

4th International Conference on Pediatrics & Neonatology & 5th International Conference on Gynecology and Obstetrics

<https://www.scitechseries.com/>

August 13–14, 2026 | Barcelona, Spain



Chaima Derbel

Kasserine Regional Hospital,
Tunisia

Biography

Chaima Derbel is a resident in Obstetrics and Gynecology at the Ministry of Public Health in Tunisia. She obtained her Doctor of Medicine degree from the Faculty of Medicine of Sfax and completed complementary certificates in Senology and Gynecologic Laparoscopy. Her doctoral thesis focused on in utero transfer in obstetric practice. Her research interests include obstetric pathology, placenta accreta spectrum, and gynecologic oncology. She is the first and presenting author of several scientific works, has published in peer-reviewed journals, and has presented at national and international gynecology and obstetrics conferences, including FIGO and ESGO.

The Role of Ultrasound in the Diagnosis of Placenta Accreta

Abstract

Placenta accreta is an uncommon but potentially life-threatening condition associated with significant maternal morbidity and mortality. Accurate prenatal diagnosis is essential to enable appropriate planning and optimal management. Although magnetic resonance imaging (MRI) offers high diagnostic specificity, ultrasound remains the primary screening tool because of its safety, accessibility, and practicality in routine obstetric care. This study aimed to evaluate the diagnostic performance of ultrasound in placenta accreta and to compare its role with that of MRI. We conducted a retrospective case series in the Department of Obstetrics and Gynecology of Kasserine over a three-year period, from January 2023 to June 2025. Data were extracted from medical record and operative reports of patients diagnosed with placenta accreta. Six cases of placenta accreta were included. The median maternal age was 34 years, with a median gravidity of 5 and parity of 3. Five patients had a history of one or more cesarean sections, while one had a previous uterine aspiration. Prenatal diagnosis was achieved exclusively using ultrasound with Doppler. Placenta previa was identified in all cases. Ultrasound demonstrated a sensitivity of 84.6% and a specificity of 100%. All patients delivered by cesarean section. Conservative management was performed in four cases, whereas radical treatment was required in the remaining patients. All women required postoperative intensive care. No maternal deaths were reported. Placenta accreta should be suspected in the presence of known risk factors. Ultrasound remains the first-line imaging modality due to its high sensitivity, safety, and wide availability. MRI should be reserved as a complementary second-line tool, particularly in cases of posterior placenta or suspected bladder invasion.