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| **ISA ISPID  Abstract Submission  Nº: 173**   |  | | --- | | Topics: **Stillbirth** | | Type: **Oral** | | **What proportion of stillbirths are potentially preventable?** | | **Page, Jessica**1 *1 - SCRN of the Eunice Kennedy Shriver NICHD.* | | **Introduction** Decreases in stillbirth (SB) rates over the past 50 years as well as differences in stillbirth rates in high-income countries strongly suggest that some SB are preventable.   However, the proportion of SB that is potentially preventable is uncertain.   Thus, our aim was to determine the proportion of potentially preventable SB.  **Material and Methods** Secondary analysis of 512 SB enrolled in the Stillbirth Collaborative Research Network (SCRN) from 2006 – 2008.  The SCRN was a prospective, multisite, geographically, racially and ethnically diverse, population-based study of stillbirth in the US.  Cases underwent standard evaluation that included maternal interview, medical record abstraction, biospecimen collection, postmortem examination, placental pathology and clinically recommended evaluation. Each case was assigned probable and possible causes of death using the INCODE classification system.  The concept of potentially preventable SB is subjective.  For this analysis, we defined potentially preventable as SB occurring in non-anomalous infants, ≥24 week’s gestation and weighing ≥ 500g that were 1) intrapartum, 2) due to medical complications, 3) placental insufficiency, 4) otherwise uncomplicated multiple gestation, and 5) spontaneous preterm birth.  **Results** Potentially preventable SBs ≥ 24 weeks and >500g included: Intrapartum SB (9; 1.8%); Medical complications of pregnancy (diabetes / HTN / APS / SLE) (31; 6.1%); Hypertensive disorders of pregnancy (20; 3.9%); Placental insufficiency (65; 12.7%); Multiple gestation (not due to TTTS, TRAP or monoamnion) (4; 0.8%); and Preterm labor / PPROM / Chorioamnionitis (16; 3.1%).  27 cases fit more than one category, leaving 113 (22.1%) potentially preventable SBs.  **Conclusions** Depending upon the definition used, almost a fourth of SB are potentially preventable.  Given the predominance of placental insufficiency, identification and management of placental insufficiency may have the most immediate impact towards stillbirth reduction. | |  |  |  |  | | --- | --- | | **CONTACT** | | | Name: | **Jessica** | | Lastname: | **Page** | | E-mail: | **jessica.page@hsc.utah.edu** | | Country: | **USA - United States of America** | | Institution | **SCRN of the Eunice Kennedy Shriver NICHD** | | Cellphone: |  | | City: |  | |