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Fetocide Before Termination of Pregnancy in Singleton Pregnancy - Trends in England and Wales 2012-2020

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Objective

Fetocide is the practice of inducing fetal demise prior to termination of pregnancy. In England and Wales, it is recommended for terminations of pregnancy beyond 21⁺⁶ weeks of gestation. This project aims to analyse the trends in fetocide in singleton pregnancy in England and Wales between 2012 and 2020.

Methods

This project was a retrospective study that analysed data extracted from the Health and Social Act 4 (HSA4) forms submitted to the Department of Health and Social Care (DHSC). The data extracted by the DHSC included the prevalence of fetocide, methods of fetocide and termination, statutory grounds, gestation, provider, maternal age, ethnicity, and obstetric history. Data analysis was carried out to identify trends.

Results

Between 2012 and 2020 there were 9310 fetocides in England and Wales, which accounts for 0.5% of all abortions. There was an overall decrease in the prevalence of feticide from 1084 cases in 2012 to 1000 cases in 2020. However, this fluctuated across the study period with a trough of 712 cases in 2015 and a peak of 1195 cases in 2017. The most common method used was intracardiac injection of potassium chloride (67.2%). Examples of other methods used include injection of lidocaine, digoxin, intraamniotic urea and umbilical potassium chloride. The majority of fetocides were performed prior to medical abortions (58.0%). 55.8% of fetocides took place under Ground E of the Abortion Act 1967, and of these, the main indication was congenital malformations of the nervous system. Most fetocides took place at 23 weeks' gestation (40.2%) and in NHS hospitals (60.3%). Women undergoing fetocide were most commonly aged 30-34 years (38.3%) and of White ethnicity (78.6%).

Conclusion

Fetocide is a significant component of comprehensive abortion care for women undergoing the late second and the third trimester abortions. This study provides insight into how fetocide is carried out in England and Wales and highlights the impact of the Covid-19 pandemic service changes. Future research should analyse in more detail the pros and cons of the different methods of fetocide.