B(n=55, 29–32wks). All developmental assessments(206) were applied by one researcher.

**Results** Mean(SD) Bayley-III composite scores (CSs) percentile ranks, and overall neurodevelopmental impairment (NDI 24mo) (%) for the 2 groups are shown in the table; there were no differences in CSs in any Bayley III domain in and between groups. Although not significant, ELBW showed a decrease and VLBW an increase in CSs over time. The only difference between groups was in the motor domain regarding percentile ranks and overall NDI rates(table). A significant correlation was found between: 12th mo neuroexam with all the Bayleys subscales (p<0.001).

Abstract 1245 Figure 1

**Conclusion** In our cohort Bayleys III composite scores seems to be stable in serial examinations; however are lower to those reported. ELBW infants at 24mo showed a delay in the motor domain. Comparison with a control group is deemed necessary.

**1246 NEURODEVELOPMENTAL OUTCOME OF TRIPLETS AFTER IN VITRO FERTILIZATION OR NATURAL CONCEPTION**

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**Background and Aims** Triplets may have adverse neurodevelopmental outcome. Parents are advised to fetal reduction, and they often opt to reject it. The Aim of our study is to present triplets’ neurodevelopmental outcome in our “follow-up” program.

**Methods** We review medical records of triplet pregnancies in our institution. All children were evaluated with Griffiths Mental Developmental Scales (GMDS-ER). Parents were asked to express their feelings about having a triplet delivery.

**Results** Twenty one triplets were indentified. Two pregnancies (6/21 triplets) (28.57%) were conceived after hormonal replacement and 5/7 pregnancies (15/21 triplets) (71.42%) after IVF. Mean maternal age was 33.85 years (range = 29–35). Intra Cytoplasmic Sperm Injection was used in all IVF pregnancies. Mean number of cycles 1.8 (range = 1–3). All but three were fresh embryo transfer. One IVF cycle was from donor oocyte. Mean GA at birth was 35 weeks (range = 31–35wks). Mean BW was 1852gr (range = 1540–2200gr). One IUGR neonate was excluded. Three neonates (14.28%) had mild RDS. Three neonates (from the same IVF pregnancy with donor oocyte) had mobile CP (14.28%). Cognitive tests were within the normal range in 17/21 triplets (80.95%). Two siblings, not from IVF pregnancy, were highly suspected for ASD and two triplets (one with CP) had mild developmental delay. All parents with IVF history were happy with their choice to continue with triplet pregnancy.

**Conclusion** In our population triplet pregnancy ended in moderate preterm delivery. Cognitive outcome was within the normal range in the majority of our population. Adverse neurodevelopmental outcome was not necessarily related to the mode of conception.