

PARENT INFORMATION

You are now between 24 weeks to 24 weeks + 6 days in your pregnancy

Q. What happens if my baby is born at this time?

A. Some babies do not survive labour and birth at this stage of pregnancy. Babies who do survive labour are offered intensive care and require ongoing intensive care for at least one month and will need to be in hospital for at least 3 months. Babies, who survive as early as this, have a risk of ongoing disability.

Q. Will my baby's care be discussed with me / us before birth?

A. We will try to discuss your baby's care with you before your baby is born. Some families want to express their views whilst others prefer to accept whatever happens or let us decide what is best for the baby. If you want to tell us your views please do so.

If you want us to do what we think is best please say so. If the pregnancy has otherwise progressed well with no other complications we would normally offer resuscitation and assess the baby. If resuscitation is successful we would then admit the baby to the neonatal intensive care unit. It is likely that the baby would need some form of respiratory support for the first few weeks. The doctors and nurses would keep you fully informed about the baby's condition.

Q. What will the doctors talk to me about?

- How sick is your baby now?
- How sick is your baby likely to be at birth?
- Is your baby likely to die or to survive?
- If your baby survives labour, how can we help him / her after birth?
- If your baby survives, what are the chances that he / she will be disabled?

Q. What will my baby look like?

A. Your baby will be very small and thin. His or her skin will be very dark. Your baby will be fully formed on the outside but baby's organs may not have developed enough to keep him or her alive.

Q. What happens after my baby is born?

A. The Doctor will assess him / her and care will be based on what we feel is in your baby's best interests. It is difficult to know how many interventions we should try to revive your baby if he / she is not responding but your views will be taken into account.

We want to treat you and your baby with respect and dignity.

Please feel free to tell us the best way to do this.

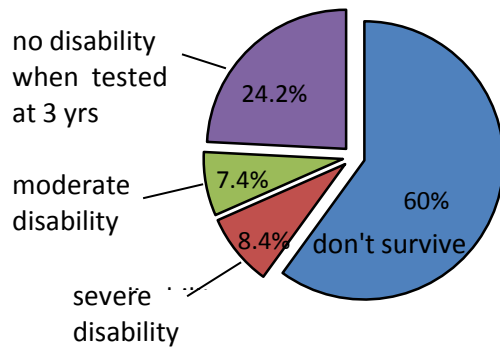
Q. What could I do to best help my baby?

A. If the baby is admitted to a neonatal intensive care unit, the best way a mother can help is to express breast milk for him or her. Breast milk contains lots of natural ingredients to help babies fight off infections and tummy complications. Only mothers own breast milk can do this. Breast milk should be expressed as soon as possible after birth and regularly every 3 hours. Your midwife will show you how to do this.

Q. What will be the initial and long term outcomes for my baby born early?

A. The chart below shows the results from a large study EPICURE 2.

24 weeks to 24 weeks + 6 days



Severe disability – includes disorders requiring high dependency on carers, e.g. cerebral palsy preventing a child from walking, profound hearing problems and blindness.

Moderate disability – includes children who have reached a reasonable level of independence, e.g. cerebral palsy (child still able to walk), lower than average IQ, hearing loss correctable by a hearing aid, impaired vision without blindness.

Mild disability – includes those with mild learning problems or other impairments such as squints, which do not interfere significantly with everyday life.

Reference

Neurological and developmental outcome in extremely preterm children born in England in 1995 and 2006: the EPICure studies. Moore T, Hennessy EM, Myles J, Johnson SJ, Draper ES, Costeloe KL, Marlow N, BMJ 2012 Dec 4; 345: e7961. Epub 2012 Dec 4.

EPICURE – www.epicure.ac.uk

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Further information

This leaflet is intended to give you information and answer some of your immediate questions. Please feel free to discuss any further questions and concerns with your midwife or doctor. The following resources may be useful:

Bliss – www.bliss.org.uk

Tommy's – www.tommys.org