

Review of stillbirths at a tertiary hospital over a six year period

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Background

In Australia, stillbirth is defined as the birth of a baby without signs of life after 20 weeks gestation or 400g birthweight. It is a major public health problem with enormous psychosocial and economic impacts. A large number of stillbirths are 'unexplained' in their cause.

Aims

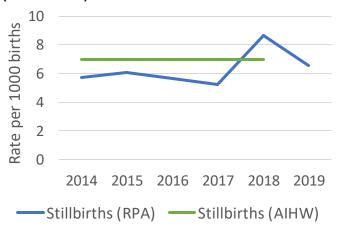
To compare our hospital's stillbirth outcomes to the national data in relation to gestation and classification.

Methods

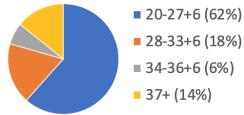
Retrospective study of women who had a stillbirth from 1 January 2014 - 31 December 2019 at Royal Prince Alfred Hospital.

Results

Our stillbirth rate was 6.5 per 1000 births (AIHW 7.1):

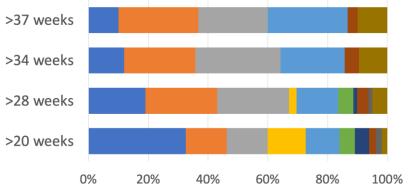


Stillbirths by gestational age:



We have less unexplained stillbirths (13%, v AIHW 16%).

As gestation increases, congenital anomaly becomes a less common cause of stillbirth while perinatal infection and growth restriction become more common:



- Congenital anomaly
- Growth restriction
- Unexplained
- Spontaneous preterm labour or SROM
- Perinatal infection

- Multiple pregnancy
- Maternal condition
- APH
- Hypertensive disorder
- Hypoxic peripartum death

Conclusion

Our stillbirth rate was slightly lower than AIHW. Our lower unexplained stillbirth rate likely reflects compliance to performing investigations to identify the cause.