

# Feticide: indications, post-mortem findings and patient follow up from 2003-2016

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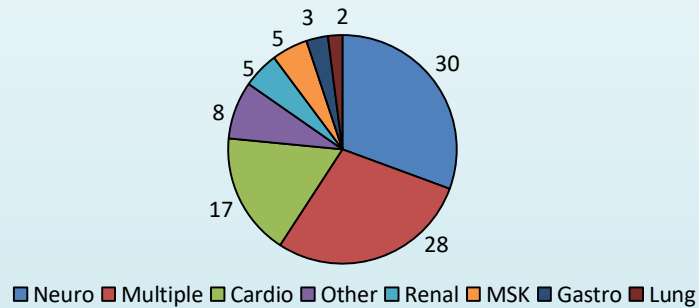
## Objectives

- To assess multiple factors surrounding feticide procedures performed at the University Hospital of Wales (UHW) between 2003-2016, in order to highlight trends and potential service improvements.

## Introduction

In termination of pregnancy over 21+6 weeks, feticide is mandatory (1). Post-mortem (PM) is offered post-procedure to confirm pre-natal diagnosis, identify previously unknown abnormalities and discover information relevant to future pregnancies. All women should be offered a follow up appointment post-feticide (2), for counselling and to receive PM results. As the UHW provides the feticide service in South Wales, data was gathered from this center to identify trends and service improvements.

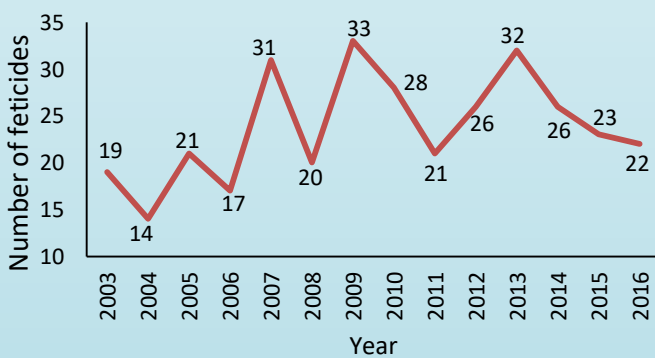
Graph 3: % of feticides per abnormality



## Results

Incidence of feticide across 13 years, and percentage of age of gestation each year are demonstrated in graphs 1 and 2. Graph 3 shows the abnormalities indicating the feticides. 69% of procedures were performed in women  $\geq 26$  years old. PMs were conducted in 40% of feticides, which provided important new findings in fetuses  $< 24$  weeks and  $> 24$  weeks (graph 4). 34% of patients had follow up appointments, 4% declined, and in the remaining 62% this data was missing.

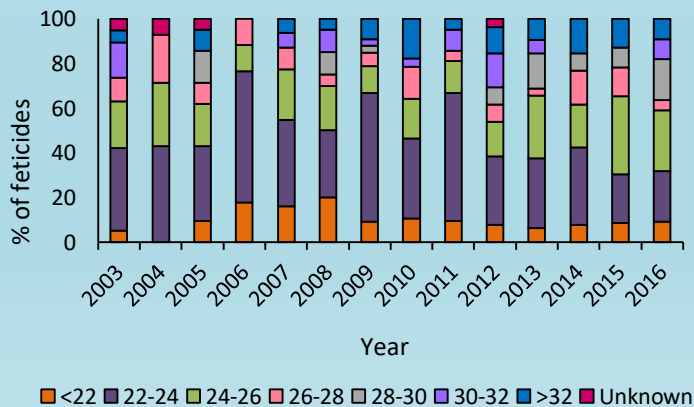
Graph 1: Number of feticides per year



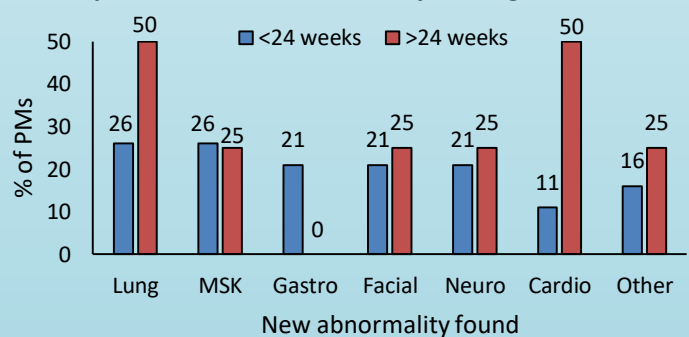
## Methods

Patient records were accessed on Viewpoint Fetal Medicine database, Regional Genetics Laboratory Database and Pathology Database "Telepath".

Graph 2: % of feticides in age of gestation per year



Graph 4: % of new abnormality findings in PMs



## Conclusion

The number of feticide procedures over time shows no obvious trend. 22-24 weeks is the most common gestational age, with peaks in maternal age  $\geq 26$  years, showing an obvious correlation in this demographic. PMs provide further valuable information about fetal abnormalities, and so should be offered to all relevant patients. Follow up data must be thoroughly documented in future, to ensure all patients are receiving adequate support.

## Acknowledgements

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