

## The Obstetrician & Gynaecologist review examines strategies to prevent stillbirth

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A review in *The Obstetrician & Gynaecologist* (TOG) finds that reducing the risk of stillbirth calls for better monitoring of women during their pregnancy to help find those whose babies' lives could be saved by early delivery.

In the UK the absolute risk of <u>stillbirth</u> is low, affecting approximately 4 in 1000 <u>babies</u> (MBRRACE). Although for most cases the exact cause of death is unclear, stillbirth is associated with complications during childbirth, maternal infections during pregnancy, maternal health conditions such as high blood pressure or diabetes, foetal growth restriction (often due to the placenta not functioning correctly), and congenital abnormalities. Half of all stillbirths are small for gestational age babies (SGA).

Prof Gordon Smith, from the University of Cambridge and author of the report, said, "Maternal risk factors for stillbirth include this being their first baby, being over 40 years old, smoking and obesity. While women should be encouraged to address risk factors such as smoking and obesity, the only way to prevent antepartum stillbirth in an otherwise apparently healthy infant is to induce delivery. Of course this requires identifying women at high risk and needs to be balanced against the risks inherent in early delivery and preterm birth.

"We know that careful and timely monitoring of SGA babies using ultrasound measurements of placental blood flow helps reduce the risk of death. However routine care currently identifies less than a quarter of



SGA babies prior to delivery, so better ways of screening for SGA are urgently required.

"A range of strategies for women have been proposed to prevent stillbirth, such as sleeping on their left side, or low dose aspirin for women with high risk of preeclampsia. However the potential impact of these interventions on overall rates of stillbirth are limited. Research is currently underway to try determine maternal biomarkers which might be a useful addition in screening for stillbirth risk."

Jason Waugh, TOG Editor-in-chief said, "Stillbirth is devastating for the more than 3000 families affected each year in the UK. Better monitoring of low risk pregnancies and for SGA babies (RCOG guidelines), alongside targeted induction of labour, should help to bring down these numbers. More research is still needed to improve diagnosis of at-risk mothers and babies, as well as research into what can be done to reduce stillbirth risk."

**More information:** Gordon CS Smith. Prevention of stillbirth. The *Obstetrician & Gynaecologist* (TOG) 2015; DOI: 10.1111/tog.12197

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