Objective
Perinatal congenital heart diseases (CHD) is the second highest cause of perinatal losses in Belarus. The objective of this research is to assess the structure of the heart in CHD.

Methods
185 cases of CHD were studied. High risk factors of CHD were indications for prenatal echocardiography, which were done in the first, second and third trimesters.

Results
The average gestation at diagnosis was 22, 0 (range, 11-35) weeks. 11% (20/185) of the CHD were revealed in the first, 54% in the second, 35% in the third trimester. In the first trimester 11/20 CHD cases were associated with aneuploidies and there were 9/20 isolated cases, all with increased NT. Overall, the contribution of chromosomal abnormalities was 17/185 (9%), CHD was associated with other genetic syndromes in 13/185 (7%) of cases: Pentalogy of Cantrell 5/13, Dandy Walker syndrome 2/13, Holt-Oram 2/13, polysplenia-heterotaxia syndrome 1/13, Tseyzel 1/13, DiGeorge 1/13, ADAM 1/13, Williams 1/13. The contribution of CHD associated with unclassified multiple congenital anomalies was 10%. Major risk factors for CHD were abnormal routine ultrasound in 52% (96/185) and increased NT in 40% of cases. Most of the isolated CHD (76%; $\chi^2=20, 6; P <0, 001$) was diagnosed in the 2nd trimester as it was associated with aneuploidy ($\chi^2=100, 8; P<0, 01$).

Conclusion
The diagnosis of CHD remains a major challenge in fetal medicine. Data on prenatal diagnosed CHD are necessary for genetic counseling of family, information on structure and a range of CHD has paramount importance.