Antenatal detection of small for dates in stillbirth population at Royal Infirmary Edinburgh

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Introduction

Stillbirth is defined as delivery of a baby showing no signs of life at or beyond 24 weeks. 90% of stillbirths are antenatal. Half of all stillbirths are small for gestational age babies (SGA). The recent report from MBRRACE discusses that in nearly two thirds of the pregnancies, antenatal checks were not followed thoroughly. This included antenatal visits, symphysiofundal height (SFH) plotting and appropriate referral.

Aim

To identify the antenatal detection of small for dates (SGA) still births at RIE.

Methodology

This is a retrospective study from 2009 to 2014 looking at all stillbirths with birth weight <10%. All stillbirths were identified during this period and babies born with birth weight <10% were calculated using GROW calculator. Data such as parity, BMI, smoking, age, medical or obstetric history, antenatal visits and symphysiofundal measurements (SFH) at each ANC visit, growth scan and reason for growth scan and scan findings were collected.

Balance Simpson Scan

Results:

• There were 193 stillbirths in 5 years



Conclusion:

- 88 (45.5 %) of these were with weight <10% of which 62% of the women were low risk
- 90 % of these women received adequate number of antenatal visits
- Our antenatal detection rate for small for gestational age is 14% in the low risk group and 15% in the high risk group. Scan identification of SGA was 73%
- 9 were identified as small for dates antenatally but were not referred for growth scans.

Antenatal detection using SFH is poor and detects only 14% of SFD. Since majority of SFD is in low risk population, we need a reliable screening test.

Gardosi and Francis reported that the likelihood of detecting SGA increased twofold from 29.2% to 47.9% with serial plotting of the FH on customised charts.

Scottish patient safety have suggested the implementation of GAP programme. However this had logistical implications on resources. Therefore serial plotting of SFH on a chart may improve antenatal detection and prompt appropriate referral for further investigations.



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