with DNA probe is the method of choice to identify homozygous CAH-fetuses. The aim of prenatal therapy is to prevent in utero virilization of the external genitalia in affected female fetuses. Therefore dexamethasone 3×0.5mg/d p.o.) is given to the mother immediately when pregnancy is confirmed, before prenatal diagnosis and karyotyping is possible. After the result of prenatal diagnosis, treatment is continued

until term only when the fetus is affected and female. Prenatal diagnosis and effective treatment of female CAH fetuses greatly reduces the need for corrective surgery and thus helps to alleviate anxieties of prospective parents and therefore encourages further pregnancies. However, prenatal treatment of CAH to date still is an experimental therapy.