

Universal Cervical Length Screening & Vaginal Progesterone for Short Cervix

Aetna Better Health of Louisiana is a proponent of universal cervical length screening of pregnant women without a prior preterm birth because (1) the incidence of spontaneous preterm delivery and its sequelae have been shown to be a major concern in our population within Louisiana; (2) it has the potential to reduce the preterm birth rate; (3) high quality evidence exists to support efficacy of treatment with vaginal progesterone for when the cervical length is 20 mm or less by transvaginal ultrasound performed before 24 weeks of gestation; (4) it is cost effective, safe, accepted by patients; and (5) the transvaginal ultrasound and vaginal progesterone (First Progesterone) are paid for Aetna Better Health of Louisiana.

Aetna Better Health of Louisiana will cover a vaginal ultrasound performed before 24 weeks of gestation for documenting cervical length.

- **Indications for treatment with vaginal progesterone** is recommended as a management option to reduce the risk of preterm birth in *asymptomatic* women with a singleton gestation without a prior preterm birth with an identified very short cervical length less than or equal to 20 mm before or at 24 weeks of gestation. The medication should be continued through the end of the 36th week.
- **Treatment with vaginal progesterone**
Vaginal progesterone, 200 mg nightly
- **How to order vaginal progesterone**
First-Progesterone VGS: Vaginal Suppository (200mg) Vaginal Progesterone suppositories is available from CVS Pharmacies.

Please Note:

- A woman with a singleton gestation and a prior spontaneous preterm singleton birth should be offered progesterone, 250 mg IM weekly starting at 16–24 weeks of gestation, regardless of transvaginal ultrasound cervical length, to reduce the risk of recurrent spontaneous preterm birth. The medication should be continued through the end of the 36th week.
- Progesterone treatment (IM or vaginal) does not reduce the incidence of preterm birth in women with twin or triplet gestations and, therefore, is not recommended as an intervention to prevent preterm birth in women with multiple gestations.
- Tests, such as fetal fibronectin screening, bacterial vaginosis testing, and home uterine activity monitoring, are not recommended as screening strategies and should not be performed.

For more information, please view Prediction and prevention of preterm birth. Practice Bulletin No. 130. American College of Obstetricians and Gynecologists. Obstet Gynecol 2012;120:964–73.

Should you have any questions, please feel free to call me at **1-855-242-0802**, TTY 7-1-1