A STUDY OF NORMAL BIRTH WEIGHT FRESH STILLBIRTHS AT THREE ACADEMIC HOSPITALS

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Background
Globally an estimated 1.19 million stillbirths occur during labour, with almost all of these deaths occurring in low- and middle-income countries. In South Africa intrapartum fetal death is still very common, frequently occurring in situations of entirely normal labour.

Objectives
1) To determine the incidence of fresh stillbirths weighing ≥ 2500 g at three academic hospitals
2) To identify the direct cause, along with associated risk factors for these deaths
3) To identify avoidable factors relating to substandard intrapartum care with specific emphasis on intrapartum fetal heart rate monitoring.

Methods
This was a prospective, descriptive study conducted in Johannesburg, Gauteng at the Chris Hani Baragwanath Academic Hospital, Charlotte Maxeke Johannesburg Academic Hospital and Rahima Moosa Mother and Child Hospital from May 2011 until October 2012.

Results
There were 52 cases eligible for inclusion. The mean gestational age was 38.4±2.3 weeks with a mean birth weight of 3052±460 g. Meconium stained liquor was found in 23 (44.2%) cases. Thirty women (57.7%) had identifiable catastrophic events relating to the intrapartum stillbirth: 16 had abruptio placentae, 7 had cord prolapse, 4 had a ruptured uterus and there were 3 cases of entrapment of the aftercoming head of breech. Twenty-two women (42.3%) had appropriate fetal monitoring and 15 (28.8%) had inadequate/no fetal monitoring. Fifteen (28.8%) cases were diagnosed as intrauterine fetal deaths on arrival at hospital.

Conclusion
There appears to be a failure to detect or respond to evidence of fetal distress even in facilities with skilled staff and available resources.