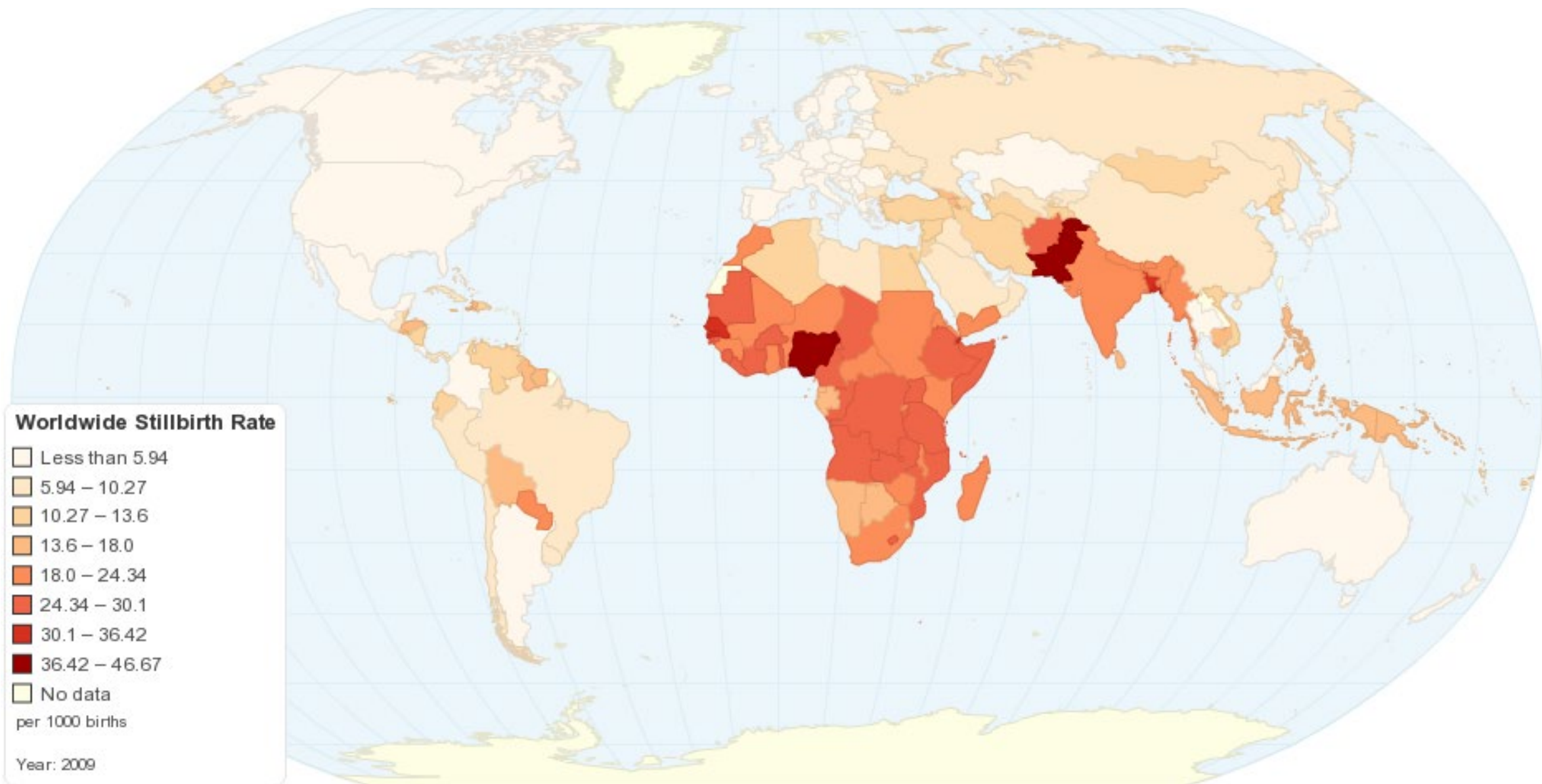


Racial disparities on stillbirth and consent for pathologic examination

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Disparities exist internationally and within the US

- Sub Saharan Africa suffers the highest stillbirth rate with the additional problem of lack of access to prenatal care, hospitals, birthing professionals, labor monitoring, and newborn resuscitation.
- The US has huge racial disparities both in stillbirth rates and maternal mortality (but it's not race but racism)
 - 2020 the national stillbirth rate for Black women was more than twice the rate for white women
 - Independent of socioeconomic and educational confounders!
 - Black women are 3 to 4 times more likely to die from pregnancy related causes than white women

Debbink MP et al. Racial and ethnic inequities in stillbirth in the US: Looking upstream to close the gap: Seminars in perinatology. Seminars in Perinatology 2024;48(1)151865.

Bridges KM. Racial disparities in maternal mortality. NYU Law Review. 2020; 95(5):1229-1318.

THE GOAL

Preventability

- In the US:
- At least 25% of stillbirths are potentially preventable using current technology
- 57% of potentially preventable stillbirths are due to placental insufficiency
- At least 47% of ≥ 24 week GA and ≥ 500 g non-anomalous stillbirths in the US are preventable today

Preventing stillbirths requires good data on its causes

- Few large international or local studies
- Poor investigation of causes (lack of placental examination or autopsy)
- Many different schemas for labeling causes prevent comparisons between studies
- Few practitioners with expertise and interest in stillbirth

Common causes of stillbirth

- **PLACENTAL ISSUES (~24% of all stillbirths)**
- **UMBILICAL CORD OBSTRUCTION (~10% of all stillbirths)**
- Infection (can be evident and specific in the placenta) (10-25% but up to 50% in resource limited countries)
- Maternal health conditions (often plays a role or is evidenced in placental pathology, for example HTN (hypertensive disorders) and DM (diabetes mellitus), increased in prevalence amongst underserved minorities)
- Genetic or anatomic abnormalities (can have placental pathology)
- From 15-60% are unexplained even with complete autopsy and placental examination

Determining the cause of stillbirth – what are the most important tools

- Placental pathology – remember it is poorly taught in residency so poorly examined in practice. Demand consultation by an expert.
- Cultures/antibody tests on the mother and/or the fetus and/or the placenta
- Fetal autopsy
- Genetic studies on the fetus and/or the placenta



Placental pathology

- Important tool to explain in utero events
- Is a specialized field with few experts
- Provides information which can predict maternal or pediatric immediate and future outcomes
- It reveals the most likely cause of death in ~34% of all stillbirths*
- Is triaged for full pathologic examination usually by the obstetric provider based on their interpretation of published criteria
 - Stillbirth is a critical triage criteria

*Stillbirth Collaborative Research Network Writing, G. (2011).
"Causes of death among stillbirths." JAMA 306(22): 2459-2468.

How do we improve the rate of placental examination and perinatal autopsies?

- All placentas for pregnancy losses should be sent to pathology
 - These are covered by nearly all insurance companies
 - I believe it should be mandatory
- All obstetric caregivers should be aware of the benefits of perinatal pathology
 - Perinatal pathology reveals the cause of death and risk of recurrence better than any other test
- All obstetric caregivers need to know the restriction possibilities, timetable, and basic procedure for perinatal autopsies
 - Autopsies are at no cost to the family
 - Restrictions are possible including restrictions against examining specific organs or parts of the body, or limiting the examination to specific organs or parts of the autopsy
 - Most religious requirements can be met
 - Autopsies are usually done within 1 or 2 days of the consent
- If possible, people of color should be the ones to address these issues to families of color who are grieving the loss

Thank you so much for your
attention

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